

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

County of GreenleeBUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTHState Index No. 231

District of _____

County Registrar No. _____

Town of CliftonLocal Registrar No. 61

or _____

City of _____

No. _____ St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)1. Full name of child Damaris Marie Brown { If child is not yet named, make supplemental report, as directed.2. Sex of Child Female To be answered ONLY in event of plural births. } 4. Twin, triplet or other _____ 6. Legitimate? yes 7. Date of birth Aug 2-1927
Month Day YearFATHER
8. Full name Henry C. Brown
9. Residence (Usual place of abode) York Ariz
If non-resident, give place and state. Ariz
10. Color or race w
11. Age at last birthday 35 (Years)MOTHER
14. Full maiden name Ada Marie Weaver
15. Residence (Usual place of abode) York Ariz
If non-resident, give place and state. Ariz
16. Color or race w
17. Age at last birthday 17 (Years)2. Birthplace (city or place) _____
(State or country) Ark.18. Birthplace (city or place) Bonne Texas
(State or country)3. Occupation Stockman
Nature of industry _____19. Occupation H. W.
Nature of industry at home0. Number of children of this mother } (a) Born alive and now living 1
Taken as of time of birth of child herein } (b) Born alive but now dead 0
certified and including this child. } (c) Stillborn 0 21. Were precautions taken against ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was born alive at 3:20 m. on the date above stated
(Born alive or stillborn.)* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.
Signature C. H. Raughnman
Address Clifton, Ariz
(Physician or midwife.)Given name added from supplemental report _____
Month, day, year _____ Filed 9-4, 1927 Mark Dambauer
Local Registrar.

Registrar _____ Filed _____, 19____ County Registrar.

425-802-169