

Form No. 1.

(1) PLACE OF BIRTH

County of Horry  
Township of Buck  
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  
64777

Registration District No. 2201 Registered No. 37  
(For use of Local Registrar)  
St.; Ward

(2) Full Name of Child Ernest Singleton

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

(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>June 21 1916</u> (Name of Month) (Day) (Year)
FATHER.			MOTHER.	
(8) FULL NAME <u>H. B. Singleton</u>	(14) NAME BEFORE MARRIAGE <u>Gussie Fullwood</u>			
(9) PRESENT POSTOFFICE OF FATHER <u>Todaville S.C.</u>	(15) PRESENT POSTOFFICE OF MOTHER <u>Todaville S.C.</u>			
(10) COLOR OR RACE <u>White</u> (11) AGE AT LAST BIRTHDAY <u>29</u> (Years)	(16) COLOR OR RACE <u>White</u> (17) AGE AT LAST BIRTHDAY <u>24</u> (Years)			
(12) BIRTHPLACE <u>Horry</u>	(18) BIRTHPLACE <u>Horry</u>			
(13) OCCUPATION <u>Farmer</u>	(19) OCCUPATION <u>Wife of Farmer</u>			
(20) Number of children born to mother, including present birth <u>2</u>	(21) Number of children of this mother now living, including present birth <u>2</u>			

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child who was Alive at 10 A. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Anna Chapman Midwife  
(24) State whether Physician or Midwife (25) Address of Physician or Midwife Port Charlotte S.C.

Given name added from a supplemental report  
191  
Registrar

(26) Witness J. F. Harper  
Signature of Witness necessary only when question 23 is signed by mark  
(27) Filed June 28 1916 (28) S. F. Rouse  
Local Registrar

MARGIN RESERVED FOR BINDING.  
WHITE 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 N. No. 1. THE OTHER, No. 2, etc., in question 5.  
McDaw, of Columbia.

\*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.