1696

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALT

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

County of.....

District of.....

Town of.....
or
City of.....

State Index No. 1[illegible]5

Co. Register No. 175

Local Registrar's No. 136

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

FULL NAME OF CHILD Muriel Webster

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

Born Alive YES ~~NO~~

Sex of Child	Twin, Triplet or other	and	Number in order of birth	Legitimate?	Date of Birth
Female	—		1	yes	Oct 30 1913 (Month) (Day) (Yr.)

FATHER		MOTHER	
Full Name	Frank Alva Webster	Full Maiden Name	Della Adams
Residence	Central Ariz	Residence	Central Arizona
Color or Race	W	Color or Race	W
Age at last Birthday	37 (Years)	Age at last Birthday	35 (Years)
Birthplace	Utah	Birthplace	Arizona
Occupation	Farmer	Occupation	HouseWife

Number of child of this mother 6 | Number of children, of this mother, now living 5 | 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 30 1913, at 7 A M.

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

(Signature) W. E. McWhirt
(Attending physician, ~~midwife, householder~~.*)

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

Address Solon, Arizona

Filed 12/4 1913 Mrs H. D. French
LOCAL REGISTRAR.

469-1030-442
COUNTY REGISTRAR.

Filed Dec. 9 1913 A True Copy R. C. Dryden
COUNTY REGISTRAR.

N. B.—In case of more [illegible] the number of each, in order of birth, stated. This certificate n[illegible] filed by the attending Physician or Midwife with each local Registrar within 5 days after birth.