

State of Oklahoma Department of Health

DELAYED CERTIFICATE OF BIRTH

STATE FILE NO. O-2473-106

1. NAME AT BIRTH First Middle Last Beulah Magalee Holder	2. DATE OF BIRTH Mo. D. Yr. 9 19 1912
3. PLACE OF BIRTH City Co. State Fuskotaha Atteross OKLAHOMA	4. COLOR OR RACE Sex White Female
5. FULL NAME OF FATHER John William Holder	6. FATHER'S BIRTHPLACE State or Foreign Country Texas
7. MOTHER'S NAME OF MOTHER Sennie May Ballard	8. MOTHER'S BIRTHPLACE State or Foreign Country Texas

10. AFFIDAVIT OF REGISTRATION: I hereby declare upon oath that the above statements are true to the best of my knowledge and belief. (Provide names with address of declarant)

REGISTRAR: Charles Wheat of H.S.A.C.P. RESIDENT ADDRESS: 508 S. Sycamore Grove, Moore, Okla., 74133

Subscribed and sworn to before me this 12-11-85 Day of December 1985 at Fuskotaha, Oklahoma My commission expires 7-13-87

DO NOT WRITE BELOW. TO BE COMPLETED IN DIVISION OF VITAL STATISTICS

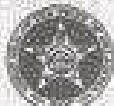
ABSTRACT OF SUPPORTING RECORDS			
1.	TYPE OF RECORD	BY WHOM MADE	DATE MADE
1	Social Security Application Record	660-28-1816	4-17-45
2	Affidavit of Personal Knowledge	B. Holder Reynolds	10-11-85
3	Langston Burial Association Records	Wright E. Martin	10-11-85
4			

INFORMATION CONCERNING REGISTRANT AS STATED IN RECORD			
BIRTHDATE OR AGE	BIRTHPLACE	NAME OF FATHER	NAME OF MOTHER
1. Sept. 12, 1912	Atteross, Oklahoma	John William Holder	Sennie May Ballard
2. Sept. 18, 1912	Atteross, DE. Fuskotaha Co., Oklahoma	John William Holder	Sennie May Ballard
3. September 18, 1912	Fuskotaha Co., Oklahoma		
4.			

ADDITIONAL INFORMATION:

I hereby certify that no prior birth certificate has been filed in the Division of Vital Statistics for this registrant and that duplicate copies have been prepared, which substitutes the birth as set forth in the foregoing entries.

DATE FILED: 12-19-85 EXAMINED AND REVIEWED BY: T. Loubridge REGISTERED: [Signature]



State Department of Health

State of Oklahoma
OKLAHOMA CITY, OKLAHOMA 73102

ROGER C. PRINARD
STATE REGISTRAR OF VITAL STATISTICS

CERTIFIED COPY MUST HAVE ENCLOSED SEAL
[Signature]
STATE REGISTRAR

I hereby certify the foregoing to be a true and correct copy, copies of which are in the State Office, in conformity with the laws and regulations governing my office and issued the official seal to be affixed, at Oklahoma City, Oklahoma, this 1985.

DEC 19 1985