

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

State File No. 800
Registered No. _____

1. PLACE OF BIRTH

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

2. Full name of child Shirley Ann Loy (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 8-31-29 Month Day Year

8. FATHER
Full name Edward A. Loy

14. MOTHER
Full maiden name Priscilla Graves

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

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

10. Color or race Cauc
11. Age at last birthday 32 (Years)

16. Color or race Cauc
17. Age at last birthday 34 (Years)

12. Birthplace (city or place) _____
(State or country) Ariz

18. Birthplace (city or place) _____
(State or country) Nebr

13. Occupation Farmer
Nature of industry Farm

19. Occupation _____
Nature of industry Housewife

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 4
(b) Born alive but now dead 1
(c) Stillborn 0

21. Were precautions taken against ophthalmia neonatorum? YES

I hereby certify that I attended the birth of this child, who was born alive at 3 a.m. on the date above stated
(Born alive or stillborn.)
Signature [Signature]
Physician (Physician or midwife)

* 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.
Given name added from a supplemental report _____ Address Clemenceau, Ariz.
Month, day, year _____
Chas. D. Willard Registrar Filed _____, 19____ Registrar

238-831-772