

DELAYED CERTIFICATE OF BIRTH

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139-23-048869

City of Birth Bowman		County of Birth Orangeburg	
Name at Birth Marie Williams	Sex Female	Date of Birth Oct 24, 1923	
Full Name Shellie Williams		FATHER	
		Race or Color Black	
Birth Date	Place of Birth	State or Country South Carolina	
Maiden Name Essie Bruce		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.

SIGNATURE OF PERSON REGISTERED OR OF PARENT OR GUARDIAN

IF UNDER 18 YEARS OF AGE

* If married woman sign maiden name here also

Marie W. Brown
(Exactly as used at present time)

Marie Williams

Subscribed and sworn to before me this 8th day of Oct, 1981
 at Orangeburg, SC
 (County) (State) (L.S.)

Myra T. Strickland
 Notary Public
 My Commission expires Mar 5 1984

NOTARY SEAL

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place issued	Date Filed
1 Health Services Record -County Health Dept Orangeburg SC		1-13-1975
2 Dept of Soc Ser Record #1382019801	Orangeburg SC	Aug 1974
3 Bro's B/C #139-19-011687	Orangeburg Co SC	4-14-1919
4		

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1 10-24-1923	Bowman SC		
2 10-1923			
3		Shellie Williams	Essie Bruce
4			

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

Registrar:

Date filed:

Wm S. Owens/csp
October 19, 1981

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.

Myra T. Strickland, Dep. Reg.
 Signature and title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE