

1127

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

County of Graham

BUREAU OF VITAL STATISTICS

State Index No. 237

District of _____

ORIGINAL CERTIFICATE OF BIRTH

Co. Register No. 182

Town of Safford

Local Registrar's No. 141

City of _____ (No. _____ St; _____ Ward)

FULL NAME OF CHILD Harold Hunter Spiegel } Born } YES
If child is not named, make Supplemental Report on blank obtainable from local registrar. } Alive } NO

Sex of Child M } Twin, Triplet or other } and } Number in order of birth } Legitimate? yes } Date of Birth Aug. 30 1918
(Month) (Day) (Yr.)

FATHER
Full Name J. B. Spiegel
Residence Denver, Colo.
Color or Race M. Age at last Birthday 29 (Years)
Birthplace Michigan
Occupation Government Engineer

MOTHER
Full Maiden Name Margaret Jane Hunter
Residence Safford
Color or Race M. Age at last Birthday 30 (Years)
Birthplace Canada
Occupation Housewife

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 Aug. 30 1918, at 5 p. M.

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

(Signature) H. J. Warner
(Attending physician, midwife, householder.*)

Given or christian name added from a supplemental report191..... Address.....

823-830-489
COUNTY REGISTRAR.

Filed 8/31 1918
Filed 9/10 1918

W. H. Thayer
LOCAL REGISTRAR.
A True Copy J. M. [Signature]
COUNTY REGISTRAR.