

## DELAYED CERTIFICATE OF BIRTH

## SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139-23-049110

City of Birth		County of Birth		GEORGETOWN	
Name at Birth	WILLIE CLEVELAND GIBSON		Sex	MALE	Date of Birth
					JULY 05, 1923
Full Name		MACK GIBSON		FATHER	
				Race or Color	BLACK
Birth Date	Place of Birth		State or Country	SOUTH CAROLINA	
Maiden Name		MAGGIE WHITE		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.

*Willie C. Gibson*

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 2nd day of JULY, 1985  
 at GEORGETOWN SOUTH CAROLINA  
 (County) (State) (L.S.) *Lurea E. Parrott*  
 NOTARY My Commission expires JULY 26, 1993  
 SEAL

DO NOT WRITE BELOW THIS LINE

## ABSTRACT OF SUPPORTING EVIDENCE

	Kind of Document	Place issued	Date Filed
1	BROTHER'S BIRTH CERT. #F139-32-003579	COLUMBIA, SC	2-10-32
2	US MILITARY DISCHARGE #34 647 622	FT. JACKSON, SC	3-05-43
3	DRIVERS LICENSE REC. #1010826	RALEIGH, NC	7-03-78
4			

	Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1			MACK GIBSON	MAGGIE WHITE
2	7-05-23	GEORGETOWN, SC		
3	7-05-23			
4				

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

Registrar: *Ann A. Owens*Date filed: *Oct 11, 1985*

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.

*Lurea E. Parrott, Deputy Co Registrar*  
Signature and title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE

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