

12111

MARGIN RESERVED FOR BINDING
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 Pima
District of Hayden
Town of _____
or _____
City of _____

State Index No. 177
County Registrar No. 717
Local Registrar No. 36

2. Full name of child Elwin James Humbergh
(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. Twin, triplet or other.

4. Legitimate? Yes

5. No., in order of birth _____

6. Date of birth Aug 27 1924
Month day year

7. St. _____ Ward _____

8. FATHER
Full name Ray Earl Humbergh
Residence Hayden Arizona
If nonresident, give place and state _____

9. MOTHER
Full name Madeline Lucile Owen
Residence Hayden Arizona
If nonresident, give place and state _____

10. Color of race White

11. Age at last birthday 27 (Years)

12. Birthplace Sumner Indiana
(State or country)

13. Occupation Millwright
Nature of industry _____

14. Color of race White

15. Age at last birthday 92 (Years)

16. Birthplace Colorado
(State or country)

17. Occupation House Wife
Nature of industry _____

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

21. Were precautions taken against ophthalmia neonatorum? Yes

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

Signature Charles H. Hirsch MD
Address Hayden Arizona
(Physician or midwife)

Month, day, year. _____ Filed Aug 31 1924
Local Registrar. W. J. Park

Registrar. _____ Filed 10-5 1924
County Registrar. J. J. Fox

588-827-465