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N. B.—In case of multiple births, 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 Apache
District of _____
Town of Nutrioso
or _____
City of _____

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 12
County Registrar No. 127
Local Registrar No. 5

2. Full name of child Inglaverson Lee { If child is not yet named, make supplemental report, as directed.

3. Sex of Child Female 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 20 1924
Month Day Year

8. FATHER
Full name Marion Lee
9. Residence (Usual place of abode) Nutrioso Ariz
If nonresident, give place and state

14. MOTHER
Full maiden name Ella Maxwell
15. Residence (Usual place of abode) Nutrioso Ariz
If nonresident, give place and state

10. Color or race White 11. Age at last birthday 33 (Years)

16. Color or race White 17. Age at last birthday 27 (Years)

12. Birthplace (city or place) Nutrioso Ariz
(State or country) Apache Co Ariz

18. Birthplace (city or place) White Oaks
(State or country) New Mex

13. Occupation
Nature of industry Farming

19. Occupation
Nature of industry House Wife

20. Number of children of this mother (a) Born alive and now living four (b) Born alive but now dead one (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 _____ at _____ P. M. on the date above stated.

*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 Anna Nelson
Address Taylor
(Physician or midwife)

Given name added from a supplemental report _____ Month, day, year. _____ Registrar.
Filed sep 24 1924 Lucinda Wilkins Local Registrar
Filed oct 10 1924 J J Bonobon County Registrar

935-920-343