ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 136a

Registered No.

1. PLACE OF BIRTH

County Gila State Arizona

Township Globe or Village

City Globe No. Globe Addition St. Ward

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

2. Full name of child Velma Lucille Stewart [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 | 7. Legitimate? yes | 8. Date of birth May 21 1933 (Month, day, year)

FATHER

9. Full name William Collins Stewart

10. Residence (usual place of abode) (If nonresident, give place and State) Globe - Ariz.

11. Color or race Caucs. 12. Age at last birthday 34 (Years)

13. Birthplace (city or place) Payson (State or country) Arizona

OCCUPATION

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

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

16. Date (month and year) last engaged in this work May 21 1933

17. Total time (years) spent in this work 1 yr

MOTHER

18. Full maiden name Phoebe D. Gulf

19. Residence (usual place of abode) (If nonresident, give place and State) Globe Ariz

20. Color or race Caucs. 21. Age at last birthday 25 (Years)

22. Birthplace (city or place) Central (State or country) Arizona

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.

25. Date (month and year) last engaged in this work 19

26. Total time (years) spent in this work

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 3 21 p. m. on the date above stated

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

(Signed) Cyril M. Crow M.D. M.D. or Midwife

Given name added from a supplemental report (Date of)

Address Miami, Arizona.

Registrar July 7 1933 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.

RESERVED FOR BINDING