

1936

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. _____
Registered No. 138

1. PLACE OF BIRTH

County Gila State ARIZONA
Township _____ or Village Payson
City _____ No. _____ St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Virginia Lee Wentworth { If child is not yet named, make supplemental report, as directed

3. Sex female If plural births { 4. Twin, triplets, or other _____ 5. Number, in order of birth _____
6. Premature _____ Full term X 7. Is mother married yes 8. Date of birth Feb. 14 1898 1898
(Month, day, year)

9. Full name FATHER John W. Wentworth
10. Residence (usual place of abode) Payson, Ariz
(If non-resident, give place and State)
11. Color or race white 12. Age at last birthday 51 (Years)
13. Birthplace (city or place) Visalia
(State or Country) Calif.
14. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Mining
15. Industry or business in which work was done, as silk mill, sawmill, bank, etc. Mines
16. Date (month and year) last engaged in this work _____, 19____ 17. Total time (years) spent in this work _____

18. Full maiden name MOTHER Katherine Houston
19. Residence (usual place of abode) Payson, Ariz.
(If non-resident, give place and State)
20. Color or race white 21. Age at last birthday 39 (Years)
22. Birthplace (city or place) Vallejo
(State or Country) Calif.
23. Trade, profession, or particular kind of work done, as housekeeper, typist, nurse, clerk, etc. House keeper
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 3 (b) Born alive but now dead 0 (c) Stillborn 0

28. If stillborn, period of gestation _____ { months or weeks } 29. Cause of stillbirth _____ { During labor or Before labor }

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born at 5 P.M m. on the date above stated (Born alive or stillborn)

(Signed) Katherine Houston Mother, M. D.
or Mrs. Wilhelmina Deeper Midwife

Given name added from supplemental report _____ (Date of) _____
Address _____
Filed Nov 16, 1936 G. F. Williams Registrar

51-11-285