

(1) PLACE OF BIRTH

County of Sumter

Township of

or
Inc. Town ofor
City of

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

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

24120

Registration District No. Registered No. 1539

(For use of Local Registrar)

(2) Full Name of Child Ahmed Ballard

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

3 BOY OR GIRL <u>1</u>	4 Twin or Triplet? To be answered only in event of Twins or Triplets	5 Number in order of birth	6 Are Parents Married?	7 DATE OF BIRTH <u>June 25 1928</u> (Month) (Day) (Year)
FATHER.			MOTHER.	
8 FULL NAME <u>James Ballard</u>			14 NAME BEFORE MARRIAGE <u>Charles Brown</u>	
9 PRESENT POSTOFFICE OF FATHER <u>Rt 2 Box 3 Sumter</u>			15 PRESENT POSTOFFICE OF MOTHER <u>Rt 2 Box 3 Sumter</u>	
10 COLOR OR RACE <u>Colored</u>			16 COLOR OR RACE <u>Colored</u>	
11 AGE AT LAST BIRTHDAY <u>32</u> (Years)			17 AGE AT LAST BIRTHDAY <u>26</u> (Years)	
12 BIRTHPLACE <u>Sumter S.C.</u>			18 BIRTHPLACE <u>Sumter</u>	
13 OCCUPATION <u>Farmer</u>			19 OCCUPATION	
20 Number of children born to mother, including present birth <u>5</u>			21 Number of children of this mother now living, including present birth <u>5</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was at M., on the date above stated. (Born live or stillborn) Hour A. M. or P. M.)(23) (Signature) Louise Jackson

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

Given name added from a supplemental report

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

(27) Filed (28) Carl R. Spence 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.

MCCAB OF COLUMBIA, COLUMBIA S. C.