

PLACE OF BIRTH

# ARIZONA STATE BOARD OF HEALTH

1. County of Gila

District of \_\_\_\_\_

Town of Hayden

or  
City of \_\_\_\_\_

BUREAU OF VITAL STATISTICS  
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 143

County Registrar No. \_\_\_\_\_

Local Registrar No. 1

2. Full name of child Josephine May Stillwell  
(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 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 Jul 16 1926  
month day year

8. FATHER  
Full name Joseph Stillwell

14. MOTHER  
Full maiden name Ethel Pearl

9. Residence (Usual place of abode) Hayden  
If nonresident, give place and state

15. Residence (Usual place of abode) Hayden  
If nonresident, give place and state

10. Color or race White 11. Age at last birthday 15 (Years)

16. Color or race White 17. Age at last birthday 30 (Years)

12. Birthplace (city or place) Stroms Co  
(State or country) Texas

18. Birthplace (city or place) Stroms Co  
(State or country) Texas

13. Occupation Carpenter  
Nature of industry

19. Occupation House Wife  
Nature of industry

20. Number of children of this mother (a) Born alive and now living 6  
(Taken as of time of birth of child herein certified and including this child.) (b) Born alive but now dead. 1  
(c) Stillborn 0

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 5 AM 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 evidences of life after birth.

Signature Charles Perkins MD  
Physician or midwife

Address Hayden Arizona

Given name added from a supplemental report \_\_\_\_\_  
Month, day, year.

Filed Jul 16 1926 W J J. Just  
Local Registrar.

Registrar.

Filed \_\_\_\_\_ 19\_\_\_\_  
County Registrar.

123-216-579

... must be made for each, and the number, 4 each. In order of birth stated. ... of more than one child at birth, a BSEFA.