

2316

R. A. WATKINS PRINTING CO., PHOENIX

NAME ADDED BY SUPPLEMENT

ARIZONA STATE BOARD OF HEALTH BUREAU OF VITAL STATISTICS

County of Maricopa District of Mesa #3 Town of Gilbert City of _____
 State Index No. 571 Co. Register No. 9467 Local Registrar's No. 214
 ORIGINAL CERTIFICATE OF BIRTH

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

Sex of Child <u>Female</u>	<u>Single</u>	and	Number in order of birth	Legitimate? <u>yes</u>	Date of Birth <u>April 20</u> 19 <u>20</u> (Month) (Day) (Yr.)
FATHER			MOTHER		
Full Name <u>Walter Alexander Junkin</u>			Full Maiden Name <u>Clara May Frazer</u>		
Residence <u>Ranch near Gilbert</u>			Residence <u>Ranch near Gilbert</u>		
Color or Race <u>white</u>	Age at last Birthday <u>43</u> (Years)		Color or Race <u>White</u>	Age at last Birthday <u>39</u> (Years)	
Birthplace <u>Ill.</u>			Birthplace <u>Texas</u>		
Occupation <u>Rancher</u>			Occupation <u>House wife</u>		
Number of child of this mother <u>5</u>	Number of Children, of this mother, now living <u>4</u>	Were precautions taken against Ophthalmia neonatorum? <u>yes</u>			

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child; and that it occurred on April 20 1920, at 10 M.
 *When there is no attending physician or midwife, then the householder should make this return.

(Signature) L. M. Tompkins
 (Attending physician, midwife, householder.)

Given or Christian name added from a supplemental report _____ 191_____

Address Gilbert Ariz.
J. E. Drane
 LOCAL REGISTRAR.

215-420-569
 COUNTY REGISTRAR.

Filed 5-4-20
 A True Copy Filed 5-7-20

R. R. Larson
 COUNTY REGISTRAR.