

DELAYED CERTIFICATE OF BIRTH

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139 22-050637

City of Birth	Chapin	County of Birth	Lexington
Name at Birth	ALVIN LEROY HUFFSTETLER	Sex	Male
		Date of Birth	September 17, 1922
Full Name	Adger L. Huffstetler	FATHER	Race or Color
			White
Birth Date	April 1894	Place of Birth	State or Country
			South Carolina
Maiden Name	Estelle Mayer	MOTHER	Race or Color
			White
Birth Date	February 24, 1894	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

Alvin Leroy Huffstetler
 (Exactly as used at present time)

* If married woman sign maiden name here also _____

Subscribed and sworn to before me this 16th day of June, 1978
 at Lexington South Carolina
 (County) (State) (L.S.)
Janice L. Soy
 Notary Public
 My Commission expires September 19, 1983

NOTARY
SEAL

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE

	Kind of Document	Place issued	Date Filed
1	US Naval Service Separation #552 49 45	Nashville, Tenn.	Jan. 18, 1946
2	Liberty Life Ins. Policy #613,229	Greenville, S. C.	Dec. 15, 1958
3	Sister's Cl. of Ct. Rec. Bk. 24, Pg. 37	Lexington, S. C.	Oct. 2, 1915
4			

	Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1	9-17-22	Chapin, S. C.		
2	9-17-22			
3			Adger Leroy Huffstetler	Estelle Mayer
4				

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

Registrar:

Doris M. Byars

Date filed:

June 21, 1978

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.

Janice L. Soy, Deputy Co. Registrar
 Signature and title of Reviewing Officer

\$9 fee paid at LCHD
 SEE INSTRUCTIONS ON REVERSE