2148

ARIZONA TERRITORIAL BOARD OF HEALTH

BUREAU OF VITAL STATISTICS. Ter. Index No. 268 ~~216~~

ORIGINAL CERTIFICATE OF BIRTH. Co. Register No. 151

Local Registrar's No.

PLACE OF BIRTH

County of

District of

Town of

or

City of

(No. Grand Outlook 405 4th St; Ward)

FULL NAME OF CHILD Hazel Lucile Clarke

Born Alive YES

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

Sex of Child Female | Twin, Triplet or other | and | Number; in order of birth 1st | Legitimate? yes | Date of Birth Oct 26 (Month) (Day) 1912 (Yr.)

FATHER	MOTHER
Full Name Carl Wood Clarke	Full Maiden Name Mae Lillian Miles
Residence Tucson Ariz	Residence Phoenix Ariz
Color or Race White	Color or Race White
Age at last Birthday 23 (Years)	Age at last Birthday 22 (Years)
Birthplace Vermont	Birthplace Nebraska
Occupation Student	Occupation Housewife

Number of child of this mother . . . | Number of children, of this mother, now living . . | 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 Oct 26 1912, at 6 AM

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

(Signature) Mae Clarke (Attending physician, midwife, householder.*)

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

Address Tucson Ariz

Filed Nov 13 1912 H. E. Cupid LOCAL REGISTRAR.

835-1026-442 COUNTY REGISTRAR

Filed ..... 191.. COUNTY REGISTRAR.

*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.