

County of Wayne Bureau of vital statistics  
 State Board of Health  
 Township of Langley  
 or  
 Inc. Town of Math SC Registration District No. 2176 Registered No. 1  
 (For use of Local Registrar)  
 or  
 City of Math SC (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 Annie Irene Barton } If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Girl (4) Twin or Triplet?  (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Aug 12, 1916  
To be answered only in event of Twins or Triplets (Name of Month) (Day) (Year)

**FATHER.**  
 (8) FULL NAME Cand Barton  
 (9) PRESENT POSTOFFICE OF FATHER Math SC  
 (10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 24 (Years)  
 (12) BIRTHPLACE Greenville 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 Math  
 (16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 25 (Years)  
 (18) BIRTHPLACE Cherokee Co NC  
 (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.,  
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)  
 (23) (Signature) A. H. Dawdy M.D.  
 (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.  
 Registrar 1 Local Registrar

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MAILED 12 1916  
 COUNTY OF WAYNE, MISSISSIPPI  
 DEPARTMENT OF HEALTH  
 BUREAU OF VITAL STATISTICS  
 STATE BOARD OF HEALTH  
 LANGLEY TOWNSHIP  
 REGISTRATION DISTRICT NO. 2176  
 REGISTERED NO. 1  
 CHILD, WITH UNPAID INDEBTEDNESS TO THE STATE TREASURY  
 COUNTY OF WAYNE, MISSISSIPPI  
 DEPARTMENT OF HEALTH  
 BUREAU OF VITAL STATISTICS  
 STATE BOARD OF HEALTH  
 LANGLEY TOWNSHIP  
 REGISTRATION DISTRICT NO. 2176  
 REGISTERED NO. 1  
 McCRAW