

(1) PLACE OF BIRTH

County of York
 Township of Patheena
 or
 Inc. Town of _____
 or
 City of _____ (No. _____)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Mattie Mary Burns (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL? girl (4) Twin or Triplet? _____ (5) Number in order of birth _____ (6) Are Parents Married? yes (7) DATE OF BIRTH Feb. 14 1922
 (Name of Month) (Day) (Year)

FATHER

(8) FULL NAME William L. H. Burns
 (9) PRESENT POSTOFFICE OF FATHER M. C. Connelleville
 (10) COLOR OR RACE Col. (11) AGE AT LAST BIRTHDAY 45 (Year)
 (12) BIRTHPLACE South Carolina
 (13) OCCUPATION Farming
 (20) Number of children born to mother, including present birth 5

MOTHER

(14) NAME BEFORE MARRIAGE Elise Sanders
 (15) PRESENT POSTOFFICE OF MOTHER M. C. Connelleville, S. C.
 (16) COLOR OR RACE Col. (17) AGE AT LAST BIRTHDAY 28 (Year)
 (18) BIRTHPLACE South Carolina
 (19) OCCUPATION House & Field Work
 (21) Number of children of this mother now living, including present birth 4

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 3:00 M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Mattie Mary Burns
 (24) State whether Physician or Midwife midwife (real) (25) Address of Physician or Midwife M. C. Connelleville, S. C.

Given name added from a supplemental report

(26) Witness J. H. Lane
 (27) Signature of Witness necessary only when question 23 is signed
 (28) DATE Mar 15 1922 (29) LOCAL REGISTRAR

When there was an abnormality, or when the child was born before the fifth month of pregnancy, the father, householder, etc., should make this report. If a child breathes even once, a report is desired of mothers.

CERTIFICATE OF BIRTH
 STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

File No. For State Registrar Only
9506

Registration District No. 1161
 Registered No. 10
 (For use of Local Registrar)

Ward No. _____ (Ward)

WHITE PLAINS. WITH UNPAID TAXES—THIS IS A LEGAL NOTICE TO THE PUBLIC.

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RECEIVED BY CLERK OF COURTS, COLUMBIA, S. C.