

# DELAYED CERTIFICATE OF BIRTH

## SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139 22-051001

City of Birth <b>Norway</b>		County of Birth <b>Orangeburg</b>	
Name at Birth <b>Darsee Rowe</b>	Sex <b>Male</b>	Date of Birth <b>May 5, 1922</b>	
Full Name <b>FATHER</b>		Race or Color	
Birth Date	Place of Birth	State or Country	
Maiden Name <b>Lily M Rowe</b>		Race or Color <b>Black</b>	
Birth Date		Place of Birth	State or Country <b>South Carolina</b>

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

*X Darsee Rowe*

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 13 day of April, 1983  
 at Orangeburg (County) SC (State) (L.S.)  
 My Commission expires 5/85  
 Notary Public

NOTARY  
SEAL

DO NOT WRITE BELOW THIS LINE

## ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place issued	Date Filed
1 US Navy Discharge Record Ser #971 12 49	Charleston SC	10-30-1944
2 Appl Soc Sec #248 42 2694	Baltimore MD	April 1946
3 Own marriage Lic #26,484	Orangeburg Co SC	8-3-1949
4		

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1 5-5-1922	Norway SC		
2 5-5-1922	Norway SC		Lily M Rowe
3 Age 27			
4			

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

Registrar: Ann S. OwensDate filed: April 27, 1983

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.

*Mary T. Strickland, Dep. Reg.*  
Signature and title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE