

Form No. 1

(1) PLACE OF BIRTH

County of *Horry*Township of *Griffith Sea*

Inc. Town of

City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

15340

Registration District No. *2506*Registered No. *4*

(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 *James Cannon*

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL *Boy*

(4) Twin or Triplet?

(5) Number in order of birth

(6) Are Parents Married? *yes*

(7) DATE OF BIRTH

May 9, 22
(Name of Month) (Day) (Year)

FATHER

(8) FULL NAME

Haup Cannon

(9) PRESENT POSTOFFICE OF FATHER

Ham Bluff N.C.

(10) COLOR OR RACE

White

(11) AGE AT LAST BIRTHDAY

32
(Years)

(12) BIRTHPLACE

Horry Co. S.C.

(13) OCCUPATION

Farmer

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

4

MOTHER

(14) NAME BEFORE MARRIAGE

Dillon Hodge

(15) PRESENT POSTOFFICE OF MOTHER

Ham Bluff N.C.

(16) COLOR OR RACE

White

(17) AGE AT LAST BIRTHDAY

23
(Years)

(18) BIRTHPLACE

Horry Co. S.C.

(19) OCCUPATION

Housewife

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

2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was at *6:00* A.M., on the date above stated. (Born *live* or stillborn) (Hour A.M. or P.M.)

(23) (Signature)

(24) State whether Physician or Midwife

Sallie McQueen
Midwife

Given name added from a supplemental report

(26) Witness

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

(27) Filed

May 18, 22

(28)

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 a stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

MARGIN RESERVED FOR BINDING.
WHEN 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 make the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.
MCRAW OF COLUMBIA, COLUMBIA, S. C.