

DELAYED CERTIFICATE OF BIRTH

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139 22-050788

City of Birth	County of Birth Chester		
Name at Birth Marion Beaufort Weir	Sex Female	Date of Birth Jan. 19, 1922	
Full Name Leonard Weir	FATHER	Race or Color White	
Birth Date Dec. 13, 1886	Place of Birth	State or Country S. C.	
Maiden Name Mamie Anderson	MOTHER	Race or Color White	
Birth Date Jan. 9, 1896	Place of Birth	State or Country S. C.	

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

SIGNATURE OF PERSON REGISTERED OR OF PARENT OR GUARDIAN
IF UNDER 18 YEARS OF AGE*Marion C. Lee*
(Exactly as used at present time)

* If married woman sign maiden name here also

Marion Beaufort Weir

Subscribed and sworn to before me this 31 day of March, 19 80
 at Chester S. C. *Betty B. Young*
 (County) (State) (L.S.) Notary Public
 My Commission expires 8-18-81
 NOTARY SEAL

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place Issued	Date Filed
1 Sister's Birth Cert. # 139-20-047553	Columbia, S. C.	2-14-21
2 Southland Life Ins. Co. Pol.#52-110425	Dallas, Tex.	1-3-1970
3 Daughter's Birth Cert. #139-46-029866	Columbia, S. C.	9-23-46
4		

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1		Leonard Weir	Mamie Anderson
2 1-19-22	S. C.		
3 Age 24	S. C.		
4			

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

Registrar: *Ann Y Owens*Date filed: *April 9, 1980*

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.

Betty B. Young, Deputy Registrar I
Signature and Title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE