

# DELAYED CERTIFICATE OF BIRTH SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENT

Birth No. 139 —

22 050458

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		FATHER		Race or Color
William Karr Williams				White
Birth Date	3-21-1876	Place of Birth	(State or Country)	S. C.
Maiden Name		MOTHER		Race or Color
Emma Conner				
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 1975

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:

Date filed:

*John M. Byars*  
*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