8273

N. B.—In case of more than one child at a birth, a separate [illegible] the number of each, in order of birth, stated. This certificate must be filed by the attending Physician or Midwife with each local Registrar within 5 days after birth.

PLACE OF BIRTH

County of Navajo

District of

Town of Woodruff
or
City of

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS 357 State Index No. 714

ORIGINAL CERTIFICATE OF BIRTH

Co. Register No. 92

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD Edgar Wayne Turley — Born / Alive — YES

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 (Month) (Day) (Yr.)
male	single			yes	May 20 1916

FATHER		MOTHER	
Full Name	Hyrum Turley	Full Maiden Name	Pearl Sevey
Residence	Woodruff Ariz.	Residence	Woodruff Ariz.
Color or Race	white	Color or Race	white
Age at last Birthday (Years)	40	Age at last Birthday (Years)	38
Birthplace	Beaver Utah	Birthplace	Panguitch Utah
Occupation	Farmer and Plasterer	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 May 20 1916, at 7.5 A.M.

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

(Signature) Mrs. L. E. Gardner
(Attending physician, midwife, householder.*)

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

Address Woodruff Ariz.

Mrs. L. E. Gardner
LOCAL REGISTRAR.

Filed .....191.....

A True Copy [signature]
COUNTY REGISTRAR.

538-520-728 Filed 7-4 1916
COUNTY REGISTRAR.