

DELAYED CERTIFICATE OF BIRTH

South Carolina State Board of Health

Birth No. 139 - 22 050317

STATE OF	South Carolina	(L. S.)	County of Birth	Laurens
COUNTY OF	Laurens		City of Birth	Mountville
Name at Birth	LILLIE MAE TRIBBLE	Sex	Female	Date of Birth May 5, 1922
Full Name	Anthony Tribble	FATHER		
			Race or Color	Negro
Birth Date	unknown	Place of Birth	{ State or Country }	South Carolina
Maiden Name	Dollie Carter	MOTHER		
			Race or Color	Negro
Birth Date	unknown	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

Lillie Mae Boyd

(Exactly as used at present time)

*If married woman sign maiden name here also.

Lillie Mae Tribble

Subscribed and sworn to before me this twenty-third day of October, 1975

NOTARY
SEAL*Harvett D. Kennedy*
Notary Public

My commission expires January 22, 1984

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place Issued	Date Filed
1 Laurens Co. Health Dept. Health Services record,	Laurens, S. C.	June 1, 1963
2 Birth cert. of sister 139-24-008571	Laurens Co., S. C.	Mar. 21, 1924
3 Birth cert. of daughter 139-53-001919	Laurens Co., S.C.	Feb. 2, 1953
4		

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1 May 5, 1922	Laurens Co.		
2		Anthony Tribble	Dollie Carter
3 Age 30	S. C.		
4			

Date Filed 11-12-75

Registrar *Doris M. Bryan jr.*

(SEE INSTRUCTIONS ON REVERSE SIDE)

Harvett D. Kennedy, DCR
Signature and Title of Reviewing OfficerTribble, Lillie Mae 72-015752
Laurens Co. 6-28-72
\$5.00 Paid in Laurens County