

DELAYED CERTIFICATE OF BIRTH

South Carolina State Board of Health

Birth No. 139 - 22 050282

STATE OF Florida (L. S.) County of Birth Hampton
 COUNTY OF Duval City of Birth Brunson
 Name at Birth WILLIAM EDGAR ADDISON Sex Male Date of Birth April 25, 1922

FATHER
 Full Name Ezekial W. Addison Race or Color White
 Birth Date _____ Place of Birth { State or Country } S. C.

MOTHER
 Maiden Name Marie Rouse Race or Color White
 Birth Date _____ 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

William E. Addison
 (Exactly as used at present time)

*If married woman sign maiden name here also.

Subscribed and sworn to before me this

3rd day of June 1976
Notary Public
Feb. 15, 1977

NOTARY SEAL

NOTARY PUBLIC, State of Florida at Large,
 My Commission Expires February 15, 1977,
 Bonded by AUTO OWNERS INSURANCE

My commission expires

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place Issued	Date Filed
1Brunson Grammer School	Brunson, S.C.	9-2-35
2US Army Discharge--Ser.#14-125-521--	Ft. Leonard Wood, Mo.	10-30-45
3Appl. So. Sec.#249-12-5777----	Baltimore, Md.	12-13-37
4		

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1 4-25-22	Brunson, S.C.	E.W. Addison	
2 4-22-22	Brunson, S.C.		
3 4-22-22	Brunson, S.C.	E. W. Addison	Marie Rouse
4			

Date Filed

Registrar

(SEE INSTRUCTIONS ON REVERSE SIDE)

Signature and Title of Reviewing Officer