2348

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 125

Co. Registrar's No. 62

Local Registrar's No. .....

PLACE OF BIRTH

County of Gila

District of .....

Town of Miami

or

City of ..... (No. ..... St: ..... Ward)

FULL NAME OF CHILD Charles Edward Bablett

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 1 | Legitimate? yes | Date of Birth Feb 28 1922 (Month Day Yr.)

FATHER		MOTHER	
Full Name	Walter Bablett	Full Maiden Name	Lona Nelson
Residence	Miami Ariz	Residence	Miami Ariz
Color or Race	White American	Age at last Birthday	27 Years
Birthplace	Ariz.	Birthplace	New Mex
Occupation	Mechanic	Occupation	Housewife

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 the above child: and that it occurred on 2/28/ 1922 at 10 P.M.

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

Signature T H Slaughter

Attending physician, midwife, householder.*

Address Miami Ariz

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

Filed Feb 28 1922 B M Hardy

LOCAL REGISTRAR.

323-228-355

COUNTY REGISTRAR.

Filed Mar 9 1922 A True Copy B G Gist

COUNTY REGISTRAR

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