

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

State File No. _____
Registered No. 200

250 ✓

1. PLACE OF BIRTH

County Graham State Arizona
District or Township Safford or Village Hatcher
City _____ No. _____ St. _____ Ward _____

2. Full name of child Bonnie Anabel Stacy (If birth occurred in a hospital or institution, give its NAME instead of street and number)
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 X 6. Legitimate? Yes 7. Date of birth Aug 9 1929
Month Day Year

8. FATHER
Full name Joseph M. Stacy
9. Residence (Usual place of abode) Hatcher
If non-resident, give place and state.

14. MOTHER
Full maiden name Mabel Nelson
15. Residence (Usual place of abode) Hatcher
If non-resident, give place and state.

10. Color or race White
11. Age at last birthday 36 (Years)

16. Color or race White
17. Age at last birthday 27 (Years)

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

18. Birthplace (city or place) Ohio
(State or country)

13. Occupation
Nature of industry Smelter foreman

19. Occupation
Nature of industry House wife

20. Number of children of this mother 4 (Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living 4
(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 alive (Born alive or stillborn) at 5:30 A. 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 evidence of life after birth.
Signature J. N. Stratton
(Physician or midwife)

Given name added from a supplemental report _____ Address Safford, Arizona

Month, day, year _____ Filed Sept 8 - 19 29 J. N. Stratton Registrar.
Registrar. _____

228-809-455

order of birth stated.