

McCaw, of Columbia
FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 3.

(1) PLACE OF BIRTH

County of Charleston

Township of

or

Inc. Town of

or

City of Charleston

(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

48312

Registration District No. 9. A.

Registered No. 205

(For use of Local Registrar)

(2) Full Name of Child

Ellen Bernice Ferguson

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

(3) BOY OR GIRL?

Girl

(4) Twin or Triplet?

No

(5) Number in order of birth

1

(6) Are Parents Married?

Yes

(7) DATE OF BIRTH

Apr 22 1916

(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME

Wm Ferguson

(9) PRESENT POSTOFFICE OF FATHER

Charleston S.C.

(10) COLOR OR RACE

Black

(11) AGE AT LAST BIRTHDAY

40

(Years)

(12) BIRTHPLACE

Charleston S.C.

(13) OCCUPATION

Carpenter

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

8

MOTHER.

(14) NAME BEFORE MARRIAGE

Ellen FIELDS

(15) PRESENT POSTOFFICE OF MOTHER

Charleston S.C.

(16) COLOR OR RACE

Black

(17) AGE AT LAST BIRTHDAY

37

(Years)

(18) BIRTHPLACE

Charleston S.C.

(19) OCCUPATION

Domestic

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

8

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was born alive or stillborn, on the date above stated.

born alive 10 P. M.
(Hour A. M. or P. M.)

(23) (Signature)

Lucy X. Green

(24) State whether Physician or Midwife

Midwife

Given name added from a supplemental report

....., 191....

Registrar

(26) Witness

A. R. Meyer

(Signature of witness necessary only when question 22 is signed by mark)

(27) Filed 7-25 1916

(28) John M. Smith

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.

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