

1222

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

State Index No. 161
County Registrar No. 187
Local Registrar No. 6

PLACE OF BIRTH
1. County of Gila
District of _____
Town of Hayden
or _____
City of _____

2. Full name of child Richard Jefferson Nations
3. Sex of Child Male
4. Twin, triplet or other _____
5. No. in order of birth _____
6. Legitimate? _____
7. Date of birth 2-23-24
Month day year

8. FATHER
Full name James Nations
9. Residence (Usual place of abode) Hayden
If nonresident, give place and state _____

14. MOTHER
Full maiden name Ermalee Robbs
15. Residence (Usual place of abode) Hayden
If nonresident, give place and state _____

10. Color or race White
11. Age at last birthday 29 (Years)

16. Color or race White
17. Age at last birthday 21 (Years)

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

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

13. Occupation Fireman
Nature of industry _____

19. Occupation H.M.
Nature of industry _____

20. Number of children of this mother (a) Born alive and now living 2
(b) Born alive but now dead 0
(c) Stillborn _____
21. Were precautions taken against cephalic hematoma?
Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*
I hereby certify that I attended the birth of this child, who was Born alive at 10 A.M. on the date above stated.
(Born alive or stillborn.)

Signature Fitz R. Winslow
Address Hayden, Ariz.
Month, day, year _____
Filed Feb 25 1924
County Registrar R. S. Day

Registrar. _____
Filed 3-10 1924
County Registrar. _____

952-223-592