574

PLACE OF BIRTH

County of Navajo

District of Pinedale

Town of _____

or

City of _____

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 405

Co. Register No. 94

Local Registrar's No. _____

(No. _____ St; _____ Ward)

FULL NAME OF CHILD Melba Thomas

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					March 10 1917 (Month) (Day) (Yr.)

FATHER		MOTHER	
Full Name	W A Thomas	Full Maiden Name	Rose B Thomas
Residence	Pinedale	Residence	Pinedale
Color or Race	White	Color or Race	White
Age at last Birthday	38 (Years)	Age at last Birthday	38 (Years)
Birthplace	Leeds Utah	Birthplace	Stirgen City Utah
Occupation	wool grower	Occupation	house wife

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 the above child; and that it occurred on Mar 10 1917, at 11-30 A.M.

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

(Signature) Lottie M Webb

(~~Attending physician~~, midwife, householder.*)

Address Pinedale Ariz

Given or Christian name added from a supplemental report _____ 191__.

Filed _____ 191__.

G A Peterson

LOCAL REGISTRAR.

432-310-932

COUNTY REGISTRAR.

Filed 5-11 1917

A True Copy

J M Bazell

COUNTY REGISTRAR.