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# ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 880

Co. Register No. 94

Local Registrar's No. 51

**PLACE OF BIRTH**

County of Navajo

District of

Town of Taylor

or

City of

(No. St; Ward)

FULL NAME OF CHILD Marion H Gibbons

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 |
|---|---|---|---|---|---|
| male | | | | | April (Month) 10 (Day) 1918 (Yr.) |

| FATHER | | MOTHER | |
|---|---|---|---|
| Full Name | M. V. Gibbons | Full Maiden Name | Mary Hatch |
| Residence | Taylor | Residence | Taylor |
| Color or Race | White | Color or Race | White |
| Age at last Birthday | 29 (Years) | Age at last Birthday | 24 (Years) |
| Birthplace | St. Johns | Birthplace | Taylor |
| Occupation | School Teacher | Occupation | Home maker |

Number of child of this mother 2 | Number of children, of this mother, now living 2 | Were precautions taken against Ophthalmia neonatorum?

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of above child; and that it occurred on Apr 10 1918, at M.

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

(Signature) Annie Nelson.
(Attending physician, midwife, householder.*)

Address Taylor

Given or christian name added from a supplemental report 191

Filed 191

E. G. Hatch
LOCAL REGISTRAR.

472-410-488
COUNTY REGISTRAR.

A True Copy

Filed 191

J. W. Bazell
COUNTY REGISTRAR.
B.M.