

2226

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS

#179

(This return should preferably be made by the person who made the original.)

SUPPLEMENTARY REPORT OF BIRTH

County Register No. 635

Place of Birth Payson Gila Co. Arizona
(Registration district)

No. _____ St. _____

I HEREBY CERTIFY that the child described herein has been named

SEX OF CHILD* M Twins Triplet or other? { and } Number* 4 in order of birth

DATE OF BIRTH* Oct 25 1921
[Month] [Day] [Year]

Harry Curtis Neal
[Give name in full] [Surname]

FATHER
FULL* NAME Arthur Neal

[Signature] Arthur Neal

MOTHER
FULL* MAIDEN NAME Bessie Newman

Father
(Religion or M/Wife)

*These items to be entered by the local registrar before giving out this form.

Blank supplemental reports of births may be obtained from the local registrar.

Local registrars must mail supplemental reports immediately to county registrar. County registrars must mail with original certificate on tenth day of following month.

MARGIN RESERVED FOR BINDING
This supplemental report is to be pasted beneath the original.

cut Aug 7th 1921

8-15-21 853-1025-254