

Form No 1.

(1) PLACE OF BIRTH

County of York

Township of

or

Inc. Town of

or

City of Rock Hill

(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 Registration Only

45004

Registration District No. 44 B Registered No. 1881

(For use of Local Registrar)

(2) Full Name of Child Edward Magdelaine If child is not yet named, make appropriate entry as directed(3) BOY OR GIRL B(4) Twin or Triplet? X

To be answered only in case of Twin or Triplet

(5) Number in order of birth

(6) Are Parents Married? Yes(7) DATE OF BIRTH Dec 27 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL NAME G. P. Ferguson(9) PRESENT POSTOFFICE OF FATHER Rock Hill S.C.(10) COLOR OR RACE W. (11) AGE AT LAST BIRTHDAY 24 (Years)(12) BIRTHPLACE York Co. S.C.(13) OCCUPATION mechanic(20) Number of children born to mother, including present birth 2

MOTHER.

(14) NAME BEFORE MARRIAGE Rosa Moore(15) PRESENT POSTOFFICE OF MOTHER Rock Hill(16) COLOR OR RACE W. (17) AGE AT LAST BIRTHDAY 21 (Years)(18) BIRTHPLACE Cherokee Co. N.C.(19) OCCUPATION Domestic(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 B. 1916 9 A.M.
(Born alive or stillborn) (Hour A. M. or P. M.)
on the date above stated.(23) (Signature) David Lynn M.D.

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

Physician

Given name added from a supplemental report

....., 191.....

..... Registrar

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

(27) Filed 1/10/1916 (28) J. P. Miller Local Registrar

MAIN RECORD RESERVED FOR BINDING. WHITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD. M. H.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5. McCaw, of Columbia.

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