1256

ARIZONA TERRITORIAL BOARD OF HEALTH

BUREAU OF VITAL STATISTICS.

CERTIFICATE OF BIRTH.

Ter. Index No. 166

Register No. 241

PLACE OF BIRTH

County of Maricopa

District of No 21

Town of Tempe

or City of ..... (No. ..... St.; ..... Ward)

FULL NAME OF CHILD Nuts

If child is not named, make Supplemental report on blank obtainable from local registrar.

Born Alive { Yes No

Sex of Child Boy | Twin, Triplet or other / | and Number in order of birth 3 | Legitimate? yes | Date of Birth Oct (Month) 20 (Day) 1909 (Year)

FATHER		MOTHER	
Full Name	Lenard Nuts	Full Maiden Name	Dora Halliday
Residence	Tempe A T	Residence	Tempe A T
Color or Race	White	Color or Race	White
Age at last Birthday	40 (Years)	Age at last Birthday	38 (Years)
Birthplace	Utah	Birthplace	Ala
Occupation	Farmer	Occupation	Housewife

Number of child of this mother 3 | Number of children, of this mother, now living 2 | Were precautions taken against Ophthalmia neonatorum? No

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of above child; and that it occurred on Oct 20, 1909, at 5 P.M.

*When there is no attending physician or midwife, then the householder should make this return. See instructions on back.

(Signature) P B Moore (Attending physician, midwife, householder.*)

Given or christian name added from a supplemental report ..... 19.....

Filed Oct 22 1909 Address Tempe Ariz

R. L. Alexander LOCAL REGISTRAR.

42 COUNTY REGISTRAR.

Filed Nov 4 1909 F A Hughes COUNTY REGISTRAR.

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 birth, stated. This certificate must be filed by the attending Physician or Midwife with the Local registrar within 5 days after birth.