9399

PLACE OF BIRTH

County of Gila

District of Globe

Town of Miami

or

City of

ARIZONA TERRITORIAL BOARD OF HEALTH

BUREAU OF VITAL STATISTICS.

ORIGINAL CERTIFICATE OF BIRTH.

Ter. Index No. 86

Co. Register No. 41

Local Registrar's No. 96

(No. ..... St; ..... Ward)

FULL NAME OF CHILD Angius Davies

{Born} YES
{Alive} NO

If child is not named, make Supplemental Report on blank obtainable from local registrar.

Sex of Child	Twin, Triplet or other plural	and Number; in order of birth	Legitimate?	Date of Birth
M		2	yes	Mar 13 1912 (Month) (Day) (Yr.)

FATHER		MOTHER	
Full Name	E M Davies	Full Maiden Name	Carlos Cornelius
Residence	Miami	Residence	Miami
Color or Race	White	Color or Race	White
Age at last Birthday (Years)	28	Age at last Birthday (Years)	20
Birthplace	N. M	Birthplace	Ariz
Occupation	Concentrator Man	Occupation	Housewife

Number of child of this mother 2 | Number of children, of this mother, now living 2 | Were Precautions taken against Ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of above child; and that it occurred on Mar 13 1912, *at* 1 P.M.

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

(Signature) R D Kennedy
(Attending physician, midwife, householder.*)

[illegible] christian name added from a supplemental report ..... 191.....

Address Globe

Filed Mar 15 1912 — B G Fox, LOCAL REGISTRAR.

542-313-332 COUNTY REGISTRAR. — Filed Apr 1 1912 — B G Fox, COUNTY REGISTRAR.

Order of birth, stated. This certificate must be filed by the attending Physician or Midwife with the Local Registrar within 5 days after birth.