

1004

MARGIN RESERVED FOR... WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD... 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.

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

PLACE OF BIRTH  
1. County of Gila  
District of \_\_\_\_\_  
Town of \_\_\_\_\_  
or  
City of Hayden No. \_\_\_\_\_ St. \_\_\_\_\_ Ward \_\_\_\_\_

State Index No. 179  
County Registrar No. 485  
Local Registrar No. 24

2. Full name of child Donald Corwin Lumbley (If birth occurred in a hospital or institution, give its NAME instead of street and number) If child is not yet named, make supplemental report, as directed.

3. Sex of Child male To be answered ONLY in event of plural births. 4. Twin, triplet or other \_\_\_\_\_ 6. Legitimate? yes 7. Date of birth July 18, 1923  
5. No., in order of birth \_\_\_\_\_

8. FATHER Full name <u>Frank Lumbley</u>	14. MOTHER Full maiden name <u>Edna Dunn</u>
9. Residence (Usual place of abode) <u>Hayden, Ariz</u> If nonresident, give place and state	15. Residence (Usual place of abode) <u>Hayden Ariz</u> If nonresident, give place and state
10. Color or race <u>White</u>	16. Color or race <u>White</u>
11. Age at last birthday <u>36</u> (Years)	17. Age at last birthday <u>36</u> (Years)
12. Birthplace (city or place) <u>Mexico</u> (State or country)	18. Birthplace (city or place) <u>Texas</u> (State or country)
13. Occupation <u>Storekeeper</u> Nature of industry <u>Ray Conv. Co.</u>	19. Occupation <u>Housewife</u> Nature of industry _____
20. Number of children of this mother (a) Born alive and now living <u>1</u> (b) Born alive but now dead _____ (c) Stillborn _____	21. Were precautions taken against ophthalmia neonatorum? <u>yes</u>

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***

I hereby certify that I attended the birth of this child, who was born alive at 1:25 a.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 Harry C. Ludwig M.D.  
Address Hayden, Arizona  
(Physician or midwife)

Given name added from a supplemental report \_\_\_\_\_  
Month, day, year. \_\_\_\_\_  
Registrar. \_\_\_\_\_

Filed July 20, 1923 W. J. D. Nash Local Registrar.  
Filed 8/8 1923 W. J. D. Nash County Registrar.

429-718-545