

ALABAMA STATE BOARD OF HEALTH—BUREAU OF VITAL STATISTICS
DELAYED CERTIFICATE OF BIRTH

State File No. 255

1. Full name at birth *Lewis, Rufus Andrews* 200 2. Sex *Male*
3. Place of birth *Montgomery* Co. 51 State of *Alabama* 4. Date of birth *Nov. 30* 1906
(City, Town or Rural) (County) Month Day Year

THE FATHER 5. Full name *Jerry Lewis* 6. Where born? *Montgomery Co.* 7. Color *Col.*
THE MOTHER 8. Full name before marriage *Lula Robinson* 9. Where born? *Montgomery Co.* 10. Color *Col.*

AFFIDAVIT BY REGISTRANT—I hereby declare upon oath that the above statements about my birth are true and correct.
(Signed) *Rufus Andrews Lewis* Full address *818 So Union Street*
Sworn to and subscribed before me this the *24* day of *Sept.* 19*43*

(Seal) My commission expires *Jan. 22, 1946* For State of *Ala.* County of *Montgomery*
F. A. Clayton Notary Public

AFFIDAVIT BY CLOSE RELATIVE (Or Other Person)—I hereby declare upon oath that I have known the applicant all his life and that the above statements are true and correct to the best of my knowledge and belief—for the following reasons:
I know when this child was born & raised him from a baby
(Signed) *Lezzie Thomas* Full address *101 Myrtle Street*
Sworn to and subscribed before me this the *24* day of *Sept.* 19*43*

(Seal) My commission expires *Jan. 22, 1946* For State of *Ala.* County of *Montgomery*
F. A. Clayton Notary Public
(DO NOT WRITE BELOW THIS LINE)

SUPPORTING EVIDENCE		Date Original Document Was Made
Name and Kind of Document and By Whom Issued and Signed		
1 <i>Child's Birth Record - State Health Dept. 15-337- Feb. 12, 1939</i>		
2 <i>Application for Marriage License - Montgomery Feb. 25, 1935</i>		
3		

Information Concerning Registrant as Stated in Above Listed Documents			
Birth Date or Age	Birthplace	Name of Father	Name of Mother
1 <i>32+</i>	<i>Montgomery, Ala.</i>		
2	<i>Alabama</i>		
3			

I hereby certify that I have reviewed the evidence recorded above and that the information is as noted in these abstracts. This certificate was filed on the *28* day of *Sept.* 19 *43*
Ralph W. Roberts By *Dorey Bullard*
State Registrar of Vital Statistics Authorized Clerk in the Bureau

CERTIFIED
VALID ONLY IF STATE SEAL AND SIGNATURE
OF STATE REGISTRAR ARE IMPRINTED HEREON



AUG 18, 1971

THE ABOVE IS AN
EXACT COPY OF THE
ORIGINAL RECORD
FILED IN THE BUREAU
OF VITAL STATISTICS
ALABAMA
DEPARTMENT OF HEALTH
MONTGOMERY, ALA.

Ralph W. Roberts
STATE REGISTRAR

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