

DHEC 615-25M-5/75

DELAYED CERTIFICATE OF BIRTH
SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENT

Birth No. 139—

22 050214

STATE OF	South Carolina	(L.S.)	County of Birth	Chesterfield
COUNTY OF	Chesterfield		City of Birth	Chesterfield, S.C.
Name at Birth	Odessa Sara Mangum	Sex	Female	Date of Birth December 27, 1922
Full Name	Walter Mangum	FATHER		Race or Color W
Birth Date	unknown	Place of Birth	(State or Country) South Carolina	
Maiden Name	Fannie Tadlock	MOTHER		Race or Color
Birth Date	unknown	Place of Birth	(State or Country) South Carolina	

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

Odessa Sara Mangum
 (Exactly as used at present time)

*If married woman sign maiden name here also

Subscribed and sworn to before me this 9th day of February, 1976NOTARY
SEAL

Lena R. Brooks
 Notary Public

My commission expires April 14, 1982

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place Issued	Date Filed
1 Appl. Soc. Sec. Acct. #251-28-0612	Baltimore, Maryland	Feb. 8, 1961
2 Brother's Birth Record #139-16 051739	Columbia, S.C.	Mar. 30, 1916
3 Hospital Record—Mercy Hospital	Charlotte, N.C.	Dec. 27, 1970
4		

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1 Dec. 27, 1922	Chesterfield, S.C.	Walter Mangum	Frances Tadlock
2		Walter Mangum	Fannie Tadlock
3 Dec. 27, 1922			
4			

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

Registrar: *Doris M. Reeves*Date filed: *March 4, 1974*

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. Deputy Co.

Lena R. Brooks
 Registrar
 Signature and title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE