

DELAYED CERTIFICATE OF BIRTH

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139 22-050898

City of Birth	<u>Centenary</u>	County of Birth	<u>MARION</u>
Name at Birth	<u>BERNICE PEE</u>	Sex	<u>FEMALE</u>
		Date of Birth	<u>NOVEMBER 25, 1922</u>
Full Name	<u>ELDER PEE</u>	FATHER	Race or Color <u>Black</u>
Birth Date		Place of Birth	State or Country
Maiden Name	<u>AMELIA ELLISON</u>	MOTHER	Race or Color <u>Black</u>
Birth Date		Place of Birth	State or Country

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

Bernice Pee Brown
 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 26th day of June, 1981
 at Marion, South Carolina
 (County) (State) (L.S.) *Shirley R. Moore*
 Notary Public
 My Commission expires July 17, 1988
 NOTARY SEAL

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place issued	Date Filed
1 <u>Social Security Appl. # (176-20-5980)</u>	<u>Baltimore, Md.</u>	<u>Dec./74</u>
2 <u>Child's birth certificate (148-63-01518)</u>	<u>Wisconsin</u>	<u>Feb. 7, 1963</u>
3 <u>Quaker City Life Ins. Comp. #37B4 63362</u>	<u>Philadelphia, PA</u>	<u>Aug. 13, 1962</u>
4		

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1 <u>11-25-22</u>	<u>Centenary, SC</u>	<u>Elder Pee</u>	<u>Amelia Ellison</u>
2 <u>Age: 40</u>	<u>South Carolina</u>		
3 <u>Age: 40 next birthday</u>			
4			

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

Registrar: *Clyde G. Owens, Jr.*
 Date filed: Oct. 9, 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.

Joni E. Dant, Vital Records Consultant
 Signature and title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE