

DELAYED CERTIFICATE OF BIRTH

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

16 092954

Birth No. 139—

STATE OF	South Carolina	(L.S.)	County of Birth	Anderson
COUNTY OF	Richland		City of Birth	Anderson
Name at Birth	JAMES CECIL HANKS	Sex	Male	Date of Birth 10-19-1916
Full Name	Hodge Hanks	FATHER		Race or Color White
Birth Date		Place of Birth	South Carolina	(State or Country)
Maiden Name	Lillie Brooks	MOTHER		Race or Color White
Birth Date		Place of Birth	South Carolina	(State or Country)

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

James Cecil Hanks
(Exactly as used at present time)

*If married woman sign maiden name here also

Subscribed and sworn to before me this 16th

day of April, 1974

NOTARY
SEAL

Janice K. Craps
Notary Public
My commission expires Sept. 19, 1983

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place Issued	Date Filed
1 Sister's birth rec. #139-18-046971-D	Columbia, S. C.	2-1-62
2 Pilot Life Ins. Pol. #2538911	Greensboro, N. C.	9-1-52
3 S.C. State Hosp. Rec.	Columbia, S.C.	Dec. 24, 1957
4		

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1		William Hodge Hanks	Lillie Eva Brooks
2 Age 36 next birthday			
Oct. 19, 1916	Anderson, S. C.		
4			

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

Registrar: *Loris M. Byars (alt)*

Date filed: April 16, 1974

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.

Audrey H. Carter, Delayed Records Clerk
Signature and title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE