

DELAYED CERTIFICATE OF BIRTH

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139 23-048939

City of Birth		County of Birth		YORK
Name at Birth	LILLIE MAE OATES	Sex	FEMALE	Date of Birth
				NOV 26 1923
Full Name		FATHER		Race or Color
Edward Oates				Negro
Birth Date	1886	Place of Birth	State or Country	Unknown
Maiden Name		MOTHER		Race or Color
Lillie Allison				Negro
Birth Date	1900	Place of Birth	State or Country	South Carolina

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

x Lillie Mae Oates Lemery
 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 22nd day of October, 19 82
 at York South Carolina
 (County) (State) (L.S.) *Judith A. Harrison*
 Notary Public

NOTARY
SEAL

My Commission expires November 23, 1986

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place issued	Date Filed
1 Dr's Record (Dr. Ernest Perry)	Clover, S. C.	1947
2 Mothers D/C #66-15461	York, S. C.	Sept. 10, 1966
3 Durham Life Ins. Pol. #376562	Raleigh, N. C.	May 20, 1947
4		

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1 11/26/23			
2		Edward Oates	Lillie Allison
3 11/26/23	Clover, S. C.		
4			

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

Registrar:

Date filed:

Ann G. Owens
Nov. 3, 1982

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.

Judith A. Harrison

Signature and title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE