

## DELAYED CERTIFICATE OF BIRTH

## SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139 22-051002

City of Birth	Georgetown	County of Birth	Georgetown
Name at Birth	ROBERT DANIEL MORRIS	Sex	Male
		Date of Birth	Sept. 5, 1922
FATHER			
Full Name	Robert B. Morris	Race or Color	White
Birth Date		Place of Birth	South Carolina
		State or Country	
MOTHER			
Maiden Name	Virginia Estelle Dorsey	Race or Color	White
Birth Date		Place of Birth	S. C.
		State or Country	

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

*x Robert D. Morris*  
 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 15<sup>th</sup> day of October, 1982  
 at Marion SC  
 (County) (State) (L.S.)  
Butt R. Brady  
 Notary Public  
 My Commission expires 3-28-89  
 NOTARY SEAL

DO NOT WRITE BELOW THIS LINE

## ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place issued	Date Filed
1 Statement Georgetown Co. Hospital	Georgetown, S. C.	Oct. 24, 1955
2 Discharge U. S. Army, #34-845-390	Ft. Bragg, N. C.	Jan. 1, 1946
3 Son's Birth Cert. #139-48-059576	Georgetown, S. C.	Nov. 8, 1971
4		

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1 9-5-22	Georgetown, S. C.	Robert B. Morris	Virginia Estelle Dorsey
2 9-5-22	Georgetown, S. C.		
3 9-5-22	Georgetown, S. C.		
4			

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

Registrar:

Date filed:

*Ann S. Owens*  
*April 28, 1983*

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

*Belen O. Wingate, Deputy*

SEE INSTRUCTIONS ON REVERSE