PLACE OF BIRTH SUPPLEMENT ATTACHED

ARIZONA STATE BOARD OF HEALTH

County of Graham

BUREAU OF VITAL STATISTICS

State Index No. 2021

District of

ORIGINAL CERTIFICATE OF BIRTH

Co. Registrar No.

Town of

Local Registrar's No. 322

or

City of Thatcher (No. St. Ward)

FULL NAME OF CHILD Chlarson

If child is not named, make Supplemental Report on blank obtainable from local registrar.

Born Alive: YES / ~~NO~~

Sex of Child	Twin, Triplet or other	and	Number in order of birth	Legitimate?	Date of Birth (Month) (Day) (Yr.)
Girl	/		3	yes	12 – 5 – 28

FATHER		MOTHER	
Full Name	Leroy O Chlarson	Full Maiden Name	Jessie L. Altman
Residence	Thatcher Ariz	Residence	Thatcher Ariz
Color or Race	White	Color or Race	White
Age at last Birthday (Years)	22	Age at last Birthday (Years)	26
Birthplace	Ariz	Birthplace	Tex
Occupation	Laborer	Occupation	Housewife

Number of Child of this mother	Number of children of this mother now living	Were precautions taken against Ophthalmia neonatorum?
3	3	yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child, and that it occurred on 12/5 1928, at 12 M.

*When there is no attending physician or midwife, then the householder should make this return.

(Signature) W. E. Plank

(Attending physician, midwife, householder.*)

Address Thatcher Ariz

Given or Christian name added from a supplemental report 192

Filed Feb 9 1929 J. N. Stratton H.B.S. LOCAL REGISTRAR.

9-35-1205-115 COUNTY REGISTRAR.

A True Copy

Filed 192 COUNTY REGISTRAR.