

(1) PLACE OF BIRTH

County of Newberry
 Township of #. 10
 or
 Inc. Town of
 or
 City of

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

Registration District No. 3401

File No. - For State Registrar Only
21938

Registered No. 31
 (For use of Local Registrar)

(No. 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 Rosa Cannon If child is not yet named, make supplemental report as directed

(3) SEX OF CHILD girl (4) Twin or Triplet No (5) Number in order of birth 1 (6) Are Parents Married yes (7) DATE OF BIRTH July 11, 1923
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Virgil Cannon
 (9) PRESENT POSTOFFICE OF FATHER Lt. mlu
 (10) COLOR OR RACE black
 (11) AGE AT LAST BIRTHDAY 23 (Year)
 (12) BIRTHPLACE S. C.
 (13) OCCUPATION Farmer

MOTHER.
 (14) NAME BEFORE MARRIAGE Bessie Brenner
 (15) PRESENT POSTOFFICE OF MOTHER Lt. mlu
 (16) COLOR OR RACE black (17) AGE AT LAST BIRTHDAY 16 (Year)
 (18) BIRTHPLACE S. C.
 (19) OCCUPATION Housewife
 (20) Number of children of this mother now living, including present birth 1

(21) Number of children born to mother, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 5:30 P. M. (Born alive or stillborn) (Hour A. M. or P. M.)

on the date above stated.

(23) (Signature) Mary Wheeler

(24) State whether Physician or Midwife midwife

(25) Address of Physician or Midwife Little mlu

Given name added from a supplemental report

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

(27) Filed Aug 10, 1923 (28) Elberta Sease 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.