

## DELAYED CERTIFICATE OF BIRTH

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENT 22 050905 OL

Birth No. 139

City of Birth	Lancaster	County of Birth	Lancaster
Name at Birth	Carrie Lee Moses	Sex	Female
Date of Birth	Mar 23, 1922		
Full Name	Frank Moses	FATHER	Race or Color Black
Birth Date	Sept. 7, 1887	Place of Birth	State or Country SC
Maiden Name	Bell Graham	MOTHER	Race or Color Black
Birth Date	June 19, 1896	Place of Birth	State or Country SC

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

(Exactly as used at present time)

\* If married woman sign maiden name here also

Subscribed and sworn to before me this 28 day of September, 1976  
 at Richland SC  
 (County) (State) (L.S.)

NOTARY  
SEAL

Notary Public

My Commission expires March 4, 1980

DO NOT WRITE BELOW THIS LINE

## ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place Issued	Date Filed
1 Sister's B.C. 139-19-015077 BVS	Columbia, SC	5-24-19
2 Own Driver's Lic. #1424267 (SCHD)	Columbia, SC	3-16-69
3 Son's Birth Cert. #139-64-014060 BVS	Columbia, SC	5-1-64
4		

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1		Frank Moses	Bell Graham
2 3-23-22			
3 42 yrs. old	Lancaster Co.		
4			

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

Registrar:

Date filed:

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.

Signature and title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE