

(1) PLACE OF BIRTH

County of AikenTownship of of
Inc. Town Diamond
or
City of

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

NOTE—For Local Registration

S-1544

Registration No. 87
 (For use of Local Registrars)

583

Street Ward)

(If birth occurs in a hospital or other institution, give name of same instead of street and number)
 (If child is not yet named, make
 temporary report as follows—
 (1) DATE 24 Oct 1942
 (2) NAME Elbert Meadine
 (3) MOTHER'S NAME Lettie Collier(2) Full Name of Child Elbert Meadine(1) BOY OR
GIRL Boy(2) TWIN
OR TRIPLE
To be answered only in event of Twin or Triplets(3) NUMBER IN
ORDER OF BIRTH
1(4) AGE
IN MONTHS 5(5) DATE 24 Oct 1942
BIRTHDAY 1942

MOTHER.

(6) FULL
NAME Elbert Meadine(7) PRESENT
POSITION
OF FATHER
Student(8) COLOR
OR
RACE White(9) BIRTHPLACE
Aiken(10) OCCUPATION
Misc. work(11) Number of children born to
mother, including present birth 1 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive on the date above stated.(23) (Signature) S.P. Carpenter(24) State where Physician or Midwife South Carolina(25) Address of physician or midwife 100 W. Main St., Aiken, S.C.

Given name added from a supplemental report

(26) Witness H. H. Pleasing(Signature of Witness necessary only
when question 23 is signed by man)(27) Date 24 Oct 1942(28) (Signature) H. H. Pleasing Local RegistrarWhen 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.When there was no attending physician or midwife, then the father, householder, etc., should make this return
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