Use a typewriter or write plainly with unfading ink. Blanks containing erasures, words crossed out, or written over will not be accepted for registration.

THIS IS A PERMANENT RECORD

IMPORTANT:

Dist. No. 26910- 255

Primary

8. 5603613

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF HEALTH VITAL STATISTICS SECTION

DELAYED BIRTH CERTIFICATE

All Information As Of Time Of Birth

File No. D- 236458- 16 Filing Date __9-5-57. Registration Date 9-5-57

NAME OF CHILD	(Middle) (Last)			
(type or print) Margaret	Clara Matuschak			
PLACE OF BIRTH County Fayette	City or Borough Brookvale R.D.#I Connells (If outside of corporate limits state township) Dunger Two. 1			
Date of August 13, 1916 Month (by name) Day Year	Was mother married Yes to father of child?			
FATHER OF CHILD				
(First)	(Middle) (Last)			
Full name Andrew	Emil Matuschak			
Birthplace Kalava	Czecho Czeho Slovakia			
(City, town, county)	(State or foreign country)			
MOTHER OF CHILD				
(First)	(Middle) (Last)			
Full maiden name Clara	Mary Saksa			
Czecho Slovakia				
Birthplace (Czecko Slovakia) Kala	(State or foreign country)			
the birth set forth upon this application are true and correct	managet (Jara) maturchase			
T522 W.Crawford adve. Connells ville, Penna. (Signature)				
	s of birth has appeared before me and testified to their truth as			
this 27th day of August 19 Signature of Notarizing Official	57 (SEAL)			
ALDERMAN				
350 Address, of Notarizing Official Pa.				
APPLICANT SHOULD NOT	WRITE BELOW THIS LINE			

ABSTRACT OF SUPPORTING EVIDENCE

Nam	e and kind of document (including by whom issued and signed, and date of issue)	Date original document was made
1	Bapt. Cert. St. John the Evangelist R. C. Church, Connellsvi	lle, FORMA
3	Penna. Sgd. Rev. Joseph T.Bednonk, pastor. 8-30-1957	Baptized 8-20- 1916
4	Aff. of Margaret Clara Matuschak, Connellsville, Penna.	Notarized 8-27- 1957
5	Aff. of Andrew Emil Matuschak, and Clara Mary Matuschak,	Notari zed
6	Parents. Connellsville Penna.	8_27- 1957

I certify that no prior certificate has been found in the State Vital Statistics Section for this registrant and that evidence has been seen and read which substantiates the facts set forth in the foregoing abstract.

September 5- 1957 Signature

INSTRUCTIONS FOR FILING A DELAYED BIRTH RECORD

The proof of parts of Pennsylvania, this is the proper form to use in filing a delayed birth record.

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REQUIREMENTS

1. The face of this form must be completed by you in the presence of a Notary Public or any other person qualified to administer oaths and submitted to the Vital Statistics Section in Harrisburg together with a certified copy of a County Record, if your birth occurred prior to 1906.

Alterda . Sarah

OR

2. The face of this form must be completed by you in the presence of a Notary Public or any other person qualified to administer oaths and submitted to the Vital Statistics Section in Harrisburg together with a notarized statement sworn to by the doctor or midwife who attended your birth, or a baptismal certificate certified by a priest, minister, or other officer of the Church. The baptism must have occurred five years prior to the date of this application.

OR

3. The face of this form must be completed by you in the presence of a Notary Public or any other person qualified to administer oaths and submitted to the Vital Statistics Section in Harrisburg together with one recorded document at least five years old which conclusively establishes your correct name, date and place of birth.

IMPORTANT. The following are examples of documents which would be helpful in establishing proof of the facts of your birth, providing that they are in agreement as to the spelling of names, date and place of birth: Baptismal Record, Insurance Policy, Federal Census Record, School Record, Cradle Roll Certificate, Employment Record, Hospital Record, Fraternal Order Record or Military Record.

1991 -06- Tutesq Madaged I Badaged Par 1-30- 1997

iff, of Margaret Clara Mithachak, Cognellaville, Fenna.

Cert. Mt. John the Tyangelist R. C. Courch. Connellsville, Monage