

750

646

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 750

Registered No. 646

1. PLACE OF BIRTH

County Pima State Ariz

District or Township _____ or Village _____

City Tucson No. So. Meth 7 St. St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child William Edward Moore (If child is not yet named, make supplemental report, as directed.)

3. Sex of Child m 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 1 / 8 / 30
Month / Day / Year

8. FATHER Full name George A. Moore

14. MOTHER Full maiden name Margaret Gardner

9. Residence (Usual place of abode) 32 N. Grand
If non-resident, give place and state.

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If non-resident, give place and state.

10. Color or race w

11. Age at last birthday 30 (Years)

16. Color or race w and Mex

17. Age at last birthday 22 (Years)

12. Birthplace (city or place) Hot Springs Ark
(State or country)

18. Birthplace (city or place) Patagonia Ariz
(State or country)

13. Occupation Purchasing Agent
Nature of industry

19. Occupation Housewife
Nature of industry

20. Number of children of this mother 2
(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 0
(c) Stillborn 0

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 Born alive at 8:25 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 W. Carrell, M.D.
(Physician or midwife.)

Given name added from a supplemental report _____
Month, day, year

Address 123 S. Stone Ave Tucson Ariz

Filed 1/11 1930 H. Edwin Kinnison
Registrar

645-108-479

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD
N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.