

DELAYED CERTIFICATE OF BIRTH

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139 22-050896

City of Birth CLIO County of Birth MARLBORO CO.

Name at Birth ROSA LEE GLASPIE Sex FEMALE Date of Birth DEC 28 1922

FATHER

Full Name ALEX GLASPIE Race or Color BLACK

Birth Date _____ Place of Birth _____ State or Country _____

Maiden Name MAGGIE MCLEAN MOTHER Race or Color BLACK

Birth Date _____ Place of Birth _____ 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

at Marlboro South Carolina
(County) (State) (L.S.)

day of

15th September, 1981NOTARY
SEAL

My Commission expires

Notary Public
My Commission Expires
August 18, 1990

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place issued	Date Filed
1 <u>OWN MARRIAGE LICENSE #40997</u>	<u>MARLBORO CO.</u>	<u>SEP 05 1943</u>
2 <u>SONS BIRTH RECORD #139-44-022341</u>	<u>MARLBORO CO.</u>	<u>JUNE 15 1944</u>
3 <u>S.S. ACCT# 250-34-2598</u>	<u>BALTIMORE MD.</u>	<u>FEB 1943</u>
4		

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1 <u>AGE 20</u>			
2 <u>age 21</u>	<u>CLIO</u>		
3 <u>DEC 28 1922</u>	<u>CLIO&MARLBORO CO.</u>	<u>ALEX GLASPIE</u>	<u>MAGGIE MCLEAN</u>
4			

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

Registrar: Ann OwensDate filed: Sept. 25, 1981

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