184

**PLACE OF BIRTH**

# ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

**ORIGINAL CERTIFICATE OF BIRTH**

State Index No. 136

Co. Register No. 129

Local Registrar's No. 1

County of Gila

District of Hayden & Winkelman

Town of Hayden

or

City of

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

FULL NAME OF CHILD Francis Sweeney Tuck

Born Alive YES ~~NO~~

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

| Sex of Child | Twin, Triplet or other | and | Number in order of birth | Legitimate? | Date of Birth |
|---|---|---|---|---|---|
| M | ✓ | | ✓ | Yes | March (Month) 10 (Day) 1918 (Yr.) |

| FATHER | | MOTHER | |
|---|---|---|---|
| Full Name | Frank Tuck | Full Maiden Name | Olive Sweeney Tuck |
| Residence | Hayden | Residence | Hayden |
| Color or Race | Am | Color or Race | Am |
| Age at last Birthday | 31 (Years) | Age at last Birthday | 29 (Years) |
| Birthplace | Mass. | Birthplace | Mass |
| Occupation | Metallurgical Engr. | Occupation | Housewife |

Number of child of this mother 4 | Number of children, of this mother, now living 3 | 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 March 10 1918, at 7.45 A.M.

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

(Signature) Charles H Gowan
(Attending physician, ~~midwife, householder~~.*)

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

Address Hayden

Filed March 20 1918

H D Roberts
LOCAL REGISTRAR.

632-310-628
COUNTY REGISTRAR.

Filed Apr 6 1918

A True Copy B. G. Fox
COUNTY REGISTRAR.