

(1) PLACE OF BIRTH

County of Williamburg
 Township of Worwons
 or
 Inc. Town of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

10477

Registration District No. 4306 Registered No. 34
 (For use of Local Registrar)

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

(2) Full Name of Child Larrie LeGrand Lane If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL Boy (4) Twin or Triplet 1 (5) Number of children 1 (6) Are Parents Married yes (7) DATE OF BIRTH June 5 28
 To be answered only in event of Twin or Triplet (Type of Month) (Day) (Year)

FATHER			MOTHER		
(8) FULL NAME	<u>Rochester Lane</u>	(14) NAME BEFORE MARRIAGE	<u>Katie Lyle Baker</u>		
(9) PRESENT POSTOFFICE OF FATHER	<u>Kingstree SC</u>	(15) PRESENT POSTOFFICE OF MOTHER	<u>Kingstree SC</u>		
(10) COLOR OR RACE	<u>White</u>	(16) COLOR OR RACE	<u>White</u>		
(11) AGE AT LAST BIRTHDAY	<u>24</u>	(17) AGE AT LAST BIRTHDAY	<u>20</u>		
(12) BIRTHPLACE	<u>Lynchburg SC</u>	(18) BIRTHPLACE	<u>Yorkburg SC</u>		
(13) OCCUPATION	<u>Postal Letter Carrier</u>	(19) OCCUPATION			
(20) Number of children born to mother, including present birth	<u>One</u>	(21) Number of children of this mother now living, including present birth	<u>One</u>		

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 9 A. M., on the date above stated. (Hour A. M. or P. M.)

(23) (Signature) E. J. Halsey (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Kingstree SC

Given name added from a supplemental report

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

(27) Filed July 4 19 28 (28) J. T. Freeman 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.