

1925

PLACE OF BIRTH

County of Gila
District of _____
Town of Winkelman
or _____
City of _____

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS.

ORIGINAL CERTIFICATE OF BIRTH.

State Index No. 98

Co. Registrar No. 100

Local Registrar's No. _____

FULL NAME OF CHILD Madalena Baire (No. _____ St. _____ Ward _____)
Born } YES
Alive } ~~NO~~

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

Sex of Child female { Twin, Triplet or other } and { Number in order of birth } Legitimate? yes Date of Birth May 6 1923
(Month) (Day) (yr.)

FATHER
Full Name Battista Baire
Residence Winkelman

MOTHER
Full Maiden Name Mary Bertoglio
Residence Winkelman

Color or Race Italian Age at last Birthday 35 (Years)
Birthplace Italy

Color or Race Italian Age at last Birthday 20 (Years)
Birthplace Italy

Occupation Saloon keeper

Occupation wife

Number of child of this mother 1 Number of children, of this mother, now living 1 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 May 6 1923, at 4 PM.

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

(Signature) L. L. McChase, M.D.
(Attending physician, midwife, householder.)

Given or christian name added from a supplemental report Madalena Baire 1913

Address Winkelman

Filed May 20 1923

B. G. J. ...
LOCAL REGISTRAR.

425-506-426
COUNTY REGISTRAR.

Filed 6/5 1923

A True Copy
B. G. J. ...
COUNTY REGISTRAR.