2283

Write Plainly, with Unfading Ink.—This is a Permanent Record.

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 3 days after birth.

PLACE OF BIRTH
County of Graham
District of
Town of Geronimo
or
City of

ARIZONA TERRITORIAL BOARD OF HEALTH

BUREAU OF VITAL STATISTICS. Ter. Index No. 121

ORIGINAL CERTIFICATE OF BIRTH. Co. Register No. 139

Local Registrar's No. 47

(No. St; Ward)

FULL NAME OF CHILD Eva Hal Yoak. 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 Single | and | Number; in order of birth 6 | Legitimate? yes | Date of Birth Oct. 27 1911 (Month) (Day) (Yr.)

FATHER	MOTHER
Full Name James Nemiah Holyoak	Full Maiden Name Ella Reynolds
Residence Geronimo.	Residence Geronimo.
Color or Race American — Age at last Birthday 40 (Years)	Color or Race American — Age at last Birthday 28 (Years)
Birthplace Utah	Birthplace Utah
Occupation Farmer.	Occupation Housewife

Number of child of this mother 6 | Number of children, of this mother, now living 6 | Were Precautions taken against Ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of above child; and that it occurred on, Oct. 27th 1911, at 10 a.m.

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

(Signature) R. C. Dryden M.D.
(Attending physician, midwife, householder. *)

Given or christian name added from a supplemental report ..... 191..

Address

Filed Oct. 31 1911

Filed Nov. 8 1911

582-1027-592
COUNTY REGISTRAR

LOCAL REGISTRAR.

COUNTY REGISTRAR.