CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only
10590

1) PLACE OF BIRTH
County of Greenville.....
Township of .....
or
Town of ..... Registration District No. 22a Registered No. 203
(For use of Local Registrar)
or
City of Greenville, S. C. (No. 203 McGee St., ... 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...Julius Hollis Cannon Cameron Jr... { If child is not yet named, make supplemental report as directed

BOY OR GIRL?	(4) Twin or Triplet? (To be answered only in event of twins or triplets)	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH (Name of Month) (Day) (Year)
Boy			Yes	April 17, 1923

FATHER.

3) FULL NAME J. H. Cannon Cameron

4) PRESENT POSTOFFICE OF FATHER Greenville, S. C.

5) COLOR OR RACE White (12) AGE AT LAST BIRTHDAY 32 (Years)

13) BIRTHPLACE S. C.

14) OCCUPATION Furniture Salesman

15) Number of children born to mother, including present birth { 1

MOTHER.

(14) NAME BEFORE MARRIAGE Annie Alnerson

(15) PRESENT POSTOFFICE OF MOTHER Greenville, S. C.

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 22 (Years)

(18) BIRTHPLACE Greenville, S. C.

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth { 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

22) I hereby certify that I attended the birth of this child, who was Alive, at 11:20 P. M., on the date above stated.
(Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) C. C. Smith, M.D.

(24) State whether Physician or Midwife: Attd. (Bus. Hlth.)

(25) Address of Physician or Midwife

Given name added from a supplemental report

4/13/42, 191....

E. T. ..... Registrar

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

(27) Filed May. 10, 1923 (28) C. C. Smith
Local Registrar.

*Where 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.