456

PLACE OF BIRTH

County of Maricopa

District of No 2

Town of Tempe

or

City of _____

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 3186

Co. Register No. 3786

Local Registrar's No. _____

(No. _____ St; _____ Ward)

FULL NAME OF CHILD Virginia Louise Pimbeton

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 (Month) (Day) (Yr.)
Female	One		1	yes	July 12 1917

FATHER		MOTHER	
Full Name	John Leroy Pimbeton	Full Maiden Name	Wilmirth Chilson
Residence	Tempe, Arizona	Residence	Tempe, Arizona
Color or Race	White	Color or Race	White
Age at last Birthday (Years)	26	Age at last Birthday (Years)	22
Birthplace	Arizona	Birthplace	Arizona
Occupation	Mechanic	Occupation	Housewife

Number of child of this mother 1 | Number of Children, of this mother, now living 1 | Were precautions taken against Ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

hereby certify that I attended the birth of the above child; and that it occurred on July 12 1917, at 4:35 A.M.

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

(Signature) B. B. Moen

(Attending physician, midwife, householder.*)

Address Tempe Arizona

Given or Christian name added from a

pplemental report _____ 191__

Filed Aug 2 1917

B. B. Moen

LOCAL REGISTRAR

575-712-635

COUNTY REGISTRAR.

Filed Aug. 8 1917

A True Copy A. B. Nichols

COUNTY REGISTRAR

RECEIVED
18 1942
STATE BOARD
HEALTH