

(1) PLACE OF BIRTH

County of Lancaster
Township of Plainfield
or
Inc. Town of.....
or
City of.....

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

No. 41256

Registration District No. 506 Registered No. 137
(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 Wendell Douglas Crenshaw

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

(3) SEX OF CHILD Male (4) Type of Triplet To be covered only in event of Triplet or Triplet (5) Number in order of birth 1 (6) Are Parents Married Yes (7) DATE OF BIRTH Dec 10 1935
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Luther McDuff Crenshaw
(9) PRESENT RESIDENCE OF FATHER Death Springs Rd
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 32
(12) BIRTHPLACE Lancaster Co.
(13) OCCUPATION Farmer
(14) Number of children born to mother, including present birth 10

MOTHER.
(14) NAME BEFORE MARRIAGE Betha Bevell
(15) PRESENT RESIDENCE OF MOTHER Death Springs Rd
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 28
(18) BIRTHPLACE Lancaster Co.
(19) OCCUPATION Domestic
(21) Number of children of this mother now living, including present birth 10

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was... alive ...at... 11:45 P. M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Wm J. ...
(24) State whether Physician or Midwife
(25) Address of Physician or Midwife

Given name added from a supplemental report
.....
.....
..... 19 ..
Registrar

(26) Witness (Signature of Witness necessary only when question 22 is signed by mark)
(27) Filed Dec 10 1935 at ... (28) ...

*When there was no attending physician or midwife, then the father, householder, etc., should make this report. 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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FIRST-CLASS, No. 1. THE OTHER, No. 2. etc. 2. etc. 3. etc. 4. etc. 5. etc. 6. etc. 7. etc. 8. etc. 9. etc. 10. etc.