

## (1) PLACE OF BIRTH

County of Anderson

Township of .....

Inc. Town of .....

City of .....

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

## (2) Full Name of Child

(3) BOY OR GIRL girl(4) Twin or Triplet  
To be answered only in event of Twin or Triplet

(5) Number in order of birth

(6) Are Parents Married? yes(7) DATE OF BIRTH Dec. 11, 1923  
(Name of Month) (Day) (Year)

## FATHER.

(8) FULL NAME Doyle Hudgens.(9) PRESENT POSTOFFICE OF FATHER Anderson SC  
Jaxaway station(10) COLOR OR RACE w (11) AGE AT LAST BIRTHDAY 21  
(Year)(12) BIRTHPLACE And Co.(13) OCCUPATION Textile

(20) Number of children born to mother, including present birth

## MOTHER.

(14) NAME BEFORE MARRIAGE Onie Shirley(15) PRESENT POSTOFFICE OF MOTHER Jaxaway station(16) COLOR OR RACE w (17) AGE AT LAST BIRTHDAY 17  
(Year)(18) BIRTHPLACE ga.(19) OCCUPATION domestic

(21) Number of children of this mother now living, including present birth

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born alive at 9 P. M.  
(Born alive or stillborn) (Hour A. M. or P. M.)  
on the date above stated.(23) (Signature) Anderson SC

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

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

F. B. CRAYTON,(27) Filed 19 (28)

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.

(Date of)

Address Route 2, Anderson SCFiled AUG. 20, 1924

Registrar

STATE OF SOUTH CAROLINA

COUNTY OF GREENWOOD

PERSONALLY appeared before me Doyle Ludon Hudgens and Lee Onnie Shirley Hudgens who being duly sworn depose and say: That they are the father and mother of a child who was named Ruth Lucille at the time of its birth on December 10, 1923; that the birth certificate on file in the office of the State Board of Health, Bureau of Vital Statistics, and bearing Number 38403 shows the name of this child to be Onie Lee Hudgens; that they have no child by the name of Onie Lee and do not know of the reason or authority of the doctor in recording the child's birth in the name of Onie Lee.

Lee Onnie Hudgens

Doyle L. Hudgens

SWORN and subscribed to  
before me this 15  
of April, 1939.

Paul R. Burgess  
Notary Public for S.C.