

2523

PLACE OF BIRTH
County of Maricopa
District of Phoenix
Town of Phoenix
or
City of _____

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH
State Index No. 510
Co. Register No. 5114
Local Registrar's No. 5365
(No. 814 No 7th St St; _____ Ward)

FULL NAME OF CHILD Boyd Heileman } Born 1918
If child is not named, make Supplemental Report on blank obtainable from local registrar. } Alive Stillborn

Sex of child Male } and } Number in order of birth _____ } Legitimate? _____ } Date of Birth _____ 1918
Twin, Triplet or other _____ } (Month) (Day) (Yr.)

FATHER
Full Name W.H. Heileman
Residence Phoenix Ariz.
Color or Race White Age at last Birthday 42 (Years)
Birthplace Ill
Occupation auto-work

MOTHER
Full Maiden Name Mary Foushee
Residence Phoenix
Color or Race White Age at last Birthday 34 (Years)
Birthplace Phoenix Ariz
Occupation House wife

Number of child of this mother 2 Number of Children, of this mother, now living 2 Were precautions taken against Ophthalmia neonatorum? _____

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child; and that it occurred on June 19 1918, at 6:30 P.M.

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

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

Given or Christian name added from a supplemental report _____ 1918

Address Phoenix Ariz.
[Signature]
LOCAL REGISTRAR.

785-619-415
COUNTY REGISTRAR.

Filed July 1 1918
Filed 8-7 1918

A True Copy
[Signature]
COUNTY REGISTRAR.