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ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

State Index No. 188

ORIGINAL CERTIFICATE OF BIRTH

Co. Registrar's No. 205

Local Registrar's No. _____

PLACE OF BIRTH
 County of Gila
 District of _____
 Town of Hayden
 or _____
 City of _____

(No. _____ St. _____ Ward)

NAME OF CHILD Lyndon Edwin Fruit Born YES
 Child is not named, make Supplemental Report on blank obtainable from local registrar. Alive NO

Sex Male Twin, Triplet or other _____ and Number in order of birth _____ Legitimate? Yes Date of Birth March 30 1919
 Month Day Yr.

FATHER
Lyndon E. Fruit
Hayden Ariz
 Age at last Birthday 29 Years
 Birthplace Wichita, Kansas
 Occupation Chief Clerk

MOTHER
Lela Courson
Hayden
 Age at last Birthday 26 Years
 Birthplace Socorro New Mex
 Occupation Housewife

Age of this Mother 26 Number of Children, of this mother, now living 2 Were precautions taken against Ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child; and that it occurred on March 30 1919 at 10:30 A.M.
 *When there is no attending physician or midwife, then the householder should make this return.

Signature Leonard S. Wood
 Attending physician, midwife, householder.*

Given or Christian name added from a supplemental report _____ 1919
363-330-335
 COUNTY REGISTRAR.

Address Hayden Ariz
 Filed Apr 8 1919
 A True Copy Filed May 8 1919
W. B. J. Fox
 LOCAL REGISTRAR.
B. G. Fox
 COUNTY REGISTRAR.