

(1) PLACE OF BIRTH		CERTIFICATE OF BIRTH		File No.—For State Registrar Only	
County of <u>Columbia</u>		STATE OF SOUTH CAROLINA.		58883	
Township of <u>Durham</u>		Bureau of Vital Statistics			
or Inc. Town of		Registration District No. <u>800</u>		Registered No. <u>53</u>	
City of		(No. St.; Ward)		(For use of Local Registrar)	
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)					
(2) Full Name of Child <u>Willie Singleton</u> } If child is not yet named, make supplemental report as directed					
(3) BOY OR GIRL? <u>Boy</u>	(4) Twin or Triplet? <u>1</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Apr 5</u> 19 <u>16</u>	
To be answered only in event of Twins or Triplets			(Name of Month) (Day) (Year)		
FATHER.			MOTHER.		
(8) FULL NAME <u>Henry Singleton</u>			(14) NAME BEFORE MARRIAGE <u>Lottie Bryan</u>		
(9) PRESENT POSTOFFICE OF FATHER <u>HT Motte</u>			(15) PRESENT POSTOFFICE OF MOTHER <u>HT Motte</u>		
(10) COLOR OR RACE <u>Negro</u>	(11) AGE AT LAST BIRTHDAY <u>25</u> (Years)	(16) COLOR OR RACE <u>Negro</u>		(17) AGE AT LAST BIRTHDAY <u>23</u> (Years)	
(12) BIRTHPLACE <u>SC</u>			(18) BIRTHPLACE <u>SC</u>		
(13) OCCUPATION <u>Home Laborer</u>			(19) OCCUPATION <u>—</u>		
(20) Number of children born to mother, including present birth <u>4</u>			(21) Number of children of this mother now living, including present birth <u>3</u>		
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*					
(22) I hereby certify that I attended the birth of this child, who was <u>alive</u> at <u>12</u> M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)					
(23) (Signature) <u>W. H. Motte</u>			(25) Address of Physician or Midwife <u>HT Motte</u>		
(24) State whether Physician or Midwife			(25) Address of Physician or Midwife		
Given name added from a supplemental report			(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)		
191			(27) Filed <u>May 15</u> 191 <u>6</u> (28) <u>W. H. Motte</u> Local Registrar		
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.