PLACE OF BIRTH

ounty of Cochise

District of

Town of Benson

or

y of (No. St; Ward)

# ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

State Index No. 94

## ORIGINAL CERTIFICATE OF BIRTH

Co. Register No.

Local Registrar's No.

ULL NAME OF CHILD Joseph Whelan

Born Alive: YES ~~NO~~

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

| ex of ild | Twin, Triplet or other | and | Number in order of birth | Legitimate? | Date of Birth (Month) (Day) (Yr.) |
|---|---|---|---|---|---|
| Female | | | | yes | March 25 1918 |

| FATHER | | MOTHER | |
|---|---|---|---|
| ll ame | William Whelan | Full Maiden Name | Ignacia Leon |
| esidence | Benson | Residence | |
| olor Race | White | Color or Race | White |
| Age at last Birthday | 41 (Years) | Age at last Birthday | 37 (Years) |
| ithplace | Arizona | Birthplace | Mexico |
| ccupation | Stockman | Occupation | Housewife |

mber of child of this mother 8 | Number of children, of this mother, now living 6 | Were precautions taken against Ophthalmia neonatorum? yes

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

ereby certify that I attended the birth of above child; and that it occurred on March 25 1918, at 6:30 A. M.

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

(Signature) Dr. J. G. Monroe
(Attending physician, midwife, householder.*)

Given or christian name added from a

pplemental report 191

Address

Filed Mar 27 1918 — L. L. Schwab. LOCAL REGISTRAR.

165-305835 COUNTY REGISTRAR.

Filed Apr. 18 1918 — A True Copy C. H. Grant COUNTY REGISTRAR.