

1. PLACE OF BIRTH

CERTIFICATE OF BIRTH

File No. — For State Registrar Only

67704

County of Cherokee

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Township of LandersInc. Town of LandersRegistration District So. 1145Registered No. 145
(For use of Local Registrar)City of Landers(No. 1)St. 1Ward 1

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

2. Full Name of Child William Francis Cunningham

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

(1) Sex <u>Male</u>	(4) Twin or Triplet? <input checked="" type="checkbox"/>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <input checked="" type="checkbox"/>	(7) DATE OF BIRTH <u>Aug 3 1916</u> Month (Day) (Year)
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FATHER.

(11) NAME Wm Cunningham

(12) PRESENT RESIDENCE Fort Lenoir

(13) COLOR Blk (14) AGE AT LAST BIRTHDAY 22 (Years)

(15) BIRTHPLACE Cherokee Co

(16) OCCUPATION Farmer

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

MOTHER.

(18) NAME BEFORE MARRIAGE Ollie Melton

(19) PRESENT RESIDENCE Fort Lenoir

(20) COLOR Blk (21) AGE AT LAST BIRTHDAY 19 (Years)

(22) BIRTHPLACE Cherokee Co

(23) OCCUPATION Farmer

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

25. I hereby certify that I attended the birth of this child, who was abn at 10 A M. (Born alive or stillborn) (Hour A. M. or P. M.) on the date above stated.

(26) (Signature) Francis Cunningham

(27) State whether Physician or Midwife Midwife (28) Address of Physician or Midwife Landers

Given name added from a supplemental report

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Registrar

(29) Witness (Signature of Witness necessary only when question 28 is signed by mark) J. M. Mason

(30) Filed Aug 6 1916 (31) Local Registrar J. M. Mason

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.