

## 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
Full Name		FATHER	Race or Color
ALEX GLASPIE			BLACK
Birth Date	Place of Birth	State or Country	
Maiden Name	MOTHER	Race or Color	
MAGGIE MCLEAN		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

*Rosa Lee Glaspie*

(Exactly as used at present time)

\* If married woman sign maiden name here also

*Rosa Lee Glaspie*

Subscribed and sworn to before me this

*15<sup>th</sup>*

day of

*September*, 19 *81*

at

*Marlboro**South Carolina**Rita B. Courie*

(County)

(State) (L.S.)

NOTARY  
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 OWN MARRIAGE LICENSE #40997	MARLBORO CO.	SEP 05 1943
2 SONS BIRTH RECORD #139-44-022341	MARLBORO CO.	JUNE 15 1944
3 S.S. ACCT# 250-34-2598	BALTIMORE MD.	FEB 1943
4		

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

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

Registrar:

*Ann Owens*

Date 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.

*Susan Lee M... [Signature]*

Signature and title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE