

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

State File No. 98 499
Registered No. _____

1. PLACE OF BIRTH

County Yuma State Arizona
District or Township _____ or Village _____
City Marion No. _____ St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Marion Inez Tankersley (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. _____ 6. Legitimate? Yes
5. No., in order of birth _____ 7. Date of birth Dec 1, '28
Month Day Year

8. FATHER
Full name Kimball E. Tankersley

14. MOTHER
Full maiden name Ethel Ella Willingham

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

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

10. Color or race White
11. Age at last birthday 29 (Years)

16. Color or race Wh
17. Age at last birthday 28 (Years)

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

18. Birthplace (city or place) Colman Texas
(State or country)

13. Occupation Truck driver
Nature of industry

19. Occupation N N
Nature of industry

20. Number of children of this mother 5
(Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living 5
(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 at 7 AM 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 E. Dinn
(Physician or midwife)

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

Address Marion Arizona

Filed Dec 10, 1928 C. E. Dinn
Registrar

Registrar

Registrar

438-1201-564