ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 543A

Local Registrar's No.

1. PLACE OF BIRTH

County Navajo State Arizona

District or Township Pinedale 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 Donna Marie Cheney

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

5. No. in order of birth

6. Legitimate? Yes

7. Date of birth Mar. 30, 1931 (Month Day Year)

8. FATHER

Full name Giles Cheney

9. Residence (Usual place of abode) Pinedale

If non-resident, give place and state. Ariz

10. Color or race: white

11. Age at last birthday 30 (Years)

12. Birthplace (city or place) Pinedale

(State or country)

13. Occupation

Nature of industry Agric. etc

14. MOTHER

Full maiden name Laura Eleanor Peterson

15. Residence (Usual place of abode) Pinedale

If non-resident, give place and state. Ariz

16. Color or race: white

17. Age at last birthday 19 (Years)

18. Birthplace (city or place) Pinedale

(State or country) Ariz

19. Occupation

Nature of industry

20. Number of children of this mother 1

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

(a) Born alive and now living 1

(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 alive (Born alive or stillborn.) at 3 P. 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 J. N. Haywood M.D.

(Physician or midwife)

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

Address Snowflake

238-330-375

Registrar

Filed 19 Isabel W. Brewer Deputy Registrar

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.