ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

139

State File No. 139

Registered No. 69

Arizona

1. PLACE OF BIRTH

County Gila State Arizona

Township or Village

City Miami No. 416 Wentworth Ave. St. Ward

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

2. Full name of child Georgann Henderson (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 26, 1935. (Month, day, year)

FATHER

9. Full name Charles Curtis Henderson

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

11. Color or race Cauc. 12. Age at last birthday 33 (Years)

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

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

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

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

17. Total time (years) spent in this work

MOTHER

18. Full maiden name Nina Katherine Minor

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

20. Color or race Cauc. 21. Age at last birthday 17 (Years)

22. Birthplace (city or place) Buckeye, (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. Home

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 I (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 1.05 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. Cron, M. D.

or Cyril M. Cron M.D., Midwife

Address Miami, Arizona.

Given name added from supplemental report (Date of)

785-526-549

Registrar.

Filed June 3, 1935. C. M. Cron Registrar.

10M 2-9-33 M9-47971