

DELAYED CERTIFICATE OF BIRTH

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Birth No. 139 22-050865

City of Birth **Fairplay, S. C.** County of Birth **OCONEE**

Name at Birth **MILDRED IDELLE CALLAHAN** Sex **Female** Date of Birth **JUL 13 1922**

Full Name **Ligon Callahan** FATHER Race or Color **White**

Birth Date **Unknown** Place of Birth **Unknown** State or Country **Unknown**

Maiden Name **Annie B. Whitfield** MOTHER Race or Color **White**

Birth Date **Unknown** Place of Birth **Unknown** State or Country **Unknown**

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

SIGNATURE OF PERSON REGISTERED OR OF PARENT OR GUARDIAN

IF UNDER 18 YEARS OF AGE

* If married woman sign maiden name here also

Subscribed and sworn to before me this **06** day of **May**, 19 **81**

at **Oconee** **S. C.** **Janifer T. Underwood**
(County) (State) (L.S.) Notary Public

NOTARY My Commission Expires **Nov 16 1987**

SEAL

DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE

Kind of Document		Place issued	Date Filed
1	Social Security App. of Self#247 22 9047	Baltimore, Maryland	Jun 1939
2	Parent's Marriage license #631	Anderson, S. C.	Nov 20 1921
3	Metropolitan Life Ins. Policy#608 811 650 M New York, N.Y.		Aug 26 1960
4			

Birth Date or Age	Birth Place	Name of Father	Maiden Name of Mother	
1	Jul 13 1922	Fairplay(Oconee CO., SC)	Ligon Callaham	Annie B. Whitfield
2		Ligon Callaham	Annie Belle Whitfield	
3	38 yrs.			
4				

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

Registrar: **Ann G. Owens**Date filed: **May 20, 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.

Signature and title of Reviewing Officer: **Janifer Underwood, Deputy Registrar**

SEE INSTRUCTIONS ON REVERSE