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MARGIN RESERVED FOR BINDING
WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD
N. 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.

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 1077-A
Registered No. 176

1. PLACE OF BIRTH
County Gila State ARIZONA
District or Township _____ or Village Payson
City _____ No. _____ St. _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)
2. Full name of child Ralph Leonard Lessel { If child is not yet named, make supplemental report, as directed.

3. Sex of Child Male To be answered ONLY in event of plural births. 4. Twin, triplet or other. _____ 5. Legitimate? Yes 5. No., in order of birth. _____ 7. Date of birth Dec 13 1916
Month Day Year

8. FATHER
Full name Leonard Rex Lessel
9. Residence Silver City, New Mexico.
(Usual place of abode)
If non-resident, give place and state.
10. Color or race White
11. Age at last birthday 40 (Years)
12. Birthplace (city or place) Perry, Iowa
(State or country)
13. Occupation Ass't Forest Supervisor
Nature of industry U.S. Forest Service

14. MOTHER
Full maiden name Bertha Berdenia Hough
15. Residence Silver City, New Mexico
(Usual place of abode)
If non-resident, give place and state.
16. Color or race White
17. Age at last birthday 32 (Years)
18. Birthplace (city or state) Pine, Arizona
(State or country)
19. Occupation Housewife
Nature of industry

20. Number of children of this mother None (Taken as of time of birth of child herein certified and including this child.) (a) Born alive and now living. Yes (b) Born alive but now dead. _____ (c) Stillborn. _____ 21. Were precautions taken against ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE
I hereby certify that I attended the birth of this child, who was Born alive at 3 a.m. on the date above stated.
(Born alive or stillborn)
Signature [Signature] (Physician or midwife)
Address Payson
Given name added from a supplemental report _____
Month, day, year 933-1213-288 Filed 3/21/34 1934 Registrar [Signature]