

McGraw-Hill of Columbia, N. Y.

(1) PLACE OF BIRTH

County of Lee
Township of Jones
or
Inc. Town of
or
City of
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH
STATE OF SOUTH CAROLINA.
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only

90732

Registration District No. 3005 Registered No. 145
(For use of Local Registrar)
St.; Ward

(2) Full Name of Child Clarence Lanigan If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Dec 18 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Levin Melvin Lanigan
(9) PRESENT POSTOFFICE OF FATHER Bishopville S.C.
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 27 (Years)
(12) BIRTHPLACE Lee County
(13) OCCUPATION Farming
(20) Number of children born to mother, including present birth Two 2

MOTHER.

(14) NAME BEFORE MARRIAGE Maggie Belin
(15) PRESENT POSTOFFICE OF MOTHER Bishopville S.C.
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 22 (Years)
(18) BIRTHPLACE Lee County S.C.
(19) OCCUPATION Housewife
(21) Number of children of this mother now living, including present birth Two 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 11 am M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) [Signature]
(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Jan 6 1917 (28) P. J. Corbitt Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

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