

File No.—For State Registrar Only
63165

County of Maricopa

Township of St. Lawrence

or
In Town of

THE TOWN OF
or

City of

Registration District No. 111

Registered No.

(For use of Local Registrar)

St.; Ward)

2) Full Name of Child... William Strat

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL?

(4) Twin
or Triplet?

(5) Number in
order of birth

(6) Are Parents Married?

(7) DATE OF

BIRTH June 22, 1916
(Name of Month) (Day) (Year)

FATHER.

(8) FULL
NAME

San Mateo

(9) PRESENT
POSTOFFICE
OF FATHER

10) COLOR
OR
RACE

(II) AGE AT LAST BIRTHDAY —

(12) BIRTHPLACE

(13) OCCUPATION

(26) Number of children born to mother, including present birth

MOTHER.

(14) NAME BEFORE MARRIAGE

Susana Lamin

(15) PRESENT
POSTOFFICE
OF MOTHER

(16) COLOR
OR
RACE

(17) AGE AT LAST BIRTHDAY -

(18) BIRTHPLACE

(19) OCCUPATION

(21) Number of children of this mother
now living, including present birth

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was born at St. Louis, Mo. on the date above stated.

(23) (Signature)

(2-1) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) W(t₁) = 84

(Signature of Witness necessary only
when question 23 is signed by mark)

27) Filed

1258

Local Registrar

When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.