

FORM NO. 2  
MARGIN RESERVED FOR BINDING.  
WRITE 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  
McCaw, of Columbia

(1) PLACE OF BIRTH

County of Greenwood

Township of 11

or  
Inc. Town of Greenwood

or  
City of Greenwood

(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

85888

Registration District No. 120 Registered No. 102  
(For use of Local Registrar)

(2) Full Name of Child Nora Frances Cannon If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? girl (4) Twin or Triplet? — (5) Number in order of birth — (6) Are Parents Married? yes (7) DATE OF BIRTH Nov. 4, 1916  
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME Robert B. Cannon

(9) PRESENT POSTOFFICE OF FATHER Greenwood

(10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 41  
(Years)

(12) BIRTHPLACE Laurens County

(13) OCCUPATION Carpenter

(20) Number of children born to mother, including present birth 8

MOTHER.

(14) NAME BEFORE MARRIAGE Cornie Longshore

(15) PRESENT POSTOFFICE OF MOTHER Greenwood

(16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 35  
(Years)

(18) BIRTHPLACE Newberry

(19) OCCUPATION Housekeeping

(21) Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

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

(23) (Signature) Amanda X. Atkins

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Midwife 444 Maxwell Ave

Given name added from a supplemental report

....., 191.....

..... Registrar

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

(27) Filed 11/11/16 1916 (28) W A McLean  
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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