ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 151
Co. Register No. 367
Local Registrar's No. 7

PLACE OF BIRTH
County of Gila
District of
Town of Hayden
or
City of
(No. St. Ward)

FULL NAME OF CHILD Collins Reed Mc Neil

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 (Month) (Day) (Yr.)
M	✓		1	Yes	July 15 1918

FATHER		MOTHER	
Full Name	Henry Mc Neil	Full Maiden Name	Ruby Hakes
Residence	Hayden	Residence	Hayden
Color or Race	Wh	Color or Race	Wh
Age at last Birthday	31 (Years)	Age at last Birthday	32 (Years)
Birthplace	U.S.	Birthplace	Ariz
Occupation	Mech.	Occupation	Hs Wife

Number of child of this mother 3 | 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 July 15 1918, at 10 P. M.

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

(Signature) Charles F. Graham
(Attending physician, midwife, householder.*)

Address Hayden

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

Filed 7/16 1918 W. B. Nash
LOCAL REGISTRAR.

343-715-982
COUNTY REGISTRAR.

Filed 8/10 1918 A True Copy B. G. Doe
COUNTY REGISTRAR.