

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

State File No. **165**
Registered No. **167**

1. PLACE OF BIRTH

County Yavapai Co. State Arizona
District or Township _____ or Village _____
City Safford No. _____ St. _____ W. _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Joseph Kayton Alder (If child is not yet named, make supplemental report, as directed)

3. Sex of Child Male To be answered ONLY In event of plural births. 4. Twin, triplet or other. _____ 5. No., in order of birth. _____ 6. Legitimate? _____ 7. Date of birth July 25 1931 Month Day Year

8. FATHER
Full name Ray Alder
9. Residence (Usual place of abode) Pima
If non-resident, give place and state.

14. MOTHER
Full maiden name Angelina Gault
15. Residence (Usual place of abode) Thatcher
If non-resident, give place and state.

10. Color or race White
11. Age at last birthday 25 (Years)

16. Color or race White
17. Age at last birthday 25 (Years)

12. Birthplace (city or place) Pima
(State or country) Arizona

18. Birthplace (city or place) Thatcher
(State or country) Arizona

13. Occupation
Nature of industry Farmer

19. Occupation
Nature of industry Housewife

20. Number of children of this mother one (a) Born alive and now living yes
(Taken as of time of birth of child herein certified and including this child.) (b) Born alive but now dead _____ (c) Stillborn _____

21. Were precautions taken against yes of thalassa neonatorum.

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.
(Born alive or stillborn)

Signature J. W. Morris
(Physician or midwife)

Given name added from a supplemental report. Address _____
Month, day, year _____
Filed Aug-8- 1931
Registrar J. M. Stahl

MARGIN RESERVED FOR BINDING
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.