

If the child is born at a hospital, a birth certificate must be issued for each, and the number of each in order of birth stated.

ARIZONA STATE BOARD OF HEALTH  
BUREAU OF VITAL STATISTICS  
STANDARD CERTIFICATE OF BIRTH

State File No. 179  
Registered No. 78

1. PLACE OF BIRTH

County Gila State \_\_\_\_\_  
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 Dorothy Louise Bouse { 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 Nov 18 1928  
Month Day Year

8. FATHER  
Full name Floyd Bouse

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

10. Color or race Mexican 11. Age at last birthday 27 (Years)

12. Birthplace (city or place) Webb City  
(State or country) Mo.

13. Occupation Courier man  
Nature of industry Copper smelter

14. MOTHER  
Full maiden name Mary Hering

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

16. Color or race Mexican 17. Age at last birthday 25 (Years)

18. Birthplace (city or place) France  
(State or country) Paris

19. Occupation Housewife  
Nature of industry \_\_\_\_\_

20. Number of children of this mother: (a) Born alive and now living 3  
(b) Born alive but now dead 0  
(c) Stillborn 0  
(Taken as of time of birth of child herein certified and including this child.) 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 3:45 A. 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 Charles B. Husted  
(Physician or midwife)

Given name added from a supplemental report \_\_\_\_\_ Address Hayden Arizona  
Month, day, year \_\_\_\_\_

Registrar \_\_\_\_\_ Filed Nov 21, 1928 4573 Duda Registrar

425-1118-487