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ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 177
Co. Register No. 98
Local Registrar's No. 110

PLACE OF BIRTH
County of Maricopa
District of No 3
Town of Gilbert
or
City of ..... (No. ..... St.; ..... Ward)

FULL NAME OF CHILD Jane La Ree Peterson — Born Alive ~~NO~~ YES

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

Sex of child: Female — Twin, Triplet or other: Single — and — Number in order of birth: — Legitimate? Yes — Date of Birth: Dec 1 1921 (Month) (Day) (Yr.)

FATHER		MOTHER	
Name	Criss H. Peterson	Full Maiden Name	Anne M Johnson
Residence	Ranch near Gilbert	Residence	Ranch near Gilbert
Color or Race	White — Age at last Birthday 26 (Years)	Color or Race	White — Age at last Birthday 26 (Years)
Birthplace	Arizona	Birthplace	Mexico
Occupation	Farmer	Occupation	Home wife

Number of child this mother 3 — Number of Children, of this mother, now living 3 — 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 Dec 1 1921, at 9P M.

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

(Signature) L. M. Tompkins
(Attending physician, ~~midwife, householder.~~*)
Gilbert

Given or Christian name added from a supplemental report ..... 191.....

Address

Filed 12-8 1921

J. E. Drane Jr.
LOCAL REGISTRAR.

A True Copy
Filed 1-14 1922

175-1201-115
COUNTY REGISTRAR.

CLERK OF MONICIPAL COURT
COUNTY REGISTRAR.