993

**PLACE OF BIRTH**

County of Gila

District of Winkelman D Hayden

Town of Hayden

or

City of

# ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS 160 State Index No. 695

ORIGINAL CERTIFICATE OF BIRTH

Co. Register No. 367

Local Registrar's No. 1

(No. St; Ward)

FULL NAME OF CHILD Georgia Ellen Fellows

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 | | | | yes | Aug (Month) 15 (Day) 1917 (Yr.) |

| FATHER | | MOTHER | |
|---|---|---|---|
| Full Name | George Washington Fellows | Full Maiden Name | Stella Louise Scott |
| Residence | Hayden, Ariz. | Residence | Hayden, Ariz. |
| Color or Race | White | Color or Race | White |
| Age at last Birthday (Years) | 24 | Age at last Birthday (Years) | 16 |
| Birthplace | Ariz. | Birthplace | Arizona |
| Occupation | Clerk in Pool hall | 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*

I hereby certify that I attended the birth of above child; and that it occurred on Aug 15, 1917, at 12:15 A.M.

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

(Signature) C R Swackhamer, M.D.
(Attending physician, midwife, householder.*)

Given or christian name added from a supplemental report 191

Address Hayden, Ariz.

Filed Aug 31 1917

H. J. Roberts
LOCAL REGISTRAR.

762-815-223
COUNTY REGISTRAR.

Filed Sept 7 1917

A True Copy B. G. Lioy
COUNTY REGISTRAR.