ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 128

Registered No. 23

Arizona

1. PLACE OF BIRTH

County: Gila State: Arizona

Township: or Village:

City: Hayden No. St. Ward

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child: Selma Audrey Strait,

(If child is not yet named, make supplemental report, as directed)

3. Sex: Female

If plural births: 4. Twin, triplet, or other: 5. Number, in order of birth:

6. Premature: Full term: X

7. Legitimate? Yes

8. Date of birth: May 13th, 1933 (Month, day, year)

FATHER

9. Full name: Wendell Irwin Strait,

10. Residence (usual place of abode) (If non-resident, give place and State): Hayden, Arizona

11. Color or race: White

12. Age at last birthday: 27 (Years)

13. Birthplace (city or place): Roosevelt, (State or country): Arizona

OCCUPATION

14. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc.: Rancher

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

16. Date (month and year) last engaged in this work: February, 1933

17. Total time (years) spent in this work: 10

MOTHER

18. Full maiden name: Thelma Haydes,

19. Residence (usual place of abode) (If non-resident, give place and State): Hayden, Arizona.

20. Color or race: White

21. Age at last birthday: 23 (Years)

22. Birthplace (city or place): High Rolls, (State or country): New Mexico

OCCUPATION

23. Trade, profession, or particular kind of work done, as housekeeper, typist, nurse, clerk, etc.: Housewife

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

25. Date (month and year) last engaged in this work: May, 1933

26. Total time (years) spent in this work: 3

27. Number of children of this mother (At time of this birth and including this child) (a) Born alive and now living: 2 (b) Born alive but now dead: 0 (c) Stillborn: 0

28. If stillborn, period of gestation: months or weeks

29. 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 (Born alive or stillborn) at 4.20 A m. on the date above stated

When there was no attending physician or midwife, then the father, householder, etc., should make this return.

(Signed) Charles H. Hurlburt M.D., M.D.

or , Midwife

Address: Hayden, Arizona.

Given name added from supplemental report 223-513-382 (Date of)

Registrar.

Filed May 17th, 1933 W. D. Dyer Registrar.

BM 3-17-R MS-4048