

DELAYED CERTIFICATE OF BIRTH

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139 22-051010

| | | | | | |
|---------------|----------------|-----------------|--------|---------------------------------|---------------|
| City of Birth | | County of Birth | | Florence | |
| Name at Birth | JANNIE JOHNSON | Sex | Female | Date of Birth | Jan. 24, 1922 |
| Full Name | | Herbert Johnson | | FATHER | |
| | | | | Race or Color Black | |
| Birth Date | | Place of Birth | | State or Country South Carolina | |
| Maiden Name | | Laura Emanuel | | MOTHER | |
| | | | | Race or Color Black | |
| Birth Date | | Place of Birth | | State or Country South Carolina | |

The above statements are true to the best of my knowledge and belief.

Jannie L. Lighter
 LEGAL SIGNATURE OF PERSON REGISTERED IF 18 YEARS OLD OR OLDER. SIGNATURE OF PARENT OR GUARDIAN IF PERSON REGISTERED IS UNDER 18 YEARS OF AGE.

Subscribed and sworn to before me this 15 day of June, 1983

at Florence SC
 (County) (State) (L.S.)

Alta G. Lewis
 Notary Public

NOTARY
 SEAL

My Commission expires October 15, 1989

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE

| Kind of Document | Place issued | Date Filed |
|---------------------------------------|----------------|---------------|
| 1 US census report sc 4-039-406 | Washington, DC | Apr. 1, 1930 |
| 2 Health service record no number | Florence, SC | Nov. 19, 1974 |
| 3 Mother's death cert. #139-62-018239 | Columbia, SC | Dec. 18, 1962 |
| 4 | | |

| Birth Date or Age | Birth Place | Name of Father | Maiden Name of Mother |
|-------------------|-----------------|-----------------|-----------------------|
| 1 age 8 | Florence County | Herbert Johnson | Laura (Johnson) |
| 2 Jan. 24, 1922 | Florence County | | |
| 3 | | | Laura Emanuel |
| 4 | | | |

I hereby certify that no prior birth certificate is on file for the person named on this delayed birth certificate.

Registrar:

Date filed:

Ann G. Owens
 June 20, 1983

I have reviewed the evidence submitted to establish the facts of birth. The abstract of the evidence appearing above accurately reflects the nature and contents of the document.

Alta G. Lewis Deputy Registrar
 Signature and Title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE