

WRITE PLAINLY. WITH UNFAMING INK—THIS IS A PERMANENT RECORD.
 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 2.
 Office of Registrar, Columbia, S. C.

(1) PLACE OF BIRTH

County of Barrow
 Township of Red Oak
 or
 Inc. Town of
 or
 City of

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

No. 31789 X

Registration District No. 29 Registered No. 81
 (For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

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

(3) SEX girl (4) Type of Birth Normal (5) Number in order of birth 1 (6) Age of Mother 23 (7) DATE OF BIRTH Nov. 23
 To be answered only in case of Twin or Triplets (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Monty Cannon
 (9) PRESENT RESIDENCE OF FATHER Barrow
 (10) COLOR OR RACE negro (11) AGE AT LAST BIRTHDAY 23
 (12) BIRTHPLACE S. C.
 (13) OCCUPATION Farmer
 (14) Number of children born to mother, including present birth 2

MOTHER.
 (14) NAME BEFORE MARRIAGE Ma Lepton
 (15) PRESENT RESIDENCE OF MOTHER Barrow
 (16) COLOR OR RACE negro (17) AGE AT LAST BIRTHDAY 23
 (18) BIRTHPLACE S. C.
 (19) OCCUPATION Farmer
 (20) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE
 (21) I hereby certify that I attended the birth of this child, who was alive on the date above stated. (Signative or stillborn) (Hour A. M. or P. M.)
 (22) (Signature) Bella H. Hays
 (23) State whether Physician or Midwife Physician (24) Address of Physician or Midwife

Given name added from a supplemental report

 Registrar

(25) Witness
 (Signature of Witness necessary only when question 23 is signed by mother)
 (26) Date Nov. 24 1923 (27) Mrs. B. Hays

When there was no attending physician or midwife, then the father, householder, etc., must report as stillborn. No report is required before the fifth month of pregnancy.