

DELAYED CERTIFICATE OF BIRTH

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139 -22-050908

City of Birth	Seneca, S. C.	County of Birth	OCONEE
Name at Birth	GLADYS CECELIA MARTIN	Sex	Female
		Date of Birth	JUN 11 1922
Full Name	Meade Martin	FATHER	
		Race or Color	White
Birth Date		Place of Birth	S. C.
		State or Country	
Maiden Name	Ethel Hall	MOTHER	
		Race or Color	White
Birth Date	Jul 08 1889	Place of Birth	S. C.
		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 18 YEARS OF AGE

* If married woman sign maiden name here also

Subscribed and sworn to before me this 18 day of November, 19 81
 at Oconee, S. C.
 (County) (State) (L.S.)
 NOTARY SEAL
 My Commission expires Nov 16 1987

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place issued	Date Filed
1 Social Security App. #247 32 5541	Baltimore, Maryland	Jun 1942
2 Liberty Life Ins. Policy#4040503	Greenville, S. C.	May 22 1950
3 Own marriage license #2138	Greenville, S. C.	Jul 09 1943
4		

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1 Jun 11 1922	Seneca (Oconee Co., SC)	Meade Martin	Ethel Hall
2 28 yrs. N/B			
3 21 yrs.			
4			

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

Registrar:

Date filed:

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.

Signature and title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE