ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 53

Registered No.

Arizona 26

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: Charles Robert Parsons (If child is not yet named, make supplemental report, as directed)

3. Sex: Male

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: June 5th, 19 33 (Month, day, year)

FATHER	MOTHER
9. Full name: Alfred Brooks Parsons	18. Full maiden name: Thelma Henkle
10. Residence (usual place of abode) (If non-resident, give place and State): Hayden, Arizona	19. Residence (usual place of abode) (If non-resident, give place and State): Hayden, Arizona
11. Color or race: White	20. Color or race: White
12. Age at last birthday: 33 (Years)	21. Age at last birthday: 24 (Years)
13. Birthplace (city or place): Alpine, (State or country): Texas	22. Birthplace (city or place): Topeka, (State or country): Kansas
OCCUPATION 14. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc.: Carpenter	OCCUPATION 23. Trade, profession, or particular kind of work done, as housekeeper, typist, nurse, clerk, etc.: Housewife
15. Industry or business in which work was done, as silk mill, sawmill, bank, etc.: unemployed	24. Industry or business in which work was done, as own home, lawyer's office, silk mill, etc.: Home
16. Date (month and year) last engaged in this work: March, 1933	25. Date (month and year) last engaged in this work: June, 19 33
17. Total time (years) spent in this work: 15	26. Total time (years) spent in this work: 8

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 1:25 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 B. Hutchins M. D.

or, Midwife

Address: Hayden, Arizona

Given name added from a supplemental report (Date of)

Filed June 7th, 1933 E. W. Smith, Registrar

372-605-385 Registrar

BM 3-12-M 848-6708