

DELAYED CERTIFICATE OF BIRTH

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139 23-048810

City of Birth	Florence	County of Birth	Florence
Name at Birth	CHARLIE CAPERS	Sex	Male
		Date of Birth	June 22, 1923
Full Name	Clarence Capers	FATHER	
		Race or Color	Black
Birth Date		Place of Birth	S. C.
		State or Country	S. C.
Maiden Name	Ethel Lane	MOTHER	
		Race or Color	Black
Birth Date		Place of Birth	S. C.
		State or Country	S. C.

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

Chen [Signature]
 (Exactly as used at present time)

* If married woman sign maiden name here also

Witness: *Alta G. Lewis*

Subscribed and sworn to before me this 20th day of October, 1980

at Florence, South Carolina
 (County) (State) (L.S.)

Rae C. Maurer
 Notary Public

NOTARY
 SEAL

My Commission expires January 20, 1987

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place issued	Date Filed
1 Brother's birth cert. #139-26-033715	Columbia, SC	Oct 31, 1926
2 App. for Soc. Sec. #251 26 6707	Baltimore, MD	Feb., 1969
3 Liberty Life Ins. Pol. #5474854W	Greenville, SC	Sept. 10, 1962
4		

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1		Clarence Capers	Ethel Lane
2 6-22-23	Florence, SC	Clarence Capers	Ethel Lane
3 Age 39			
4			

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

Registrar:

Ann H. Owens

Date filed:

Oct. 30, 1980

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.

Rae C. Maurer

Deputy Registrar II

Signature and title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE