

DELAYED CERTIFICATE OF BIRTH

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139 22-050772

City of Birth **Olar** County of Birth **Bamberg**

Name at Birth **Edna Ellen Drawdy** Sex **Female** Date of Birth **Dec 26 1922**

Full Name **Luther Ervan Drawdy** FATHER Race or Color **White**

Birth Date _____ Place of Birth _____ State or Country **S.C.**

Maiden Name **Marcella Sanders** MOTHER Race or Color **White**

Birth Date _____ 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

Ellen W. Brickle
(Exactly as used at present time)

* If married woman sign maiden name here also

Edna Ellen Drawdy

Subscribed and sworn to before me this **27th** day of **Dec**, 19**79**

at **Orangeburg** **S.C.**
(County) (State) (L:S.)

Myra T. Strickland
Notary PublicMy Commission expires **March 5, 1984**NOTARY
SEAL

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document		Place issued	Date Filed
1	Appl. Voters Registration #0759113	Orangeburg Co., SC	4-6-1968
2	Own marriage Lic. #20,563	Orangeburg Co., SC	4-5-1941
3	Parents marriage license (not numbered)	Bamberg Co., SC	4-15-1917
4			

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1 12-26-1922	Olar, SC (Bamberg Co)		
2 Age 18			
3		Luther Ervan Drawdy	Marcella Sanders
4			

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

Registrar:

Ann Owens

Date filed:

Jan. 10, 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.

Myra T. Strickland, Dep. Reg. II
Signature and title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE