

In case of more than one child at a birth, the certificates must be made for each, and the number of each in order of birth stated.

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 130
Registered No. 98

1. PLACE OF BIRTH

County Gila State _____

District or Township _____ or Village _____

City Hayden No. _____ St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Mary Alia Vincent { If child is not yet named, make supplemental report, as directed.

3. Sex of Child Female { To be answered ONLY in event of plural births. } 4. Twin, triplet or other _____ 6. Legitimate? Yes 7. Date of birth Dec 20 1927
Month Day Year

8. FATHER Full name Roy O. Vincent

14. MOTHER Full maiden name Lottie M. Gorman

9. Residence (Usual place of abode) Box 803 Hayden
If non-resident, give place and state.

15. Residence (Usual place of abode) Hayden
If non-resident, give place and state.

10. Color of race White

16. Color of race White

11. Age at last birthday 35 (Years)

17. Age at last birthday 27 (Years)

12. Birthplace (city or place) Contraire Creek Kentucky
(State or country)

18. Birthplace (city or place) Brackittville Tex
(State or country)

13. Occupation Rancher
Nature of industry

19. Occupation House Wife
Nature of industry

20. Number of children of this mother 5 (a) Born alive and now living 4 (b) Born alive but now dead 1 (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 _____ at _____ m. on the date above stated

* 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 Charles B. Huths MD
(Physician or Midwife)

Given name added from a supplemental report _____ Address Hayden, Arizona

Month, day, year _____ Filed Dec 24 1927 W. B. Darr Registrar

4453 - 1220 - 445