

1154

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

1. County of Hila
District of Keala
Town of _____
or
City of Keala

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 181
County Registrar No. 6
Local Registrar No. 1

2. Full name of child Peter Jerome
(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 _____
5. No., in order of birth _____
6. Legitimate? Yes
7. Date of birth 11 20 24
Month Day Year

8. FATHER
Full name George Jerome
9. Residence (Usual place of abode) Keala Ariz
If non-resident, give place and state.

14. MOTHER
Full maiden name Jenny Katsyue
15. Residence (Usual place of abode) Keala Ariz
If non-resident, give place and state.

10. Color or race 1/4 Indian
11. Age at last birthday 41 (Years)

16. Color or race 1/4 Indian
17. Age at last birthday 23 (Years)

12. Birthplace (city or place) Rice Ariz
(State or country)

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

13. Occupation Common Laborer
Nature of industry

19. Occupation Housewife
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 2
(b) Born alive but now dead 0
(c) Stillborn 0

21. Were precautions taken against ophthalmia neonatorum? No

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was born alive at 2 P. 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 R. H. Sawyer M.D.
Address Sau Carlos, Ariz
(Physician or midwife.)

Given name added from a supplemental report _____ Filed _____ 19____
Month, day, year _____ Local Registrar.

Registrar _____ Filed 2/4 1925 G. E. Wylburn
County Registrar

715-1120-355

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.