

4937

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

County of Gila

BUREAU OF VITAL STATISTICS

146

State Index No. 923

District of \_\_\_\_\_

ORIGINAL CERTIFICATE OF BIRTH

Co. Register No. 556

Town of Miami

Local Registrar's No. \_\_\_\_\_

or  
City of \_\_\_\_\_

(No. \_\_\_\_\_ St; \_\_\_\_\_ Ward)

FULL NAME OF CHILD Madeline Delaney } 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 no and Number in order of birth 1 Legitimate yes Date of Birth Dec. 12 1915  
(Month) (Day) (Yr.)

FATHER  
Full Name Martin J. Delaney  
Residence Miami Ariz.  
Color or Race white Age at last Birthday 25 (Years)  
Birthplace Ireland  
Occupation Mixer

MOTHER  
Full Maiden Name Mable Priestley  
Residence Miami Ariz.  
Color or Race white Age at last Birthday 22 (Years)  
Birthplace England  
Occupation House wife

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 Dec. 12 1915, at 44 M.  
{ \*When there is no attending physician or midwife, then the householder should make this return. }  
(Signature) B. M. Hardy  
(Attending physician, midwife, householder. \*)

Given or christian name added from a supplemental report \_\_\_\_\_ 191\_\_\_\_\_ Address Miami Ariz.

Filed Dec 20 1915 LOCAL REGISTRAR  
A True Copy  
Filed Jan 7 1916 COUNTY REGISTRAR  
448-1212-478 COUNTY REGISTRAR.