

ARIZONA STATE BOARD OF HEALTH

140

1. PLACE OF BIRTH

County Tucson State Arizona  
 Town or City Duncan No. \_\_\_\_\_ St. \_\_\_\_\_ Ward \_\_\_\_\_  
 (If birth occurred in a hospital or institution, give its NAME instead of street and number)

State File No.

Registered No.

2. Full name of child Phillip Sherman Stewart, Jr. (If child is not yet named, make supplemental report, as directed)

Sex Male If plural births \_\_\_\_\_ 4. Twin, triplet or other \_\_\_\_\_ 6. Premature \_\_\_\_\_ 7. Legitimate? Yes 8. Date of birth Aug. 11, 1932  
 (Month, day, year)

9. Full name of FATHER Phillip Sherman Stewart

10. Full maiden name of MOTHER Mrs. Helen Watson

11. Residence (usual place of abode) (If nonresident, give place and State) Duncan, Ariz.

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13. Color or race W 14. Age at last birthday 20 (Years)

15. Color or race W 16. Age at last birthday 19 (Years)

17. Birthplace (city or place) Duncan, Arizona

18. Birthplace (city or place) Hatcher, Ariz.

19. Trade, profession or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Farmer

20. Trade, profession, or particular kind of work done, as house-keeper, typist, nurse, clerk, etc. Housewife

21. Industry or business in which work was done, as silk mill, sawmill, bank, etc.

22. Industry or business in which work was done, as own home, lawyer's office, silk mill, etc.

23. Date (month and year) last engaged in this work To date, 19    

24. Date (month and year) last engaged in this work To date, 19    

25. Number of children of this mother (At time of this birth and including this child) (a) Born alive and now living 1 (b) Born alive but now dead 0 (c) Stillborn 0

26. If stillborn, period of gestation \_\_\_\_\_ months or weeks 27. Cause of stillbirth \_\_\_\_\_ Before labor \_\_\_\_\_ During labor \_\_\_\_\_

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was Born alive at 7:30 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.)

(Signed) H. J. Neighbor, M. D.

Given \_\_\_\_\_ (date of supplemental report)

Address Duncan, Arizona

Cezumbromy Registrar

Filed \_\_\_\_\_, 19     Registrar

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.

722-311-265