

(1) PLACE OF BIRTH

County of Sumter

Township of Stateburg

Inc. Town of

City of

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

CERTIFICATE OF BIRTH
 STATE OF SOUTH CAROLINA.
 Bureau of Vital Statistics
 State Board of Health

File No. — For State Registrar Only
50619

Registration District No. 4109 Registered No. 13
 (For use of Local Registrar)

(2) Full Name of Child March Singleton Jr. { If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 45 (6) Are Parents Married? yes (7) DATE OF BIRTH Feb. 11, 1914
 (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME March Singleton
 (9) PRESENT POSTOFFICE OF FATHER Sumter, S.C. R3
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 45 (Years)
 (12) BIRTHPLACE So. Ca
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth { Nine }

MOTHER.
 (14) NAME BEFORE MARRIAGE Clara Brewer
 (15) PRESENT POSTOFFICE OF MOTHER Sumter S.C. R3
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 39 (Years)
 (18) BIRTHPLACE So. Ca
 (19) OCCUPATION House Keeper
 (21) Number of children of this mother now living, including present birth { Four }

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

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

(23) (Signature) Emma F. Butler (24) State whether Physician or Midwife Midwife (25) Address of Physician or Midwife Sumter S.C. R3

Given name added from a supplemental report
 _____, 191____

 Registrar

(26) Witness A. F. Neely (Signature of Witness necessary only when question 23 is signed by mark)
 (27) Filed 2/10 191____ (28) A. F. Neely 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.