4579

PLACE OF BIRTH

County of Gila

District of

Town of Miami

or

City of

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

130

State Index No. 170

ORIGINAL CERTIFICATE OF BIRTH

Co. Register No. 218

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD Paul Joseph Payne

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.)
Male	1		1	Yes	May 2 1917

FATHER		MOTHER	
Full Name	Patrick J. Payne	Full Maiden Name	Elisabeth Bickett
Residence	Miami	Residence	Miami
Color or Race	White	Age at last Birthday (Years)	28
Birthplace	Ky	Birthplace	Ky
Occupation	Clerk	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 the above child; and that it occurred on May 2 1917, at 5:15 a M.

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

(Signature) Charles E. Irvin M.D.
(Attending physician, ~~midwife, householder.~~)

Given or Christian name added from a supplemental report 191

Address

Filed May 10 1917

John H. Lacy
LOCAL REGISTRAR.

775-502-523
COUNTY REGISTRAR.

Filed June 5 1917

A True Copy

B. G. Foot
COUNTY REGISTRAR.