

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA.

Bureau of Vital Statistics

State Board of Health

File No. — For State Registrar Only

53907

(1) PLACE OF BIRTH

County of SumterTownship of Privateeror  
Inc. Town of .....or  
City of .....

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

Registration District No. 4104Registered No. 18

(For use of Local Registrar)

(2) Full Name of Child. Peter Beatrice Singleton

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

(3) BOY OR GIRL Boy

(4) Twin or triplet?

(5) Number in order of birth

To be answered only in event of Twins or Triplets

(6) Are Parents Married? Yes

(7) DATE

BIRTH Mar. 11, 1910  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Peter Singleton(9) PRESENT POSTOFFICE OF FATHER Sumter A.C.R.#2(10) COLOR OR RACE Negro(11) AGE AT LAST BIRTHDAY 38

(Years)

(12) BIRTHPLACE Sumter Co. S.C.(13) OCCUPATION Farming(14) Number of children born to mother, including present birth 6

## MOTHER.

(14) NAME BEFORE MARRIAGE Rosa Willis(15) PRESENT POSTOFFICE OF MOTHER Sumter A.C.R.#2(16) COLOR OR RACE Negro(17) AGE AT LAST BIRTHDAY 23

(Years)

(18) BIRTHPLACE Beaufort Co. S.C.(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth 4

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was born alive at 8 a M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)(23) (Signature) Harriet S. Pierson

(24) State whether Physician or Midwife (25) Address of Physician or Midwife

MidwifeFindale S.C.

Given name added from a supplemental report

(26) Witness Peter Singleton

(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Mar 21, 1910(28) Alas B. Roth

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.

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