

(1) Place of Birth
 County of Cherokee
 Township of Cherokee
 Inc. Town of Cherokee
 City of Cherokee, Ark.
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)
 Registration District No. 10.A. Registered No. 13
 (For use of Local Registrar)
 (No. 612 Parrot) (Sex) Male

(2) Full Name of Child Virginia Inez Clark If child is not yet named, make appropriate report as directed

(3) SEX OF CHILD Girl (4) Age at Birth 3 (5) Date of Birth Feb. 10, 1923
 (6) Place of Birth Cherokee, Ark. (7) Date of Birth Feb. 10, 1923

FATHER
 (8) Full Name James Edgar Clark
 (9) Present Residence of Father Cherokee, Ark.
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 31
 (12) BIRTHPLACE Cherokee County, Ark.
 (13) OCCUPATION Car Nurse
 (14) Number of children born to mother, including present one 3

MOTHER
 (15) Full Name Virginia Inez Phillips
 (16) Present Residence of Mother Cherokee, Ark.
 (17) COLOR OR RACE White (18) AGE AT LAST BIRTHDAY 29
 (19) BIRTHPLACE Cherokee County, Ark.
 (20) OCCUPATION Domestic
 (21) Number of children of this mother now living, including present one 2

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was born at Cherokee, Ark. on the date above stated. (Born alive or stillborn) (Near A. M. or P. M.)

(23) (Signature) J. D. Dineen, M.D.
 (24) State whether Physician or Midwife (25) Address of Physician or Midwife Cherokee, Ark.

Given name added from a supplemental report
 (26) Witness (Signature of Witness necessary only when question 22 is signed by mark)
 (27) Filed Feb. 10, 1923 (28) W. F. Smith Local Registrar

When there was no attending physician or midwife, then the father, householder, etc., should make this report. 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.
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