4338

with Unfading Ink.—This is a Permanen[illegible] [illegible]ecord.

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

ARIZONA TERRITORIAL BOARD OF HEALTH

BUREAU OF VITAL STATISTICS.

CERTIFICATE OF BIRTH.

99

Ter. Index No. [redacted]

Register No. 11

PLACE OF BIRTH

County of Gila

District of Young

Town of

or

City of

(No. ..... St.; ..... Ward)

FULL NAME OF CHILD ..... Born Alive Yes ~~No~~

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

Sex of Child Female | Twin, Triplet or other X | and Number in order of birth | Legitimate? Yes | Date of Birth Jan (Month) 12 (Day) 1911 (Year)

FATHER	MOTHER
Full Name Wm Washington Brewer	Full Maiden Name Margaret Wood
Residence Young Ariz	Residence Young
Color or Race W	Color or Race White
Age at last Birthday 37 (Years)	Age at last Birthday 32 (Years)
Birthplace Texas	Birthplace Texas
Occupation Stockman	Occupation Housewife

Number of child of this mother 8 | Number of children, of this mother, now living 5 | Were precautions taken against Ophthalmia neonatorum?

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of above child; and that it occurred on Jan 12, 1911, at 7 a. M

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

(Signature) Mrs. S. M. Ellison
([redacted], householder. *)

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

Filed ..... 19.....

Address Young Ariz

Ola Young
LOCAL REGISTRAR

[illegible]
COUNTY REGISTRAR

Filed Feb 12 1911

B. G. [illegible]
COUNTY REGISTRAR