2037

Midwife with each local Registrar within 5 days after birth.

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 129

Co. Register No. 374

Local Registrar's No. 1

PLACE OF BIRTH

County of Gila

District of Winkelman

Town of Hayden

or

City of ..... (No. ..... St; ..... Ward)

FULL NAME OF CHILD Elizabeth Davis

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

Born / Alive: YES / NO

Sex of Child	Twin, Triplet or other	and	Number in order of birth	Legitimate?	Date of Birth (Month) (Day) (Yr.)
31	\		\	Yes	Oct 28 1916

FATHER		MOTHER	
Full Name	John W. Davis	Full Maiden Name	Edna Irwin
Residence	Hayden	Residence	Hayden
Color or Race	Wh.	Color or Race	Wh.
Age at last Birthday (Years)	28	Age at last Birthday (Years)	21
Birthplace	Penn.	Birthplace	Wash.
Occupation	Draftsman	Occupation	Housewife

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 Oct 28 1916, at 4 P. M.

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

(Signature) Charles H. Irwin

(Attending physician, midwife, householder.*)

Given or christian name added from a supplemental report ..... 191....

Address Hayden

Filed Oct 30 1916

H. J. Roberts

LOCAL REGISTRAR.

542-1028-595

COUNTY REGISTRAR.

Filed Jan 6 1917

A True Copy

B. G. Gay M.D.

COUNTY REGISTRAR.