

# DELAYED CERTIFICATE OF BIRTH

## SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139 22-051143

City of Birth	County of Birth	Chester
Name at Birth	Sex	Date of Birth
Josh Anna Kennedy	Female	May 19 1922
FATHER		Race or Color
Full Name		Black
Birth Date	Place of Birth	State or Country
October 16 1901		South Carolina
MOTHER		Race or Color
Maiden Name		Black
Birth Date	Place of Birth	State or Country
August 3 1902		South Carolina

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

*Josh Anna Kennedy*  
 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 3rd day of January, 1986  
 at Duval (County) Florida (State) (L.S.)

*Shondra Bennett*  
 Notary Public  
 My Commission expires NOTARY PUBLIC, STATE OF FLORIDA  
 My commission expires Nov. 8, 1986

NOTARY  
SEAL

DO NOT WRITE BELOW THIS LINE

## ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place issued	Date Filed
1 Child's birth record #4342	Jacksonville FL	Feb 14 1942
2 Marriage License Appl. #no	Duval County FL	Sep 04 1941
3 Sister's birth record #139-19-013726	VR Columbia SC	May 24 1919
4		

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1 19 yrs	South Carolina		
2 5-19-1922	Chester SC		
3		Josh Kennedy	Nettie Ree Agurs
4			

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

Registrar: *Ann H. Owens*Date filed: January 7 1986

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.

*Missy Baldwin, Adm. Spec.*  
 Signature and title of Reviewing Officer

SEE INSTRUCTIONS ON REVERSE

12-30-85

85-95175 mb

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