

DELAYED CERTIFICATE OF BIRTH
SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENT

22 050458

Birth No. 139 —

STATE OF South Carolina	(L.S.)	County of Birth	York
COUNTY OF York		City of Birth	
Name at Birth	Emogene Williams	Sex	Female
		Date of Birth	August 27, 1922
Full Name	William Karr Williams	FATHER	Race or Color
			White
Birth Date	3-21-1876	Place of Birth	{ State or } { Country } S. C.
Maiden Name	Emma Conner	MOTHER	Race or Color
Birth Date	7-5-1885	Place of Birth	{ State or } { Country } 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 21 YEARS OF AGE

Emogene Johnston
 (Exact as at present time)
Emogene Williams

*If married woman sign maiden name here also

Subscribed and sworn to before me this

31st

day of

December

19 75

NOTARY
SEAL

Ruth K. Duncan
 Notary Public

My commission expires

Sept. 17, 1983

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE

	Kind of Document	Place Issued	Date Filed
1	Spartanburg General Hosp. Statement	Spartanburg, SC	11-2-42
2	Marriage License #57-699 Lowndes Co. Ga.	Valdosta, Ga.	8-17-57
3	U.S. Dept. Commerce, Bureau Census	Washington, DC	1-1-20
4			

	Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1	20	Hickory Grove, York, County, SC		
2	8-27-22			
3			William K. Williams	Emma Connor Williams
4				

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

Registrar:

Jane M. Bryan

Date filed:

Jan. 13, 1976

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.

Ruth K. Duncan, Dep. Reg.
 Signature and title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE