

# DELAYED CERTIFICATE OF BIRTH

## SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139 22-051013

City of Birth		County of Birth		Georgetown	
Name at Birth	Eva Nell Ward	Sex	Female	Date of Birth	July 7, 1922
Full Name	W. B. Ward	FATHER		Race or Color	White
Birth Date		Place of Birth	State or Country	S. C.	
Maiden Name	Fannie Jane Lambert	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.

*Eva Nell Knighton*  
 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 23rd day of June, 19 83  
 at Georgetown, S. C.  
 (County) (State) (L.S.)  
*Bela G. Wingate*  
 Notary Public  
 My Commission expires Nov. 29, 1987

NOTARY SEAL

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE			
Kind of Document		Place Issued	Date Filed
1 Parents Marriage License # 205		Georgetown, S. C.	May 2, 1912
2 Record Rosemary School		Andrews, S. C.	Sept. 3, 1931
3 U. S. Navy I. D. Card #N14-868-121		Charleston, S. C.	Jan. 1, 1967
4			
Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1		W. B. Ward	Fannie Jane Lambert
2 7-7-22	Georgetown, S. C.		Fannie Ward
3 7-7-22			
4			

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

Registrar: *Ann G. Owens*Date filed: 7-1-83

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.

*Bela G. Wingate, Deputy Co. Registrar*  
 Signature and Title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE

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