

THE ANAMA CANAL
HEALTH DEPARTMENT
CERTIFICATE OF BIRTH

REG. NO. 11-1-1 (Revised 1-1-36)

CH 7791A 103

Page No. 45775

Place of Birth: Colon, R. P. Colon Hospital
(If birth occurs in a hospital or institution, give the name, location of street and number)

JOHN SEDRY MCCAIN II

(Add in no. and sex, date, hospital report or similar)

Sex of child: **MALE** (M. Male, F. Female, or other) (To be marked only in case of plural births)

1. Name of child: **LETTY DANE** (S) Date of birth: **AUGUST 29 1936**

2. Father: **John McCain** (No. Full address home: **Roberts Wright**)
 3. Mother: **Colon** (No. Full address home: **Same**)
 4. Color: **White** (or race: **White, Black, Mexican, Indian, Chinese**)
 5. Age at last birthday: **USA** (No. Age at last birthday: **USA**)
 6. Occupation: **None** (No. Occupation: **None**)

If attending to be reported, it required in any communication, with statement of sex, profession, or particular kind of work, general nature of business, occupation, or establishment in which he is employed (if an employer of The Panama Canal or Panama R.R. or other public utility, or of a street and electric railway, or other public utility).

7. Name of attending physician or midwife: **None**
 8. Name of hospital or institution: **None**

THE CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I certify that I attended the birth of the child, who was **born alive** **6:25 PM** on the date above stated.

If it is desired to give the father's name to an illegitimate child, the following should be stated:

I request that the baby be given my name

Signature: **H. F. Annis**
 Title: **Physician**
 Address: **Colon Hospital**

Date: **AUGUST 30 1936**

Signature: **John Wallace**
 Title: **Superintendent**

Where there are attending physicians or midwives, then the father, mother, and attending physician or midwife should be stated, as the case may be, in the certificate of the child. If otherwise, specify sex of child, name of the child, and the date when recorded in the office of the Registrar.

State name with date of registration report

(Sex, Profession, Race, Color, or Identification)

Live Birth Records
Colon Hospital
Panama Railroad Company

MARRIAGE AND DIVORCE RECORDS

LUCILE J. HICOP

By Commission, signed October 14, 1943

AFFIDAVIT OF DONALD LYNN LAMB

I am Donald Lynn Lamb, a naturalized Panamanian Citizen, male, single, with Panamanian Identification Number

N-19-41Z.

I do hereby attest that I am at present the Legal Representative of the private New York Company called the:

PANAMA RAILROAD COMPANY.

Registered in the Panama Public Registry in Ficha S.E. 942, Document 42417 in conformity with Certificado Number 769760 dated May 20, 2008.

I attest that we have recorded in the Live Birth Records of the Panama Railroad Company the following Live Birth.

"THE PANAMA CANAL"

HEALTH DEPARTMENT

CERTIFICATE OF LIVE BIRTH

Born in the City of Colon, Republic of Panama,

JOHN SIDNEY MCCAIN III

Male

Legitimate

August 29, 1936

Father - John McCain

Mother - Roberta Wright

Residence: Colon

Residence: Colon

Color - White

Color - White

Occupation: US Military

Occupation: Housewife

CERTIFICATE OF ATTENDING PHYSICIAN

Born alive at 6:25 PM

Signature R.F. Annis, Physician
August 29, 1936

Signed John Wallace
Superintendent

Further, your affiant sayeth naught.

Donald L. Lamb
DONALD LYNN LAMB

yo, Carlos Strah Castellón, Notario Público Décimo del Circuito de Panamá con Cédula N° 8-147-802

CERTIFICO:

Que la(s) firma(s) anterior(es) ha(n) sido reconocida(s) como suya(s) por los firmantes, por consiguiente dicha(s) firma(s) es(son) autentica(s).

Panamá _____ 06 JUN 2008
[Signature] *[Signature]*
TESTIGO TESTIGO
.....
Carlos Strah Castellón
Notario Público Décimo

