

# DELAYED CERTIFICATE OF BIRTH

## SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139 -23-049023

City of Birth <u>Leesville</u>		County of Birth <u>Lexington</u>	
Name at Birth <u>Annie Lou Taylor</u>	Sex <u>Female</u>	Date of Birth <u>October 1, 1923</u>	
Full Name <u>Ruben Taylor</u>		Race or Color <u>White</u>	
Birth Date <u>December 9, 1887</u>	Place of Birth <u>South Carolina</u>	State or Country <u>South Carolina</u>	
MOTHER		Race or Color <u>White</u>	
Maiden Name <u>Jessie Lucy Shealy</u>	Place of Birth <u>South Carolina</u>	State or Country <u>South Carolina</u>	
Birth Date <u>December 14, 1894</u>			

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

*Annie Lou Taylor*  
 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 5<sup>th</sup> day of June, 1984  
 at Lexington, SC (County) (State) (L.S.)  
 My Commission expires April 30<sup>th</sup> 1994  
 NOTARY SEAL  
 DO NOT WRITE BELOW THIS LINE

## ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place Issued	Date Filed
1 Social Security Application #248-36-0554	Baltimore Md	May 1943
2 Sister's birth cert. #139-27-031291	BVS Cola Sc	Oct 10 1927
3 SC Driver's License #1208484	Columbia Sc	Oct 01 1975
4 S		

  

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1 Oct 1 1923	Leesville Sc	Ruben Taylor	Jessie L Shealy
2		Ruben Taylor	Jessie Shealy
3 Oct 1 1923			
4			

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

Registrar: [Signature]  
 Date filed: June 14, 1984

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.

[Signature]  
 Administrative  
 Specialist  
 Signature and title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE

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