

4495

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

County of Maricopa
District of 3
Town of Mesa
or
City of _____

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 385
Co. Register No. 29176
Local Registrar's No. 663

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

Sex of Child X Female Twin, Triplet or other Single and and Number in order of birth 1 Legitimate? yes Date of Birth Dec 16 1920
(Month) (Day) (Yr.)

FATHER
Full Name George A Kleinman
Residence Mesa
Color or Race White Age at last Birthday 46 (Years)
Birthplace Mesa
Occupation Farmer

MOTHER
Full Maiden Name Rina S. Stephens
Residence Mesa
Color or Race White Age at last Birthday 24 (Years)
Birthplace Southern Ky
Occupation Wife

Number of child of this mother... 1 Number of children, of this mother, now living... 1 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 Dec 16 1920 at 1 a.m.
{ *When there is no attending physician or midwife, then the householder should make this return. (Signature) Dr R M Zapp
(Attending physician, midwife, householder.)*

Given or christian name added from a supplemental report _____ 191_____ Address Mesa Ariz

725-1216-522
COUNTY REGISTRAR.

Filed Jan 5 1921

Filed Jan 11 1921

J. E. Driane Jr.
LOCAL REGISTRAR.
Grand S. Markoe
COUNTY REGISTRAR.

the number of each, in order of birth, stated. This certificate must be filed by the attending physician or midwife with each local Registrar within 5 days after birth.