4938

PLACE OF BIRTH

County of Maricopa

District of No 3

Town of Lehi or Mesa

or

City of .....

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 311

Co. Register No. 3940

Local Registrar's No. 585

(No. ..... St; ..... Ward)

FULL NAME OF CHILD .....

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.)
Male	—			Yes	Sep 27 1917

FATHER	MOTHER
Full Name: Caleb Ault	Full Maiden Name: Melenda Elizabeth Elder
Residence: Mesa Ariz.	Residence: Mesa Ariz.
Color or Race: White	Color or Race: White
Age at last Birthday: 39 (Years)	Age at last Birthday: 37 (Years)
Birthplace: Ark	Birthplace: Ark
Occupation: Merchant	Occupation: Wife

Number of child of this mother: 7. Number of children, of this mother, now living: 6. 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 Sep 27 1917, at 2:25 a M.

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

(Signature) O. B. Gunshaw

(Attending physician, midwife, householder.*)

Address Mesa Ariz.

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

413-927-459

COUNTY REGISTRAR.

Filed Oct 1 1917

J. E. Drake

LOCAL REGISTRAR.

Filed Oct 9 1917

A True Copy

A. B. Nichols

COUNTY REGISTRAR.