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ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

332 State Index No. 704

ORIGINAL CERTIFICATE OF BIRTH

Co. Register No. 19

Local Registrar's No.

PLACE OF BIRTH

County of Navajo

District of

Town of Saint Joseph
or
City of

(No. St; Ward)

FULL NAME OF CHILD Martin Russell Westover

Born / Alive — YES / ~~NO~~

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

Sex of Child	Twin, Triplet or other	and	Number in order of birth	Legitimate?	Date of Birth
Male	one		7	yes	23 Feb 1916 (Month) (Day) (Yr.)

FATHER		MOTHER	
Full Name	John L Westover	Full Maiden Name	Adele Bushman
Residence	Saint Joseph Ariz.	Residence	Saint Joseph Ariz.
Color or Race	White	Color or Race	White
Age at last Birthday	35 (Years)	Age at last Birthday	34 (Years)
Birthplace	Saint Joseph Arizona	Birthplace	Saint Joseph Ariz
Occupation	Farmer	Occupation	Housewife

Number of child of this mother 7 | Number of children, of this mother, now living 7 | 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 23 F 1916, at 3 P.M.

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

(Signature) Mrs J H Richards
(Attending physician, midwife, householder.*)

Address St. Joseph Arizona

Given or christian name added from a supplemental report 191

Filed Mar 4th 1916

J H Richards
LOCAL REGISTRAR.

469 · 223 · 125
COUNTY REGISTRAR.

Filed 3/15 1916

A True Copy

COUNTY REGISTRAR.

Midwife with each local Registrar within 5 days after birth.