

Form No. 1

(1) PLACE OF BIRTH

County of BerkeleyTownship of Contraor
Inc. Town ofor
City of

CERTIFICATE OF BIRTH

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

File No.—For State Registrar Only

3292

Registration District No. 708 Registered No. 21
(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 Young W. FergusonIf child is not yet named, make
supplemental report as directedBOY OR
GIRL? BOY(4) Twin
or Triplet? No(5) Number in
order of birth 23(6) Are
Parents
Married? Yes

(7) DATE OF

BIRTH

Feb 12th 1922
(Name of Month) (Day) (Year)

FATHER.

(2) FULL
NAME Saul Ferguson(3) PRESENT
POSTOFFICE
OF FATHER Cross St.(10) COLOR
OR
RACE W. 1/2(11) AGE AT LAST
BIRTHDAY 23
(Years)(12) BIRTHPLACE Berkeley Co(13) OCCUPATION Farming(20) Number of children born to
mother, including present birth 2

MOTHER.

(14) NAME BEFORE
MARRIAGE Mrs. Chislow(15) PRESENT
POSTOFFICE
OF MOTHER Cross St.(16) COLOR
OR
RACE W. 1/2(17) AGE AT LAST
BIRTHDAY 20
(Years)(18) BIRTHPLACE Berkeley Co(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, Born alive at 708 M.,
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Harriet Ferguson(24) State whether Physician or Midwife Midwife(25) Address of Physician or Midwife Cross St.Given name added from a supplemen-
tal report(26) Witness Lillian Cross(Signature of Witness necessary only
when question 23 is signed by mark)(27) Filed Feb 16th 22

(28)

D. W. Cross
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.MARGIN RESERVATION FOR INDEXING.
WHITES PLAINLY, WITH ENGLISH ALPHABET, SEPARATE BLANK FOR EACH CHILD, AND MARK THE
N. H.—In case of TWINS, mark the first-born, No. 1, the other, No. 2, etc. In question 5,
MOTHER OF CHILDREN, COLUMBIA, S. C.