ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 260

Local Registrar's No. 225

1. PLACE OF BIRTH

County Graham State

District or Township or Village

City Pima No. St., Ward

(If birth occurred in a hospital or institution, give its NAME instead of street and number

2. Full name of child May Evelyn Haynie (If child is not yet named, make supplemental report, as directed.

3. Sex of Child Girl | To be answered ONLY in event of plural births. | 4. Twin, triplet or other | 5. No., in order of birth 2 | 6. Legitimate? yes | 7. Date of birth Aug 22 1929 (Month Day Year)

8. FATHER

Full name Clarence J Haynie

9. Residence (Usual place of abode) Pima

If non-resident, give place and state.

10. Color or race White | 11. Age at last birthday 34 (Years)

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

13. Occupation Service Station Grocries Nature of industry

14. MOTHER

Full maiden name Ethyl L McBride

15. Residence (Usual place of abode) Pima

If non-resident, give place and state.

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

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

19. Occupation Housewife Nature of industry

20. Number of children of this mother 2 (Taken as of time of birth of child herein certified and including this child.)

(a) Born alive and now living 2

(b) Born alive but now dead 8

(c) Stillborn

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 11 30 p.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 R L Snyder M D (Physician or midwife).

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

Address Pima Ariz

Registrar

Filed Sept 8, 1929 J N Stratton H.B.J. Registrar

485-822-545

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.