

DELAYED CERTIFICATE OF BIRTH
SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENT

Birth No. 139- **22 050321**

| | | |
|--|-------------------|---|
| STATE OF South Carolina | (L.S.) | County of Birth Lee |
| COUNTY OF Lee | | City of Birth Bishopville |
| Name at Birth Laura Louise WILSON | Sex Female | Date of Birth March 28, 1922 |
| Full Name Paul Lee Wilson | FATHER | |
| | | Race or Color White |
| Birth Date April 19, 1886 | Place of Birth | (State or Country) Lancaster Co., S. C. |
| Maiden Name Etta Marshall | MOTHER | |
| | | Race or Color White |
| Birth Date September 17, 1899 | Place of Birth | (State or Country) Darlington Co., 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

Laura W. Wiggins

(Exactly as used at present time)

*If married woman sign maiden name here also

Laura Louise Wilson

Subscribed and sworn to before me this

13th

day of

June

19 **75**

NOTARY

SEAL

Heane A. Watts

Notary Public

My commission expires

10/16/80

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE

| Kind of Document | Place Issued | Date Filed |
|---|-----------------|------------|
| 1 Bishopville High School Record | Bishopville, SC | 9/10/35 |
| 2 Marriage record of applicant | Bishopville, SC | 2/2/46 |
| 3 Lee Co. Health Dept. X-Ray record | Bishopville, SC | June, 1952 |
| 4 Brother's birth cert. (Marshall Wilson #18-041947) | Lee Co., S. C. | 1/10/19 |

| Birth Date or Age | Birth Place | Name of Father | Maiden Name of Mother |
|-------------------|-----------------------|-----------------------|-----------------------|
| 1 3/28/22 | | Paul L. Wilson | |
| 2 Age 23 | | | |
| 3 3/28/22 | Lee Co., S. C. | | |
| 4 | | Paul Wilson | Etta Marshall |

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

Registrar:

Doyle M. Bryan (Jr)

Date filed:

6-30-75

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.

Heane A. Watts

Signature and title of Reviewing Officer

Deputy County Registrar

SEE INSTRUCTIONS ON REVERSE