ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 6
Co. Register No. 18
Local Registrar's No. 1

PLACE OF BIRTH

ity of Apache
rict of
of Eagar
f

(No. St; Ward)

L NAME OF CHILD Louise Hamblin

Born Alive { X YES / NO

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

of d	Twin, Triplet or other	and	Number in order of birth	Legitimate?	Date of Birth (Month) (Day) (Yr.)
Female	X				Mar 12 1918

FATHER

e Dudley J. Hamblin

dence Eagar

ace White — Age at last Birthday 38 (Years)

hplace Arizona

upation Mail Contractor

MOTHER

Full Maiden Name Julia Mae Butler

Residence Eagar

Color or Race White — Age at last Birthday 33 (Years)

Birthplace Ariz

Occupation Housewife

er of child of this mother ..... Number of children, of this mother, now living ..... Were precautions taken against Ophthalmia neonatorum? .....

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

reby certify that I attended the birth of above child; and that it occurred on ..... 191..., at ..... M.

*When there is no attending physi-
an or midwife, then the householder
ould make this return.

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

Address Eagar

iven or christian name added from a

plemental report ..... 191...

Filed 3/12 1919 — E. J. Udall, LOCAL REGISTRAR.

385-312-129 — COUNTY REGISTRAR.

Filed 3/15 1919 — A True Copy J. R. Mauser, COUNTY REGISTRAR.