

WHITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the
FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.
McCaw, of Columbia.

(1) PLACE OF BIRTH
County of Lancaster
Township of Lane Creek
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
64980

Registration District No. 2801 Registered No. 61
(For use of Local Registrar)

(2) Full Name of Child John Langman { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? single (5) Number in order of Birth 3 (6) Are Parents Married? yes (7) DATE OF BIRTH June 13, 1916
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME John Langman
(9) PRESENT POSTOFFICE OF FATHER Lancaster S.C.
(10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 70 (Years)
(12) BIRTHPLACE Lancaster S.C.
(13) OCCUPATION Harmonist
(14) Number of children born to mother, including present birth { 3

MOTHER.
(14) NAME BEFORE MARRIAGE Jerry Miller
(15) PRESENT POSTOFFICE OF MOTHER Lancaster S.C.
(16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 20 (Years)
(18) BIRTHPLACE Lancaster S.C.
(19) OCCUPATION Housewife
(21) 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 2 P. M.;
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) J. Miller
(24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Lancaster S.C.

Given name added from a supplemental report
....., 191.....
.....
Registrar

(26) Witness W. H. Haffner
(Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed June 1916 (28) W. H. Haffner
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.

fifth month of pregnancy.