

TOTAL SALARY OF OFFICERS

County of Anderson
Township of Belton
or
Ine. Town of
or
City of

CERTIFICATE OF TESTING

STATE OF SOUTH CAROLINA
COUNTY OF YORK
CITY OF YORK

Registration District No. **300.**

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED
DATE 08-14-2010 BY 60322 UCBAW

000000

Registered No. 1234567890
(For use of Local Registrar)

City of (No. St. Ward) (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Killie Leroy Walker

**If child is not yet named, make
supplemental report as directed**

(4) PAY OR QUOTE	(5) Type or Title To be entered only in case of Police or Trooper	(6) Number in order of birth	(7) Is Person Married? <i>Yes</i>	(8) DATE OF BIRTH <i>Oct 15-83</i>
------------------	--	------------------------------	-----------------------------------	------------------------------------

FATHER.

4
JERRY MATLISON

(c) PRESENT ADDRESS OF FATHER Belton

(10) COLOR *leaf* (77) AGE AT LAST BIRTHDAY *21*
 SEX *M* (YOUNG)

546

(7c) OCCUPATION Farming

(20) Number of children born to mother, including present birth

CERTIFICATE OF AFFIDAVIT
(20) I hereby certify that I attended the birth of the

NOTES

100 INDEX REPORT
RECEIVED
LEONARD BROWN

(10) PRESENT CONTROLLER OF MORTGAGE Belton

(7E) COLOR *Red* (7F) ONE AT LAST *23*
PAGE *16* CONTINUED

S. C.

1707 OCCUPATION
Housewife

Number of editions of this material
over 5000, including present one

CERTIFICATE OF ATTENDING PHYSICIAN OR NURSE:

(25) I hereby certify that I attended the birth of said child, who was alive on the date above stated. 12-29-22

7-10-68

Redemptio Bellum de R

SECRETARY OF DEFENSE

.....

1. NAME OF THE PARTY _____

K.O.D.A.K.S. AFFECTION