

DELAYED CERTIFICATE OF BIRTH

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139 23-048887

City of Birth	PICKENS	County of Birth	PICKENS
Name at Birth	FORD LINCOLN LYNCH	Sex	MALE
		Date of Birth	JUN 01 1923
Full Name	FRANCIS RAY LYNCH	FATHER	Race or Color
			WHITE
Birth Date	FEB 05 1894	Place of Birth	State or Country
			SC
Maiden Name	ANNIE MAE GELLESPIE	MOTHER	Race or Color
			WHITE
Birth Date	MAY 04 1900	Place of Birth	State or Country
			SC

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

Francis Ray Lynch
(Exactly as used at present time)

* If married woman sign maiden name here also _____

Subscribed and sworn to before me this 30th day of November, 1981
at Pickens, S.C. Ollie H. McCall
(County) (State) (L.S.) Notary Public

My Commission expires My Commission Expires September 17, 1991NOTARY
SEAL

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE

	Kind of Document	Place Issued	Date Filed
1	MAR. LIC. #2111 GREENVILLE COUNTY	GREENVILLE SC	SEP 18 1952
2	SOC. SEC. APP. #249-20-6855	BALTIMORE MD	MAY 1940
3	US ARMY SEP. #US 53 022 108	FORT JACKSON SC	MAR 09 1949
4			

	Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1	29			
2	JUN 01 1923	PICKENS CO. SC	FRANCES R LYNCH	ANNIE M GELLESPIE
3	JUN 01 1923			
4				

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

Registrar: Ann EdwardsDate filed: Feb. 24, 1982

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.

Ollie H. McCall

Signature and title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE