

2702

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. This certificate must be filed by the attending Physician or Midwife with each local Registrar within 6 days after birth.

**ARIZONA STATE BOARD OF HEALTH**  
BUREAU OF VITAL STATISTICS

**ORIGINAL CERTIFICATE OF BIRTH**

State Index No. 413  
Co. Register No. 7512  
Local Registrar's No. 6613

**PLACE OF BIRTH**  
County of Maricopa  
District of \_\_\_\_\_  
Town of \_\_\_\_\_  
or Phoenix (No. R. F. D. # 1 St; \_\_\_\_\_ Ward)City of \_\_\_\_\_

**FULL NAME OF CHILD** Dorothy Crawford Cranston } Born YES  
 } Alive NO  
If child is not named, make Supplemental Report on blank obtainable from local registrar.

Sex of Child <u>Girl</u>	<u>None</u> or other	and	Number in order of birth <u>11</u>	Legitimate? <u>Yes</u>	Date of Birth <u>October 28</u> , 1919 (Month) (Day) (Yr.)
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<b>FATHER</b> Full Name <u>F. R. Cranston.</u> Residence <u>R. F. D. #1</u> Color or Race <u>American</u> Age at last Birthday <u>49</u> (Years) Birthplace <u>Hot Spring, Arkansas.</u> Occupation <u>Rancher</u>	<b>MOTHER</b> Full Maiden Name <u>Nancy Berry</u> Residence <u>R. F. D. #1</u> Color or Race <u>American</u> Age at last Birthday <u>39</u> (Years) Birthplace <u>Birmingham, Alabama.</u> Occupation <u>Housewife.</u>
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Number of child of this mother... 11 Number of children, of this mother, now living... 8 Were precautions taken against Ophthalmia neonatorum? Yes

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***

I hereby certify that I attended the birth of above child; and that it occurred on Oct. 28, 1919, at 5 A. M.

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

(Signature) John W. Thomas  
Attending physician, midwife, householder.

Address 306 Goodrich Bldg.

Given or christian name added from a supplemental report \_\_\_\_\_ 1919

Filed 11-25 1919 Dr. H. W. Cranchamp LOCAL REGISTRAR  
A True Copy J. P. Hanson COUNTY REGISTRAR

435-1028-528  
COUNTY REGISTRAR.