2618

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS

his return should preferably be made the person who made the original)

SUPPLEMENTARY REPORT OF BIRTH County Registrar's No.*.....

Place of Birth Globe .....County Gila ... No. ..... St.
Registration District)

X OF CHILD*	Twin Triplet or other?	and	Number* in order of birth
male			

TE OF BIRTH* April 14 1911
(Month) (Day) (Year)

FATHER
Thomas Emmet Flannigan

MOTHER
Anna Margaret Craig

I HEREBY CERTIFY that the child described herein has been named
Oscar Craig Flannigan
(Give name in full) (Surname)

Anna Margaret Flannigan
(Parent's Signature)

L. E. Wightman M.D.
(Signature of Physician or Midwife)

tems to be entered by the local registrar before giving out this form

Blank supplemental reports of birth may be obtained from the local registrar.
Local registrars must mail supplemental reports immediately to county registrar. County registrars must mail with nal certificate on tenth day of following month.

665-414-137

Ophthalmia neonatorum or babies' sore eyes may cause the blindness of the child unless prevented or cured.

Keep the discharge of the mother out of the baby's eyes.

Wipe the baby's eyes with absorbent cotton moistened in warm boiled water as soon as the head is born.

Burn the cotton used; the disease is infectious.

Do not include the eyes in the first general bath.

Drop in the eyes of the child as soon as it is born a one (1) per cent solution of nitrate of silver (or such other preventative as may be recommended