

# DELAYED CERTIFICATE OF BIRTH SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENT 22 050322

Birth No. 139—

STATE OF S. C.	(L. S.)	County of Birth Lee
COUNTY OF Lee		City of Birth
Name at Birth MINNIE AGNES SMITH	Sex FEMALE	Date of Birth DEC. 10, 1922
Full Name Larry Smith	FATHER	Race or Color White
Birth Date unk.	Place of Birth { State or Country }	S. C.
Maiden Name Mamie B. Gillis	MOTHER	Race or Color White
Birth Date unk.	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 18 YEARS OF AGE

*Minnie S. Farmer*  
(Exactly as used at present time)

\*If married woman sign maiden name here also

*Minnie Agnes Smith*

Subscribed and sworn to before me this 10th

day of June 19 76

NOTARY  
SEAL

*Decker C. Carlett*  
Notary Public

My commission expires 9/19/82

DO NOT WRITE BELOW THIS LINE

## ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place Issued	Date Filed
1 Soc. Sec. appl. #248-26-3876	Baltimore, Md.	4/15/68
2 Voter's registration #0640937	Lee County, S.C.	3/27/68
3 Liberty Life Ins. Co. #5309545	Greenville, S.C.	2/20/61
4		

  

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1 12/10/22	Lee Co.	Larry Smith	Mamie B. Gillis
2 12/10/22	Lee Co.		
3 Age 39 (next birthday)			
4			

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

Registrar:

*Donna M. Byars*

Date filed:

6/17/76

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.

*Decker C. Carlett*  
Signature and title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE