

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.  
N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK FOR EACH CHILD, and mark the  
FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of York S.C.  
Township of York  
or  
Inc. Town of  
or  
City of

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

File No.—For State Registrar Only  
**20610**

Registration District No. 8 Registered No. 98  
(For use of Local Registrar)

(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 Leah Virginia Patton child is not yet named, make  
supplemental report as directed

(3) BOY OR GIRL <u>Girl</u>	(4) Twin or Triplet? To be answered only in event of Twins or Triplets	(5) Number in order of birth	(6) Are Parents Married? <u>Yes</u>	(7) DATE OF BIRTH <u>June 29, 22</u> (Month of Month) (Day) (Year)
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FATHER.

(8) FULL NAME Thomas Patton  
(9) PRESENT POSTOFFICE OF FATHER York S.C.  
(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 22 (Years)  
(12) BIRTHPLACE York S.C.  
(13) OCCUPATION Brick making  
(20) Number of children born to mother, including present birth 1

MOTHER.

(14) NAME BEFORE MARRIAGE Lulla Maurer  
(15) PRESENT POSTOFFICE OF MOTHER York S.C.  
(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 29 (Years)  
(18) BIRTHPLACE York S.C.  
(19) OCCUPATION House keeping  
(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was alive & well at 8 P. M.,  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Mary Anderson  
(24) State whether Physician or Midwife Midwife  
(25) Address of Physician or Midwife York S.C. Rty

Given name added from a supplemental report

(26) Witness .....  
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed June 30, 1922 (28) John W. ... Local Registrar.

\*When there was no attending physician or midwife, then the father, householder, etc., should make this return.  
If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

REGISTRAR

LOCAL REGISTRAR

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