2293

610

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

County of Gila

BUREAU OF VITAL STATISTICS 144 State Index No. [redacted]

District of Winkelman

ORIGINAL CERTIFICATE OF BIRTH

Co. Register No. 101

Town of Hayden

or

City of

Local Registrar's No. /

(No. St; Ward)

FULL NAME OF CHILD Marie Welker

Born Alive YES ~~NO~~

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

Sex of Child	Twin, Triplet or other	and	Number in order of birth	Legitimate?	Date of Birth (Month) (Day) (Yr.)
F	✓		✓	YES	Feb 28th 1917

FATHER		MOTHER	
Full Name	Wesley Welker	Full Maiden Name	Annie Goodson
Residence	Hayden	Residence	Hayden
Color or Race	W	Color or Race	W
Age at last Birthday	20 (Years)	Age at last Birthday	17 (Years)
Birthplace	Ariz	Birthplace	Miss
Occupation	Lab.	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 Feb 28th 1917, at 1:30 A.M.

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

(Signature) Charles H. Towers

(Attending physician, ~~midwife, householder.~~*)

Given or christian name added from a supplemental report 191

Address Hayden

Filed Feb 28 1917

H. D. Roberts

LOCAL REGISTRAR.

469-228-175

COUNTY REGISTRAR.

Filed Mar 16 1917

A True Copy

R. G. Fox

COUNTY REGISTRAR.

Midwife . each local Registrar within 5 days after birth.