

## DELAYED CERTIFICATE OF BIRTH

### SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139 22-051151

City of Birth		County of Birth		Edgefield	
Name at Birth	Mattie Juanita Smith	Sex	Female	Date of Birth	July 8 1922
Full Name	Jim Smith	FATHER		Race or Color	black
Birth Date	1864	Place of Birth	State or Country	South Carolina	
Maiden Name	Bessie L. Andrews	MOTHER		Race or Color	black
Birth Date		Place of Birth	State or Country	South Carolina	

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

*Mattie J. Smith*  
 LEGAL SIGNATURE OF PERSON REGISTERED IF 18 YEARS OLD OR OLDER. SIGNATURE OF PARENT OR GUARDIAN IF PERSON REGISTERED IS UNDER 18 YEARS OF AGE.

Subscribed and sworn to before me this 19<sup>th</sup> day of March, 1986  
 at District of Columbia Wash. DC (County) (State) (L.S.)  
*Shorella P. Chase*  
 Notary Public

My Commission expires May 31, 1990NOTARY  
SEAL

DO NOT WRITE BELOW THIS LINE

## ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place issued	Date Filed
1 Social Security Appl. #577-34-7447	Baltimore MD	Feb 03 1944
2 Sister's birth record #139-24-008755	VR Columbia SC	Apr 07 1924
3 The Washington Hospital Center	Washington DC	Jan 17 1979
4		

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1 7-8-1922	Edgefield SC	James Smith	Bessie Andrews
2		Jim Smith	Bessie Andrews
3 56 years			
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: July 22 1986

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.

*Missy Baldwin, Colm. Spec.*  
 Signature and title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE

85-77173 85-89053 mb 3-12-86

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