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

State File No. 114a
Registered No.

1. PLACE OF BIRTH

County Gila State Ariz.

District or Township ..... or Village .....

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

2. Full name of child Edith Bell Powers { 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 2 | 6. Legitimate? Yes | 7. Date of birth May 10 31 (Month Day Year)

8. FATHER
Full name Elmer Powers

9. Residence (Usual place of abode) Payson Ariz
If non-resident, give place and state.

10. Color or race White | 11. Age at last birthday 38 (Years)

12. Birthplace (city or place) Oklahoma
(State or country)

13. Occupation
Nature of industry Shoemaker

14. MOTHER
Full maiden name Mary Trewitt

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

16. Color or race White | 17. Age at last birthday 23 (Years)

18. Birthplace (city or place) Oklahoma
(State or country)

19. Occupation
Nature of industry Housewife

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 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 born alive at 1:30 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 C H Risser M.D.
Payson Ariz (Physician or midwife).

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

Address .....

Filed 5/12/31, 19..... C H Risser
Registrar

Registrar

572-510-433