SUPPLEMENT ATTACHED

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 140

County Registrar No.

Local Registrar No. 66

1. County of

District of

Town of

or

City of No. St. Ward

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

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

3. Sex of Child: M

To be answered ONLY in event of plural births. 4. Twin, triplet or other 5. No., in order of birth 1 6. Legitimate?

7. Date of birth Apr 16 – 28 (Month day year)

FATHER

8. Full name: William Quardes

9. Residence (Usual place of abode): Globe

If nonresident, give place and state

10. Color or race: W

11. Age at last birthday 24 (Years)

12. Birthplace (city or place): Ariz

(State or country)

13. Occupation: Truck Driver

Nature of industry

MOTHER

14. Full maiden name: Nellie C Rice

15. Residence (Usual place of abode): Globe

If nonresident, give place and state

16. Color or race: W

17. Age at last birthday 17 (Years)

18. Birthplace (city or place): Ariz

(State or country)

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 1

(b) Born alive but now dead 0

(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 (Born alive or stillborn.) at 1:30 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 evidences of life after birth.

Signature R D Hennedy (Physician or midwife)

Address Globe

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

Filed 5/10, 1928 S. E. Wightman M.D. Local Registrar.

Registrar.

Filed 19 County Registrar.

382-416-595