9467

PLACE OF BIRTH

ENDORSEMENT ATTACHED

County of Maricopa

District of No 2

Town of Mesa
or

City of

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 9158

Co. Registrar's No. 618

Local Registrar's No. 157

(No. St.; Ward)

FULL NAME OF CHILD

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

Born Alive: Yes ~~No~~

Sex of Child: Male | Twin, Triplet or other: — | and | Number in order of birth: 8 | Legitimate? Yes | Date of Birth: May 16 1921 (Month) (Day) (Yr.)

FATHER	MOTHER
Full Name: Caleb Ault	Full Maiden Name: Milinda B Elder
Residence: Mesa Ariz	Residence: Mesa Ariz
Color or Race: White	Color or Race: White
Age at last Birthday: 43 (Years)	Age at last Birthday: 41 (Years)
Birthplace: Ark.	Birthplace: Ark.
Occupation: Farmer	Occupation: Wife

Number of child of this mother: 8 | Number of children of this mother now living: 7 | 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 May 16 1921, at 7 30 P. M.

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

(Signature) E E Christiansen M.D.
(Attending physician, midwife, householder.*)

Address Mesa Ariz

Given or Christian name added from a supplemental report 192

Filed 3-30 1921

J E Drane M.D.
LOCAL REGISTRAR.

413-316-459
COUNTY REGISTRAR.

Filed 4/10 1921 A True Copy

COUNTY REGISTRAR.

...sician or midwife with each local Registrar within 5 days after birth.