

WHILE TRAVELING, WITH UNFOLDING INC.—THIS IS A PERMANENT RECORD.
N. B.—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 6.

(1) PLACE OF BIRTH		CERTIFICATE OF BIRTH STATE OF SOUTH CAROLINA Bureau of Vital Statistics State Board of Health		File No.—For State Registrar Only 2602	
County of <u>Sumter</u> Township of <u>Ashepung</u> or Inc. Town of or City of		Registration District No. <u>1185</u>		Registered No. (For use of Local Registrar)	
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)		(No. St. Ward)			
(2) Full Name of Child <u>Shirley Ferguson</u>		(If child is not yet named, make supplemental report as directed)			
(3) BOY OR GIRL <u>girl</u>	(4) Twin or Triplet? <u>No</u> <small>To be answered only in event of Twins or Triplets</small>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Dec 22 1918</u> <small>(State of Month) (Day) (Year)</small>	
FATHER. (8) FULL NAME <u>W. C. Ferguson</u> (9) PRESENT POSTOFFICE OF FATHER <u>Ramoth SC</u> (10) COLOR OR RACE <u>negro</u> (11) AGE AT LAST BIRTHDAY <u>27</u> (Year) (12) BIRTHPLACE <u>Sumter SC</u> (13) OCCUPATION <u>farmer</u> (20) Number of children born to mother, including present birth <u>17</u>			MOTHER. (14) NAME BEFORE MARRIAGE <u>Shirley Elliott</u> (15) PRESENT POSTOFFICE OF MOTHER <u>Ramoth SC</u> (16) COLOR OR RACE <u>negro</u> (17) AGE AT LAST BIRTHDAY <u>22</u> (Year) (18) BIRTHPLACE <u>Sumter SC</u> (19) OCCUPATION <u>housewife</u> (21) Number of children of this mother now living, including present birth <u>17</u>		
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE* (22) I hereby certify that I attended the birth of this child, who was at P.M., on the date above stated. (23) (Signature) <u>midwife</u> (24) State whether Physician or Midwife <u>midwife</u> (25) Address of Physician or Midwife <u>Ashepung rd</u> Given name added from a supplemental report (26) Witness <u>H. P. Hardley</u> (Signature of Witness necessary only when question 23 is signed by mark) (27) Filed <u>19</u> (28) <u>H. P. Hardley</u> 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.					

Master of Columns, Columbia, S. C.