

4782

N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each, in order of birth, stated.

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

1. County of Gila
District of Rayson
Town of _____
or _____

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 138
Co. Registrar No. 452
Local Registrar No. 345

City of _____ No. _____ St. _____ Ward) _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Brunson } If child is not yet named, make supplemental report, as directed

3. Sex of child m To be answered ONLY in event of plural births. 4. Twin, triplet or other. 5. No., in order of birth. 6. Legitimate? Yes 7. Date of birth Sept. 24 (Month, day, year)

8. FATHER Full name Geo. Brunson

14. MOTHER Full maiden name Jennie Henderson

9. Residence (Usual place of abode) If nonresident, give place and State Rossett, Ariz

15. Residence (Usual place of abode) If nonresident, give place and State Rossett, Ariz

10. Color or race W 11. Age at last birthday 54 (Years)

16. Color or race W 17. Age at last birthday 34 (Years)

12. Birthplace (city or place) (State or country) Texas

18. Birthplace (city or place) (State or country) Ariz

13. Occupation Farmer Nature of Industry

19. Occupation Housewife Nature of Industry

20. Number of children of this mother (Taken as of time of birth of child here-in certified and including this child.) (a) Born alive and now living 7 (b) Born alive but now dead 3 (c) Stillborn 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was Promator at 9:30 m. on the date above stated. (Born alive or stillborn)

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth. Signature C. A. Russen M.D. (Physician or midwife)

Address Rayson Ariz Filed 9/30, 1922 Jay J. Damm local Registrar.

Given name added from a supplemental report. (Month, day, year) 045-924-185 Filed Oct 3, 1922 B. S. J. D. County Registrar.