

Form No. 1

## (1) PLACE OF BIRTH

County of SumterTownship of Wright Creek

Inc. Town of .....

City of .....

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

(2) Full Name of Child Eloise SingletonFile No.—For State Registrar Only  
32468Registration District No. .... Registered No. ....  
(For use of Local Registrar)

(3) BOY OR GIRL <u>Girl</u>	(4) Twin or Triplet? <u>No</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Sept. 9, 1922</u> (Name of Month) (Day) (Year)
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FATHER.		MOTHER.	
(8) FULL NAME <u>William Singleton</u>	(14) NAME BEFORE MARRIAGE <u>Ada Bryson</u>	(9) PRESENT POSTOFFICE OF FATHER <u>Rembert S.C.</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Rembert S.C.</u>
(10) COLOR OR RACE <u>negro</u>	(11) AGE AT LAST BIRTHDAY <u>38</u> (Year)	(16) COLOR OR RACE <u>negro</u>	(17) AGE AT LAST BIRTHDAY <u>20</u> (Year)
(12) BIRTHPLACE <u>Sumter Co</u>	(18) BIRTHPLACE <u>Sumter Co</u>	(13) OCCUPATION <u>farmer</u>	(19) OCCUPATION <u>housewife</u>
(20) Number of children born to mother, including present birth <u>1</u>	(21) Number of children of this mother now living, including present birth <u>1</u>		

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was .... alive .... at 6:01 M.,  
on the date above stated (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) John Wells(24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Rembert S.C.

Given name added from a supplemental report

(26) Witness N.C. Haller  
(Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Oct. 16, 1922 (28) N.C. Haller  
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 RESERVED FOR BINDING.  
WRITE PLAINLY, WITH UNFADING INK.—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 5.

McGraw-Hill, Columbia, S. C.