114

PLACE OF BIRTH

County of Cochise

District of Warren

Town of .....

or

City of Bisbee

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. .....

Co. Register No. .....

Local Registrar's No. .....

(No. ..... St; ..... Ward)

FULL NAME OF CHILD Benjamin Franklin Faraway

If child is not named, make Supplemental Report on blank obtainable from local Registrar.

Born Alive: Yes

Sex of Child	~~Twin, Triplet,~~ or other	and	Number in order of birth	Legitimate?	Date of Birth
Male			2	yes	2 (Month) 19 (Day) 1921 (Yr.)

FATHER		MOTHER	
Full Name	W. B. Faraway	Full Maiden Name	Eliza A Helmcamp
Residence	Lowell	Residence	Lowell
Color or Race	White	Color or Race	White
Age at last Birthday	59 (Years)	Age at last Birthday	38 (Years)
Birthplace	Texas	Birthplace	Ind.
Occupation	Laborer	Occupation	Housewife

Number of child of this mother 2 | 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 2/19 1921, at 8:30 A.M.

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

(Signature) C L Edmundson

(Attending physician, midwife, householder.*)

Address Bisbee Ariz.

Given or Christian name added from a supplemental report ..... 192.....

Filed 3-8- 1921

W B Bryan

LOCAL REGISTRAR.

238-219-587

COUNTY REGISTRAR.

A True Copy

Filed ..... 192.....

R B Hendee

COUNTY REGISTRAR.