

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS STANDARD CERTIFICATE OF BIRTH

State File No. 107-a

Registered No. 50

1. PLACE OF BIRTH

County Gila State Arizona

District or Township _____ or Village _____

City Hayden No. _____ St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Billy Neal Hall } 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 Aug 6 1928
Month Day Year

8. FATHER
Full name Neal A. Hall

14. MOTHER
Full maiden name Jessie May Bouse

9. Residence Hayden
(Usual place of abode)
If non-resident, give place and state.

15. Residence Hayden
(Usual place of abode)
If non-resident, give place and state.

10. Color or race White

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11. Age at last birthday 42 (Years)

17. Age at last birthday 37 (Years)

12. Birthplace Sumerton N.C.
(City or place) (State or country)

18. Birthplace North city Mo
(City or place) (State or country)

13. Occupation Boiler maker
Nature of Industry

19. Occupation House wife
Nature of Industry

20. Number of children of this mother: } (a) Born alive and now living 2
(Taken as of time of birth of child herein } (b) Born alive but now dead 0
certified and including this child.) } (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 _____ at _____ a.m. on the date above stated.
(Born alive ~~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 Charles H. Hunter, M.D.

(Physician or midwife)

Given name added from _____ Address Hayden, Arizona
a supplemental report. Month, day, year

Filed 7/5 1930 Registrar W. D. P. Nash

283-806-125

MARGIN RESERVED FOR BINDING. 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.