

DELAYED CERTIFICATE OF BIRTH

Vital Statistics - State Board of Health
SOUTH CAROLINA

Birth No. 139 -

22 049461

~~22-052897~~

STATE OF South Carolina (L. S.) County of Birth Richland
 COUNTY OF Richland City of Birth Killian
 Name at Birth ROY BLEASE CROUT Sex Male Date of Birth August 12, 1922

FATHER

Full Name Jacob Samuel Crout Race or Color White
 Birth Date _____ Place of Birth { State or Country } South Carolina

MOTHER

Maiden Name Christine Goins Race or Color White
 Birth Date _____ Place of Birth { State or Country } South Carolina

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

SIGNATURE OF PERSON REGISTERED OR OF PARENT OR GUARDIAN, IF UNDER 21 YEARS OF AGE

Roy Blease Crout
(Exactly as used at present time)

*If married woman sign maiden name here also.

Subscribed and sworn to before me this 13th day of June, 1967

NOTARY SEAL

Ann H. Owens
Notary Public

My commission expires at the Pleasure of the Gov.

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place Issued	Date Filed
1 Brother's Birth Record - 139-25-005751	Columbia, S. C.	11-27-42
2 S. C. Driver's License No. 118074	Columbia, S. C.	2-7-49
3 Military Record - U.S. Army (14124809)	Washington, D. C.	9-19-42
4 Capital Life Ins. Co. - Pol. #138071	Columbia, S. C.	2-10-47

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1		Jacob Samuel Crout	Christine Goins
2 8-12-22			
3 8-12-22	Richland Co., SC		
4 25 next birthday			

Date Filed June 13, 1967

Registrar Doris M. Byars
(SEE INSTRUCTIONS ON REVERSE SIDE) *ida*

Ireg H. Croner
Signature and Title of Reviewing Officer