

## DELAYED CERTIFICATE OF BIRTH

South Carolina State Board of Health

22 050112

Birth No. 139 - ~~22 072430~~

STATE OF South Carolina

(L. S.) County of Birth York

COUNTY OF York

City of Birth Clover

Name  
at Birth Michael Eugene Sifford

Sex Male

Date of  
Birth December 16, 1922

## FATHER

Full Name Stanhope Alexander Sifford

Race or Color White

Birth Date Feb. 20, 1872

Place of Birth { State or  
Country } South Carolina

## MOTHER

Maiden Name Cornelia Jane Jackson

Race or Color White

Birth Date Oct. 20, 1876

Place of Birth { State or  
Country } South Carolina

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*Michael E. Sifford*  
(Exactly as used at present time)

\*If married woman sign maiden name here also.

Subscribed and sworn to before me this 12

day of August, 1971

NOTARY  
SEAL*Anneida L. Thomason*  
Notary Public

My commission expires Sept. 9, 1980

DO NOT WRITE BELOW THIS LINE

## ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document	Place Issued	Date Filed	
U.S. Coast Guard Disch. #B80613	Phila. Penn	Feb. 28, 1946	
Carolina Life Ins. Co. #51756	Columbia, S. C.	June 17, 1947	
3B/C Bro. S. A. Jr., #139-17-035386	Columbia, S.C.	Oct. 20, 1917	
4D/C Mother #139-57-008480	Columbia, S.C.	Feb. 28, 1957	
Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1 12-16-22	Clover, S. C.		
2 12-16-22	Clover, York Co., S. C.		
3		Stanhope A. Sifford	Corrie Jackson
4		S. A. Sifford, Sr.	Cornelia Jackson

(Sifford)

Date Filed September 14, 1971

Registrar Davis M. Byrne MSM

*Louis B. Maloney, Clerk III*  
Signature and Title of Reviewing Officer

(SEE INSTRUCTIONS ON REVERSE SIDE)