

## DELAYED CERTIFICATE OF BIRTH

## SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139 22-050694

City of Birth Greenville County of Birth Greenville  
 Name at Birth Marian Louise Watkins Sex Female Date of Birth September 18, 1922

## FATHER

Full Name \_\_\_\_\_ Race or Color \_\_\_\_\_  
 Birth Date \_\_\_\_\_ Place of Birth \_\_\_\_\_ State or Country \_\_\_\_\_

## MOTHER

Maiden Name Annie Marie (Evelyn) Watkins Race or Color White  
 Birth Date April 18, 1902 Place of Birth \_\_\_\_\_ State or Country Georgia

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

Marian Louise Watkins  
 (Exactly as used at present time)

\* If married woman sign maiden name here also

Marian Louise Watkins

Subscribed and sworn to before me this 1st day of August, 19 78  
 at Deaf Smith, Texas Chas. H. Russell  
 (County) (State) (L.S.) Notary Public

NOTARY  
SEAL

My Commission expires 8-31-78

DO NOT WRITE BELOW THIS LINE

## ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place issued	Date Filed
1 appl. social security #117-20-5125	Baltimore, Md.	3-12-45
2 Mount Vernon Public Schools record	Mt. Vernon, N. Y.	9-22-31
3 Family Medical Clinic record	Hereford, Tex.	4-8-67
4		

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1 9-18-22	Greenville, S. C.		Ann Evelyn Watkins
2 9-18-22			
3 9-18-22			
4			

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

Registrar:

Date filed:

Geris M. Byars  
Feb. 1, 1979

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.

Deputy

Mary Louise C. McAllister  
 Signature and title of Reviewing Officer

Registrar

SEE INSTRUCTIONS ON REVERSE