4567

PLACE OF BIRTH

Supplement Attached

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 27

Co. Registrar No. 1707

Local Registrar's No.

ounty of Cochise

strict of Benson

own of

or

ty of (No. St. Ward)

JLL NAME OF CHILD Nola May Edmonson

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

Born YES / Alive ~~NO~~

x of ild	Twin, Triplet or other	and	Number in order of birth	Legitimate?	Date of Birth
Female				yes	May 6 1922 (Month) (Day) (Yr.)

FATHER		MOTHER	
ll me	John Oakley Edmonson	Full Maiden Name	Clara May Gault
sidence	Benson, Ariz	Residence	Benson
or Race	White	Age at last Birthday	52 (Years)
		Color or Race	White
		Age at last Birthday	30 (Years)
thplace	Knoxville, Tenn.	Birthplace	Knoxville Tenn.
cupation	Farmer	Occupation	Housewife

mber 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*

eby certify that I attended the birth of the above child, and that it occurred on May 6, 1922, at 1 P.M.

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

(Signature) George T. Fuller Jr. M.D.
(Attending physician, midwife, householder.*)

Address Benson, Ariz.

Given or Christian name added from a plemental report 192

Filed May 6 1922 George T. Fuller Jr. M.D.
LOCAL REGISTRAR.

555-506-373
COUNTY REGISTRAR.

Filed 6/8 1922 A True Copy R B Dunfee
COUNTY REGISTRAR.