

1. PLACE OF BIRTH

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

File No. — For State Registrar Only  
**67704**

County of Cherokee  
 Township of Landers  
 Inc. Town of \_\_\_\_\_  
 City of \_\_\_\_\_

Registration District So. 1145 Registered No. 145  
 (For use of Local Registrar)

City of \_\_\_\_\_ (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 Willie Francis Cuybourn If child is not yet named, make supplemental report as directed

(3) SEX Male (4) Twin or Triplet?  (5) Number in order of birth 1 (6) Are Parents Married?  (7) DATE OF BIRTH May 3 1906  
 (Age of Month) (Day) (Year)

**FATHER.**  
 (8) FULL NAME Wm Cuybourn  
 (9) PRESENT RESIDENCE Fort Lenoir  
 (10) COLOR Blk (11) AGE AT LAST BIRTHDAY 27 (Years)  
 (12) BIRTHPLACE Cherokee Co  
 (13) OCCUPATION Farmer  
 (14) Number of children born to mother, including present birth 1

**MOTHER.**  
 (14) NAME BEFORE MARRIAGE Ollie Melbony  
 (15) PRESENT POSTOFFICE OF MOTHER Fort Lenoir  
 (16) COLOR Blk (17) AGE AT LAST BIRTHDAY 19 (Years)  
 (18) BIRTHPLACE Cherokee Co  
 (19) OCCUPATION ✓  
 (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 born at 10 a.m. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Francis Cuybourn  
 (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife W. Lenoir

Given name added from a supplemental report \_\_\_\_\_  
 \_\_\_\_\_  
 Registrar

(26) Witness W. Lenoir (Signature of Witness necessary only when question 22 is signed by mark)  
 (27) Filed May 6 1906 (28) W. Lenoir Local Registrar

When there was no attending physician or midwife, then the father, householder, etc., should make this return. If the child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.