

2052

PLACE OF BIRTH

County of Maricopa
District of _____
Town of Buckeye
or _____
City of _____

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS. State Index No. 198
ORIGINAL CERTIFICATE OF BIRTH. Co. Register No. 845
Local Registrar's No. _____

FULL NAME OF CHILD Ed. Walter Coy (No. _____ St; _____ Ward) } Born } YES
} Alive } NO

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

Sex of Child Male Twin, Triplet or other _____ } and } Number in order of birth _____ Legitimate? yes Date of Birth Oct 11 1922
(Month) (Day) (yr.)

FATHER
Full Name Clifford G. Coy
Residence Buckeye
Color or Race White Age at last Birthday 50 (Years)
Birthplace Ohio
Occupation Farmer

MOTHER
Full Maiden Name Thea B. Conley
Residence Buckeye
Color or Race White Age at last Birthday 28 (Years)
Birthplace Phoenix, Ariz
Occupation Housewife

Number of child of this mother. 4th Number of children, of this mother, now living 4 Were precautions taken against yes ophthalmia neonatorum?

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of above child; and that it occurred on Oct 11 1922, at 10 A.M.

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

(Signature) W.R. Franklin, M.D.
(Attending physician, midwife, householder.)

Given or christian name added from a

Address Buckeye, Ariz.

supplemental report _____ 191__

Filed _____ 191__

W. E. Lester
LOCAL REGISTRAR

538-1011-338
COUNTY REGISTRAR.

Filed 27 1913

True Copy W. H. Hughes
COUNTY REGISTRAR.