

# DELAYED CERTIFICATE OF BIRTH

## SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139 -22-051190

City of Birth <u>Cherokee Falls</u>		County of Birth <u>Cherokee</u>	
Name at Birth <u>Little Patterson</u>		Sex <u>Male</u>	Date of Birth <u>Apr 05, 1922</u>
Full Name <u>Ade G. Patterson</u>		FATHER	
Race or Color <u>White</u>			
Birth Date	Place of Birth	State or Country	<u>S.C.</u>
Maiden Name <u>Martha J. Moss</u>		MOTHER	
Race or Color <u>White</u>			
Birth Date	Place of Birth	State or Country	<u>S.C.</u>

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

*Little Patterson*  
 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 17th day of Feb., 1989  
 at Cherokee SC  
 (County) (State) (L.S.)  
 NOTARY SEAL  
 My Commission expires Jul. 24, 1995  
*Adell R. Webster*  
 Notary Public

DO NOT WRITE BELOW THIS LINE

## ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place issued	Date Filed
1 Liberty Life Ins. Pol. #4491220	Greenville, SC	Apr. 19, 1954
2 Daughter's BC. #139-46-046390	CoLA, SC	Dec. 13, 1946
3 Soc. Sec. App. # 250 208 896	Baltimore Maryland	Feb. 1941
4		

  

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1 33 age next birthday			
2 24	Cherokee Co., SC		
3 Apr 05, 1922	Cherokee Falls, SC	Ade G. Patterson	Martha J. Moss
4			

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

Registrar: *Ann G. Owens*  
 Date filed: February 28, 1989

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.

*Adell R. Webster*  
 Signature and title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE

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