

1545

PLACE OF BIRTH
 County of Graham
 District of Pima
 Town of Pima
 or
 City of _____

ARIZONA STATE BOARD OF HEALTH
 BUREAU OF VITAL STATISTICS
 ORIGINAL CERTIFICATE OF BIRTH

State Index No. 199
 Co. Register No. 198
 Local Registrar's No. 198

NAME ADDED BY SUPPLEMENT (No. _____ St. _____ Ward)

FULL NAME OF CHILD Blanch Allen { Born } Yes
 { Alive } ~~NO~~
 If child is not named, make Supplemental Report on blank obtainable from local Registrar.

Sex of Child <u>Female</u>	Twin, Triplet or other <u>Single</u>	and	Number in order of birth <u>6</u>	Legitimate? <u>yes</u>	Date of Birth <u>July 25</u> 19 <u>21</u> (Month) (Day) (Yr.)
FATHER			MOTHER		
Full Name <u>Samuel C. Allen</u>			Full Maiden Name <u>Lucy Craig</u>		
Residence <u>Pima</u>			Residence <u>Pima</u>		
Color or Race <u>White</u>	Age at last Birthday <u>35</u> (Years)		Color or Race <u>White</u>	Age at last Birthday <u>31</u> (Years)	
Birthplace <u>Utah</u>			Birthplace <u>Arizona</u>		
Occupation <u>Farmer</u>			Occupation <u>Housewife</u>		

Number of child of this mother 6th Number of children, of this mother, now living 6 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 7/25 1921, at 6 P.M.

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

(Signature) R. C. Dyden
 (Attending physician, midwife, householder*)

Address Pima, Arizona

Given or Christian name added from a supplemental report _____ 1921 Filed 8-5 1921 LOCAL REGISTRAR. Alma Burus

215-725-337 COUNTY REGISTRAR. Filed 8-9 1921 A True Copy J. M. Stratton COUNTY REGISTRAR.