

16 093564

## DELAYED CERTIFICATE OF BIRTH

Vital Statistics — State Board of Health  
SOUTH CAROLINA

Birth No. 139 —

16 093564

STATE OF N.Y. (L. S.) County of Birth Edgefield  
COUNTY OF Queens City of Birth Johnston  
Name at Birth JAMES MILES Sex Male Date of Birth 4-25-1916

FATHER  
Full Name Peter Miles Race or Color Negro  
Birth Date 4-8-1883 Place of Birth { State or Country } S.C.  
Maiden Name Ella Moten MOTHER Race or Color Negro  
Birth Date 7-15-1885 Place of Birth { State or Country } 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

*James Miles*  
(Exactly as used at present time)

\*If married woman sign maiden name here also.

Subscribed and sworn to before me this

26<sup>th</sup> day of

May, 1969

NOTARY  
SEALBARNET SCHATZ  
Notary Public, State of New York  
No. 24-3481500

Qualified in Kings County

My commission expires

Commission Expires DO NOT WRITE BELOW THIS LINE

Notary Public

## ABSTRACT OF SUPPORTING EVIDENCE

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Kind of Document	Place Issued	Date Filed
1 Daughter's Birth Record-156-53-414603	Dept. of Health City of New York	July 12, 1953
2 Military Record-U.S.Army(32 800 260)	Washington, D. C.	Feb. 10, 1943
3 Sister's Birth Record-139-17-004155	Columbia, S. C.	Feb. 14, 1917
4		

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother
1 age 37	Johnston, S. C.		
2 Apr.25,1916	Johnston, S. C.		
3		Peter Miles	Ella Moten
4			

Date Filed June 5, 1969

Registrar

(SEE INSTRUCTIONS ON REVERSE SIDE)

*Doris M. Byars*  
*ihc*

*Inez H. Croner*  
Signature and Title of Reviewing Officer

Miles, James 69-010002  
Edgefield Co. 5-13-69

jlb