

DEPARTMENT OF COMMERCE  
BUREAU OF THE CENSUS

Case reported to the Bureau of the Census  
**STANDARD CERTIFICATE OF LIVE BIRTH**

DO NOT WRITE  
**31 5108**  
IN THIS SPACE

STATE BOARD OF HEALTH 1173-1

Registrar's No. 616

Division of Vital Statistics, State of Kansas

<b>1. PLACE OF BIRTH:</b> (a) County <u>Geary</u> (b) City or township <u>Fort Riley</u> <small>(If outside city or town limits write RURAL)</small> (c) Name of hospital or institution: <u>Station Hospital</u> <small>(If not in hospital or institution give street number or location)</small> (d) Mother's stay before delivery: In hospital or institution <u>5 hrs</u> In this community <u>16 yrs</u> <small>(Specify whether years, months, or days)</small>		<b>2. USUAL RESIDENCE OF MOTHER:</b> (a) State <u>Kansas</u> <u>31</u> (b) County <u>Geary</u> (c) City or town <u>Fort Riley</u> <small>(If outside city or town limits write RURAL)</small> (d) Street No. <u>384-B Riley Place</u> <small>(If rural give location)</small>	
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<b>3. Full name of child</b> <u>Phyllis Edna Fletcher</u>		<b>4. Date of birth</b> <u>October 6, 1943</u> <small>(Month) (Day) (Year)</small>	
<b>5. Sex:</b> <u>Female</u>	<b>6. Twin or triplet</b> <u>-</u> If so—born 1st, 2d, or 3d <u>-</u>	<b>7. Number months of pregnancy</b> <u>9</u>	<b>8. Is mother married?</b> <u>Yes</u>

**FATHER OF CHILD**

9. Full name Arthur Allen Fletcher

10. Color or race Colored 11. Age at time of this birth 18 yrs.

12. Birthplace Phoenix Arizona  
(City, town, or county) (State or foreign country)

13. Usual occupation Pvt. 521 CM Trk Regt. (a)

14. Industry or business (37534964) US Army

21. Children born to this mother:

(a) How many other children of this mother are now living? 0

(b) How many other children of this mother have since been born and are now dead? 0

(c) How many children of this mother were born dead? 0

**MOTHER OF CHILD**

15. Full maiden name Mary Leila Harden

16. Color or race Colored 17. Age at time of this birth 17 yrs.

18. Birthplace Washington D. C.  
(City, town, or county) (State or foreign country)

19. Usual occupation Housewife

20. Industry or business Own home

22. Mother's mailing address for registration notice:  
Mrs. Arthur A. Fletcher  
Box 9247  
Fort Riley, Kansas

23. I hereby certify that I attended the birth of this child who was born alive at the hour of 6:47<sup>am</sup> on the date above stated and that the information given was furnished by Mary Fletcher

**DECEASED**