

1211

PLACE OF BIRTH

County of _____
District of _____
Town of _____
or
City of _____

ARIZONA STATE BOARD OF HEALTH ¹³⁷

BUREAU OF VITAL STATISTICS.
ORIGINAL CERTIFICATE OF BIRTH. State Index No. 130
Co. Register No. 117
Local Registrar's No. 117

FULL NAME OF CHILD M. M. M. (No. _____ St: _____ Ward) } Born } YES
Alive }

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 1 Legiti- mate? ye Date of Birth Sept 26 1931
(Month) (Day) (yr.)

FATHER
Full Name William James Preston
Residence Pima
Color or Race W Age at last Birthday 28 (Years)
Birthplace Arizona
Occupation Farmer

MOTHER
Full Maiden Name Phyllis Walter
Residence Pima
Color or Race W Age at last Birthday 20 (Years)
Birthplace Yupico
Occupation House Wife

Number of child of this mother 1 Number of children, of this mother, now living 1 Were precautions taken against Ophthalmia neonatorum? ye

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of above child; and that it occurred on 9/26 1931 at 9 PM
(Signature) [Signature]
(Attending physician, midwife, householder)

Given or christian name added from a supplemental report _____ 191__
Address Safford Arizona

Filed Oct 4 1913 Mrs. W. D. French LOCAL REGISTRAR
Filed Oct 9 1913 A True Copy COUNTY REGISTRAR

475-926-77
COUNTY REGISTRAR