

STATE OF NORTH CAROLINA

CERTIFICATE OF BIRTH

No. 10. - For State Registrar Only

County of Franklin

Town of Franklin

City of Franklin

or Franklin

or Franklin

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

(2) Full Name of Child Arthur James Alverson

Sex of Child Boy

Time of Birth 11:23

To be answered in case of Boy or Girl

FATHER.

(1) FULL NAME J. E. Alverson

(2) PRESENT POSTOFFICE OF FATHER Murphy

(10) COLOR OR RACE White

(11) AGE AT LAST BIRTHDAY 40

(12) BIRTHPLACE Ill.

(13) OCCUPATION Farmer

(20) Number of children born to mother, including present birth 3

MOTHER.

(14) NAME BEFORE MARRIAGE Bessie Miller

(15) PRESENT POSTOFFICE OF MOTHER Murphy

(16) COLOR OR RACE White

(17) AGE AT LAST BIRTHDAY 34

(18) BIRTHPLACE Ill.

(19) OCCUPATION Housewife

(21) Number of children of this mother now living, including present birth 3

(CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE)

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

(23) (Signature) Joseph Gibson MD

(24) State whether Physician or Midwife Physician

(25) Address of Phys. or Midwife Murphy

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 22 is signed by mother)

(27) Filed June 24, 1923 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.

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