

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 1234
 Registered No. 160

1. PLACE OF BIRTH

County Dla State Arizona
 District or Township _____ or Village _____
 City Miami No. _____ St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Mary Ann Tutich
(If child is not yet named, make supplemental report, as directed.)

3. Sex of Child female To be answered ONLY in event of plural births. 4. Twin, triplet or other _____ 6. Legitimate? _____
 5. No., in order of birth _____ 7. Date of birth 5 11 32
Month Day Year

8. FATHER
 Full name John Tutich
 9. Residence (Usual place of abode) Miami
 If non-resident, give place and state.

14. MOTHER
 Full maiden name Annie Beach
 15. Residence (Usual place of abode) Miami
 If non-resident, give place and state.

10. Color or race White
 11. Age at last birthday 27 (Years)

16. Color or race White
 17. Age at last birthday 31 (Years)

12. Birthplace (city or place) S Dakota
(State or country)

18. Birthplace (city or place) Globe Arizona
(State or country)

13. Occupation Reclamsent
 Nature of industry

19. Occupation HW
 Nature of industry

20. Number of children of this mother 2
(Taken as of time of birth of child herein certified and including this child.)
 (a) Born alive and now living 2
 (b) Born alive but now dead _____
 (c) Stillborn _____

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 Alive at 11:35 a.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. E. Brown
(Physician or midwife)

Given name added from a supplemental report _____ Address Miami
 Month, day, year _____
 Filed July 23 1932 C. E. Brown
 Registrar Registrar

438-511-128

N. 2. - In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.