

DELAYED CERTIFICATE OF BIRTH
SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

STATE FILE NO: 139-22-051249

City of Birth	NORTH SC	County of Birth	ORANGEBURG
Name at Birth	MYRTLE CARSON	Sex	FEMALE
		Date of Birth	JUN 01 1922
Full Name	JOHN CARSON	FATHER	Race BLACK
Birth Date	AUG 02 1902	Place of Birth	State SOUTH CAROLINA
		MOTHER	Country SOUTH CAROLINA
Maiden Name	ROSA JACKSON		Race BLACK
Birth Date	MAY 25 1902	Place of Birth	State SOUTH CAROLINA
			Country SOUTH CAROLINA

The above statements are true to the best of my knowledge and belief.

Myrtle Carson

LEGAL SIGNATURE OF PERSON REGISTERED, IF 18 YEARS OLD OR OLDER. SIGNATURE OF PARENT OR GUARDIAN IF PERSON REGISTERED IS UNDER 18 YEARS OF AGE.

Subscribed and sworn to before me this 16TH day of April 2001
 at Jamaica (County) NY (State) (L.S.)
 My Commission expires _____
 Notary Public, State of New York
 No. 30-4865298
 Qualified in Nassau County
 Expires Oct 30, 2003

NOTARY SEAL

DO NOT WRITE BELOW THIS LINE
 ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place Issued	Date Filed
1. SISTER'S BIRTH REC# 139-24-020321	COLUMBIA SC	JUN 20 1924
2. SOCIAL SECURITY APPL# 073-20-7391	BALTIMORE MD	MAY XX 1943
3. COLUMBIA PROTECTIVE ASS INDUSTRIAL INS APPL#570	BINGHAMTON NY	JUN 17 1948
4.		

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1.		JOHN CARSON	ROSA JACKSON
2. 6/1/22	NORTH SC	JOHN CARSON	ROSE JACKSON
3. 6/1/22			
4.			

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

Registrar: *Brenda R. Muhammad*

Date filed: May 14 2001

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.

Adriana Benkeri
 Signature and Title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE