

Sex corrected 11-6-86 by Life of Va. Ins. Pol. Appl. #3949205 dob 3-17-1922 female issued 4-28-1922 hpb

1194

22 050092
22 028315-

DELAYED CERTIFICATE OF BIRTH
Division of Vital Statistics - State Board of Health
STATE OF SOUTH CAROLINA Birth No. 139

| | | |
|--|-------------------|-------------------------------------|
| STATE OF <u>North Carolina</u> | (L. S.) | County of Birth <u>York</u> |
| COUNTY OF <u>Cabarrus</u> | | City of Birth <u>Rock Hill</u> |
| Name at Birth <u>Willie Pearl Sumner</u> | Sex <u>Female</u> | Date of Birth <u>March 17, 1922</u> |

FATHER

| | |
|-------------------------------------|---|
| Full Name <u>James Henry Sumner</u> | Race or Color <u>White</u> |
| Birth Date <u>July 30, 1876</u> | Place of Birth { State or Country } <u>Alamance Co.</u> |

MOTHER

| | |
|-------------------------------------|---|
| Maiden Name <u>Effie Jane Burke</u> | Race or Color <u>White</u> |
| Birth Date <u>12 April 1899</u> | Place of Birth { State or Country } <u>Scotland Co., N.C.</u> |

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

SIGNATURE OF PERSON REGISTERED OR OF PARENT OR GUARDIAN, IF UNDER 21 YEARS OF AGE

*If married woman sign maiden name here also

Subscribed and sworn to before me this

NOTARY SEAL

My commission expires

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE

| Kind of Document | Place Issued | Date Issued |
|--------------------------------------|--|---------------|
| 1 Insurance Policy # 3949205 | Life Insurance Co. of Richmond, Virginia | May 8- 1922 |
| 2 Dr. W.R. Blackmon's Office Records | Rock Hill, S.C. | May 17, 1922 |
| 3 Parents Marriage License # 5791 | Probate Judge York, S.C. | June 19, 1921 |

| Birth Date or Age | Birth Place | Name of Father | Maiden Name of Mother |
|----------------------|-----------------|--------------------|-----------------------|
| 1 1 at next birthday | | | |
| 2 March 17, 1922 | Rock Hill, S.C. | | |
| 3 | | James Henry Sumner | Effie Jane Burke |

Date Filed

Registrar

(SEE INSTRUCTIONS ON REVERSE SIDE)

Signature and Title of Reviewing Officer
Clerk of Court York Co SC

Form VS-6