

## DELAYED CERTIFICATE OF BIRTH

## SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139 22-050813

City of Birth		County of Birth		Florence	
Name at Birth	MILDRED MADELIENE NETTLES	Sex	FEMALE	Date of Birth	SEP 30 1922
Full Name		FATHER		Race or Color	
Solomon C. Nettles				White	
Birth Date	Dec. 18, 1881	Place of Birth	State or Country	S. C.	
Maiden Name		MOTHER		Race or Color	
Eunice B. Knight				White	
Birth Date	April 14, 1893	Place of Birth	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

*Mildred M. Fabrisan*  
(Exactly as used at present time)

\* If married woman sign maiden name here also

*Mildred Madeliene Nettles*

Subscribed and sworn to before me this

*L.H.*

day of

*August*

1980

at

*Clarendon*  
(County) *South Carolina*  
(State) (L.S.)

*[Signature]*  
Notary Public

My Commission expires

*7-1-81*

NOTARY  
SEAL

DO NOT WRITE BELOW THIS LINE

## ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place issued	Date Filed
1 Sister's birth cert. #139-17-033166	Columbia, SC	Oct. 20, 1917
2 App. for Soc. Sec. #251 26 4224	Baltimore, MD	Sept., 1941
3 Own marriage lic. #C2993	Florence, SC	Aug. 13, 1942
4		

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1		Solomon C. Nettles	Eunice B. Knight
2 9-30-22	Florence County, SC	Solomon C. Nettles	Eunice B. Knight
3 Age 19			
4			

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

Registrar:

*Ann D Owens*

Date filed:

*Sept. 9, 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.

*[Signature]* Deputy Registrar II  
Signature and title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE