

2702

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

County of Navajo

BUREAU OF VITAL STATISTICS

State Index No. 361

District of _____

ORIGINAL CERTIFICATE OF BIRTH

Co. Registrar No. 48

Town of Taylor

Local Registrar's No. 3

City of _____ (No. _____) St. _____ Ward _____

Full Name of Child Ester Duncan { Born YES }
If child is not named, make Supplemental Report on blank obtainable from local registrar. { Alive }

Sex of Child <u>Female</u>	Twin, Triplet or other <input type="checkbox"/>	and	Number in order of birth <u>1</u>	Legitimate? <u>yes</u>	Date of Birth <u>2/22/1922</u> (Month) (Day) (Yr.)
FATHER Name <u>Lyman L. Duncan</u> Residence <u>Taylor</u>			MOTHER Name <u>Sadie A. Perkins</u> Residence <u>Taylor Ariz Navajo Co</u>		
Color or Race <u>American</u>	Age at last Birthday <u>44</u> (Years)	Color or Race <u>American</u>	Age at last Birthday <u>30</u> (Years)		
Birthplace <u>Memphis Tenn.</u>	Occupation <u>farmer.</u>	Birthplace <u>Taylor Ariz.</u>	Occupation <u>Home Maker</u>		
Number of Child of this mother <u>3</u>	Number of children of this mother now living <u>3</u>	Were precautions taken against Ophthalmia neonatorum? <u>yes</u>			

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child, and that it occurred on Feb. 22 1922, at U.S.M.

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

(Signature) Anna Nelson
(Attending physician, midwife, householder.)*

Given or Christian name added from a _____ Address Taylor Navajo Co
Supplemental report _____ 192 _____ Filed July 28 1922 E. M. Kartchner
LOCAL REGISTRAR.

545-222-272 A True Copy
COUNTY REGISTRAR. Filed July 5 1922 Geo. M. Mumpson
COUNTY REGISTRAR.