# ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 51

Registered No.

1. PLACE OF BIRTH

County Cochise State Arizona.

District or Township Benson or Village Pomerene

City ~~XXXXXXX~~ No. St., Ward

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

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

2. Full name of child Joan Fenn.

| Sex of Child | To be answered ONLY in event of plural births. | 4. Twin, triplet or other | 6. Legitimate? | 7. Date of birth |
|---|---|---|---|---|
| Female | | 5. No., in order of birth | Yes | March 11 1934 (Month Day Year) |

8. FATHER

Full name Alva Fenn.

9. Residence (Usual place of abode) Pomerene

If non-resident, give place and state.

10. Color or race White

11. Age at last birthday 46 (Years)

12. Birthplace (city or place) Lawrence Utah (State or country)

13. Occupation Farmer.

Nature of Industry

14. MOTHER

Full maiden name Carmen Foster

15. Residence (Usual place of abode) Pomerene

If non-resident, give place and state.

16. Color or race White

17. Age at last birthday 41 (Years)

18. Birthplace (city or place) Mexico (State or country)

19. Occupation Housewife

Nature of Industry

20. Number of children of this mother 13 (Taken as of time of birth of child herein certified and including this child.)

(a) Born alive and now living 11

(b) Born alive but now dead

(c) Stillborn 0

21. Were precautions taken against ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE *

I hereby certify that I attended the birth of this child, who was Alive (Born alive or stillborn) at 1,3 P m on the date above stated.

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature J. N. Morrison M.D. (Physician or ~~midwife~~)

Given name added from a supplemental report Month, day, year

Address Benson Arizona

Filed 3/15, 1934 Harry Tapperman M.D. Registrar.

Registrar.

165-311-369

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.

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD