Affidavit Attached

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 112

Registered No. 209

1. PLACE OF BIRTH

County Gila State Arizona

District or Township Roosevelt or Village

City No. St., Ward

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Charles Winter Reynolds (If child is not yet named, make supplemental report, as directed.)

3. Sex of Child: Boy

To be answered ONLY in event of plural births.

4. Twin, triplet or other

5. No., in order of birth

6. Legitimate? Yes

7. Date of birth 10 - 4 - 1927 (Month Day Year)

8. FATHER

Full name Bennett Reynolds

9. Residence (Usual place of abode)

If non-resident, give place and state Roosevelt Ariz

10. Color or race White

11. Age at last birthday 46 (Years)

12. Birthplace (city or place) Providence

(State or country) Rhode Island

13. Occupation

Nature of industry Bookkeeper

14. MOTHER

Full maiden name Eleanor Smith

15 Residence (Usual place of abode) Roosevelt

If non-resident, give place and state. Ariz

16 Color or race White

17. Age at last birthday 33 (Years)

18. Birthplace (city or place) Hyatts Bille

(State or country) Maryland

19. Occupation

Nature of industry Housewife

20. Number of children of this mother

(Taken as of time of birth of child herein certified and including this child.)

(a) Born alive and now living 2

(b) Born alive but now dead

(c) Stillborn

21. Were precautions taken against ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was Oct - 4 at 10:25 P.m. on the date above stated (Born alive or stillborn.)

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature L. E. Wightman M.D.

(Physician or ~~midwife~~).

Given name added from a supplemental report

Month, day, year

Address Globe

Registrar

Filed 10-31, 1927 W. W. Horst

Registrar

392 1004-5-6