2313

**PLACE OF BIRTH**

County of Gila

District of Miscellaneous Hayden

Town of Hayden

or

City of

# ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS 148 State Index No. 570

## ORIGINAL CERTIFICATE OF BIRTH

Co. Register No. 509

Local Registrar's No. 1

(No. St; Ward)

FULL NAME OF CHILD Mack Alvin Comer

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 |
|---|---|---|---|---|---|
| M | ✓ | | | Yes | Oct (Month) 27th (Day) 1917 (Yr.) |

| FATHER | | MOTHER | |
|---|---|---|---|
| Full Name | Robt Allen Comer | Full Maiden Name | Allie Street |
| Residence | Hayden | Residence | Hayden |
| Color or Race | Wh. | Color or Race | Wh. |
| Age at last Birthday | 27 (Years) | Age at last Birthday | 25 (Years) |
| Birthplace | Texas | Birthplace | Texas. |
| Occupation | Pipe Fitter | 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 27 1917, at 4 A.M.

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

(Signature) Charles H. Lowan

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

Given or christian name added from a supplemental report 191

Address Hayden

Filed Jan 30 1917

H. J. Roberts

LOCAL REGISTRAR.

439-1027-123

COUNTY REGISTRAR.

Filed Dec 25 1917

A True Copy

B. G. Fox

COUNTY REGISTRAR.