

(1) PLACE OF BIRTH

CERTIFICATE OF BIRTH

File No. — For State Registration
50448

County of *Charleston*
Township of *Beaufort*
or
Inc. Town of *Beaufort*
or
City of *Beaufort*

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

Registration District No. *40000* Registered No. *5*
(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 *Carl Lewis Mendenhall* } 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 *4* (6) Are Parents Married? *Yes* (7) DATE OF BIRTH *Feb 25 1943*
To be specified only in event of Twin or Triplet (Name of Month) (Day) (Year)

FATHER:
(8) FULL NAME *Edie Mendenhall*
(9) PRESENT POSTOFFICE OF FATHER *Indianapolis*
(10) COLOR OR RACE *White* (11) AGE AT LAST BIRTHDAY *36* (Years)
(12) BIRTHPLACE *No. Carolina*
(13) OCCUPATION *mill Operative*
(20) Number of children born to mother, including present birth *Eight (8)*

MOTHER:
(14) NAME BEFORE MARRIAGE *Virginia Barnes*
(15) PRESENT POSTOFFICE OF MOTHER *Indianapolis*
(16) COLOR OR RACE *White* (17) AGE AT LAST BIRTHDAY *38* (Years)
(18) BIRTHPLACE *Jackson Co. N. C.*
(19) OCCUPATION *Housewife*
(21) Number of children of this mother now living, including present birth *(6) Six*

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was *alive* at *2:20* P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) *J. D. Brown*
(24) State whether Physician or Midwife *Physician* (25) Address of Physician or Midwife *Wellford, S. C.*

Given name added from a supplemental report
12/8/43 191.....
L. A. Riser, M.D. Registrar

(26) Witness *Mar 10 1943* (Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed *191* (28) *J. D. Brown* 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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McCaw of Columbia