

DELAYED CERTIFICATE OF BIRTH

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139 22-050835

City of Birth Hyman	County of Birth Florence
Name at Birth COLEE POWELL	Sex Male
Date of Birth Jan. 11, 1922	
Full Name Hedley Powell	FATHER
Race or Color White	
Birth Date Unknown	Place of Birth S. C.
MOTHER	
Maiden Name Rosella Brown	Race or Color White
Birth Date Unknown	Place of Birth S. C.

The above statements are true to the best of my knowledge and belief
SIGNATURE OF PERSON REGISTERED OR OF PARENT OR GUARDIAN

IF UNDER 18 YEARS OF AGE

Colee Powell
(Exactly as used at present time)

* If married woman sign maiden name here also _____

Subscribed and sworn to before me this 20th day of October, 1980at Florence, South Carolina
(County) (State) (L.S.)

R. C. Mason
Notary Public

NOTARY
SEALMy Commission expires January 20, 1987

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place issued	Date Filed
1 App. for Soc. Sec. #251-26-6247	Baltimore, MD	Oct. 1941
2 US Army discharge Ser. #34 848 795	Ft. Bragg, NC	Jan. 16, 1946
3 Bureau of the Census rec. #1b 2-064-766	Washington, DC	April 1, 1930
4		

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1 1-11-22	Hyman, SC	Hedley Powell	Rosella Brown
2 1-11-22	Hyman, SC		
3 Age 8		Hedley Powell	Rozelar (Powell)
4			

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

Registrar:

Ann H. Owens

Date filed:

Oct. 30, 1980

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.

R. C. Mason

Deputy Registrar II

Signature and title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE