2292

PLACE OF BIRTH

County of Gila

District of Winkelman

Town of Winkelman

or

City of _____ (No._____ St._____ Ward)

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS 131 State Index No. 554

ORIGINAL CERTIFICATE OF BIRTH

Co. Register No. 502

Local Registrar's No. 1

FULL NAME OF CHILD Lena May Jefferson

If child is not named, make Supplemental Report on blank obtainable from local registrar.

Born Alive: YES

Sex of Child	Twin, Triplet or other	and	Number in order of birth	Legitimate?	Date of Birth (Month) (Day) (Yr.)
Female				Yes	Oct. 16 1917

FATHER		MOTHER	
Full Name	Leonard Jeffson	Full Maiden Name	Bessie Mims
Residence	Winkelman	Residence	Winkel
Color or Race	White	Color or Race	White
Age at last Birthday (Years)	24	Age at last Birthday (Years)	19
Birthplace	U. S.	Birthplace	U. S.
Occupation	Miner	Occupation	Home-mfe

Number of child of this mother 2nd | Number of Children, of this mother, now living 2 | 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 Oct. 16 1917, at 2:30 a. M.

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

(Signature) M. G. Marden M.D.
(Attending physician, ~~midwife,~~ householder.*)

Address Winkelman Ariz

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

Filed Oct 30 1917. H. Roberts
LOCAL REGISTRAR.

315-1016-242
COUNTY REGISTRAR.

Filed Nov 9 1917.

A True Copy B. G. Jay
COUNTY REGISTRAR.