

DEPARTMENT OF SOCIAL SERVICES DIVISION OF HEALTH VITAL STATISTICS



LOCAL FILE NUMBER				BIRTH NUMBER				
CHILD- NAME FIRST		MIDDLE	LAST	DATE	DATE OF BIRTH (MONTH, DAY, YEAR)		HOUR	
T.	NORMA	LENORA	HASTINGS	20.	Januar	y 16, 1913	26 5:10P M	
THIS BIRTH—SINGLE, TWIN, TRIPLET, ETC. Secret Female Single			IF NOT SINGLE BIRTH—BORN FIRST, SECOND, THIRD, ETC. (SPECIFY) 46.		ST, SECOND,	COUNTY OF BIRTH		
city, town, or locat 5b. Ogden	ION OF BIRTH	INSIDE CITY LIMI ISPECIFY YES OR N Sc. Yes	TS HOSPITAL -NAME		Ogden	OSPITAL, GIVE STREET AND NUMBER I		
MOTHER-MAIDEN NAM	Pearl	MIDDLE	Allen		(AT TIME OF 32	STATE OF BIRTH UE NOT IN U	S.A., NAME COUNTRY)	
RESIDENCE—STATE 70. Utah	COUNTY 76 Weber	CITY, TOWN,		INSID ISPECI	E CITY LIMITS	STREET AND NUMBER		
FATHER—NAME	James	MIDDLE	Hastings	AGE THIS E	(AT TIME OF BIRTH)	STATE OF BIRTH HE NOT IN U	S.A., NAME COUNTRY!	
neormant %. Mother			YEARS			RELATION TO CHILD 9b. Mother		
1. CERTIFY THAT THE ABOVE NAMED CHILD WAS BORN ALIVE AT THE PLACE AND TIME AND ON THE DATE STATED ABOVE. 100. SIGNATURE R. A. MCCUNE				DATE SIGNED (MONTH DAY, YEAR) ATTENDANT M.O., D.O., MIDWIFE, OTHER 106 Jan. 20, 1913 10c M.D.				
CERTIFIER - NAME	R. A. McCun		MAII 10e	Ogden,		STREET OR R.F.D. NO., CITY OR TOW	N, STATE, ZIPJ	
REGISTRAR—SIGNATURE	Walter E. W	halen				DATE RECEIVED BY LOCAL MONTH DAY Janua	registrar ry 20,1913	

This is to certify that this is a true copy of the certificate on file in this office. This certified copy is issued under authority of Section 26-15-26 of the Utah Code Annotated, 1953 as Amended.

Date Issued: August 27, 1979

COUNTY: Webe

REGISTRAR: Larbara Echeroly

John E Brockert

DIRECTOR OF VITAL STATISTICS

BY:

