Form No. 1

(1) PLACE OF BIRTH

County of Colleton

Township of St Paul

or

Inc. Town of .....

or

City of .....

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

File No.—For State Registrar Only
3516

Registration District No. 910

Registered No. .....
(For use of Local Registrar)

(No. ..... St.; ..... Ward)

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

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

(2) Full Name of Child Mary F. Hamilton Singleton

(3) BOY OR GIRL?	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married?	(7) DATE OF BIRTH: (Month)	(Day)	(Year)
Girl	Twins	8	Yes	Jan	27	1912

To be answered only in event of Twins or Triplets

FATHER

(8) FULL NAME: George Singleton

(9) PRESENT POSTOFFICE OF FATHER: Meggetts S.C.

(10) COLOR OR RACE: Col

(11) AGE AT LAST BIRTHDAY: 40 (Years)

(12) BIRTHPLACE: Dont Know

(13) OCCUPATION: Laborer On Turpentine Still

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

MOTHER

(14) NAME BEFORE MARRIAGE: Elsie Dont Know Other

(15) PRESENT POSTOFFICE OF MOTHER: Meggetts S.C.

(16) COLOR OR RACE: Col

(17) AGE AT LAST BIRTHDAY: 34 (Years)

(18) BIRTHPLACE: Dont Know

(19) OCCUPATION: Home wife

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was Alive at 3:30 A.M. (born alive or stillborn) (Hour A. M. or P. M.) on the date above stated.

(23) (Signature) Mary F. Stewart

(24) State whether Physician or Midwife: Mid Wife

(25) Address of Physician or Midwife: Longer Island S.C.

(Given name added from supplemental report .....) 19.... Registrar

(26) Witness W.H. Seaman
(Signature of Witness necessary only when question 22 is signed by mark)

(27) Filed ..... 19....

(28) W.H. Seaman 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.

Notice to Informant: Read carefully the instructions on the back of this blank before filling out the answers to questions. Write plainly with pen and ink and make the certificate complete and legible. Do not use pencil. Sign your name as informant in full.

MARRIAGE PROHIBITED FOR BINDING.
WHITE PERSONS, WITH NEGROES AND PERSONS OF NEGRO DESCENT TO THE THIRD GENERATION, INCLUSIVE, OR WITH PERSONS WHO HAVE ONE-EIGHTH OR MORE NEGRO BLOOD.—Section 5 of the Constitution of South Carolina, adopted in 1895, provides that all marriages between a white person and a negro, or between a white person and a person who has one-eighth or more negro blood, shall be forever prohibited, null and void.