2285

CERTIFICATE AMENDED, SEE NOTATION

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

State Index No. 155

ORIGINAL CERTIFICATE OF BIRTH

County of Gila

District of

Town of Claypool
or
City of

Co. Register No. 95

Local Registrar's No.

(No. Child's 1st name, mother's maiden name amended, per Aff of Reg + mother (8-30-73 el) St; Ward)

FULL NAME OF CHILD ~~Aunie~~ Aynie Lee Brown

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
Female			1	yes	Feby 22 1919 (Month) (Day) (Yr.)

FATHER		MOTHER	
Full Name	Wm Brown	Full Maiden Name	Etta ~~Breakfield~~ Brakefield
Residence	Claypool	Residence	Claypool
Color or Race	White	Color or Race	White
Age at last Birthday	23 (Years)	Age at last Birthday	20 (Years)
Birthplace	~~M~~ Ill	Birthplace	N. M.
Occupation	Miner	Occupation	Housewife

Number of child of this mother 1 | Number of Children, of this mother, now living | 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 2/22, 1919, at 3 P M.

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

(Signature) Geo A Paige
(Attending physician, ~~midwife, householder.*~~)

Address Inspiration

Given or Christian name added from a supplemental report 191

Filed March 1 1919. W D Brayton
LOCAL REGISTRAR.

125-222-524
COUNTY REGISTRAR.

Filed Apr 5 1919. A True Copy B G Fox
COUNTY REGISTRAR.