

WRITING FLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD. IN CASE OF TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH
 County of Lexington
 Township of Black Creek
 or
 Inc. Town of
 or
 City of (No. St.; Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)
(2) Full Name of Child Bessie Jones Hudson { If child is not yet named, make supplemental report as directed

File No.—For State Registrar Only
90768

(3) BOY OR GIRL? Girl (4) Twin or Triplet? — (5) Number in order of birth 2 (6) Are Parents Married? Yes (7) DATE OF BIRTH Dec. 28, 1916
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

FATHER.
 (8) FULL NAME Robert Hudson
 (9) PRESENT POSTOFFICE OF FATHER Lexington S.C.
 (10) COLOR OR RACE Black (11) AGE AT LAST BIRTHDAY 28 (Years)
 (12) BIRTHPLACE Lexington S.C.
 (13) OCCUPATION Law Milling
 (20) Number of children born to mother, including present birth 2

MOTHER.
 (14) NAME BEFORE MARRIAGE Bessie Jones
 (15) PRESENT POSTOFFICE OF MOTHER Lexington
 (16) COLOR OR RACE Black (17) AGE AT LAST BIRTHDAY 24 (Years)
 (18) BIRTHPLACE Lexington S.C.
 (19) OCCUPATION House Wife
 (21) Number of children of this mother now living, including present birth 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Alive at 7 PM. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)
 (23) (Signature) Roddie Wiley
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife Midwife Pelham S.C.

Given name added from a supplemental report
 (20) Witness (Signature of Witness necessary only when question 23 is signed by mark)
 19 _____ Registrar (27) Filed Dec. 30, 1916 (28) G. C. Gasth 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.

1916-17
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 2018-19
 2020-21
 2022-23
 2024-25