

Form No. 1

(1) PLACE OF BIRTH

County of Marion
Township of Red Bluff
or
Inc. Town of McCall
or
City of McCall

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

File No. — For State Registrar Only

18502

Registration District No. 3305

Registered No. 88
(For use of Local Registrar)

(No. 1 St. 1 Ward 1)
(If birth occurs in a hospital or other institution, give name of same, instead of street and number.)

(2) Full Name of Child Michael James Lacin (If child not yet named, make supplemental report as directed)

(3) Sex of Child Male (4) Twin or Triplet No (5) Number in order of birth 1 (6) Age of Parent 22 (7) DATE OF BIRTH June 16, 1922
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Theodore Lacin
(9) PRESENT POSTOFFICE OF FATHER McCall SC
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 38
(Year) (12) BIRTHPLACE Conover Co. Ga
(13) OCCUPATION Cotton Mill Work
(14) Number of children born to mother, including present birth 3

MOTHER.
(14) NAME BORN Georgia Miller
(15) PRESENT POSTOFFICE OF MOTHER McCall SC
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 31
(Year) (18) BIRTHPLACE Toccoa Ga
(19) OCCUPATION Domestic
(20) Number of children of this mother now living, including present birth 3

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 7:15 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Dr. J. H. Lacin (24) State where Physician or Midwife Georgia (25) Address of Physician or Midwife McCall SC

(Given name added from a supplemental report)

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

(27) Filed June 20, 1922 (28) J. H. Lacin 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.