RECEIVED
JUL 14 1925
File
Ans.

ARIZONA STATE BOARD OF HEALTH

390 V

BUREAU OF VITAL STATISTICS

SUPPLEMENTARY REPORT OF BIRTH County Registrar's No.* 244

(This return should preferably be made by the person who made the original.)

Place of Birth (Registration District) Phoenix County Maricopa No. 1026 E Pierce S

SEX OF CHILD*	Twin Triplet or other?	and	Number* in order of birth

DATE OF BIRTH* June (Month) 21 (Day) 1925 (Year)

FATHER
FULL* NAME Wm P. Pleasant

MOTHER
FULL* MAIDEN NAME Ethel Vance

I HEREBY CERTIFY that the child described herein has been named

Harold Maurice
(Give name in full) (Surname)

Mr. and Mrs. W P Pleasant
(Parent's signature)

Harry J. Felch
(Signature of Physician or Midwife)

These items to be entered by the local registrar before giving out this form.

...ental reports of birth may be obtained from the local registrar.
... must mail supplemental reports immediately to county registrar. County registrars must mail with original certificate on tenth ...

843-621-555