

Township of Langley
or
Inc. Town of Wayne Registration District No. V. 176 Registered No. 1141
(For use of Local Registrar)
or
City of Wayne (No. 8C St.; Wayne Ward)
(If birth occurs in a hospital or other institution give name of same instead of street and number.)

(2) Full Name of Child Annie Irene Barton If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Aug 12, 1916
(Name of Month) (Day) (Year)

FATHER.
(8) FULL NAME Clara Barton
(9) PRESENT POSTOFFICE OF FATHER Wayne 8C
(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 24 (Years)
(12) BIRTHPLACE Graniteville SC
(13) OCCUPATION Weaver
(20) Number of children born to mother, including present birth 4

MOTHER.
(14) NAME BEFORE MARRIAGE Georgie Wood
(15) PRESENT POSTOFFICE OF MOTHER Wayne
(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 25 (Years)
(18) BIRTHPLACE Cherokee Co. N.C.
(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 at 1141 P M.,
(Born alive or stillborn) (Hour A. M. or P. M.)
(23) (Signature) A. H. Dawdy
(24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Langley SC

Given name added from a supplemental report
....., 191.....
Registrar
(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)
(27) Filed Aug 14, 1916 (28) H. H. Dawdy 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.
..... Local Registrar
Registrar

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