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PLACE OF BIRTH

County of Dala
District of _____
Town of Miami
or
City of _____

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 64
Co. Register No. 31
Local Registrar's No. _____

FULL NAME OF CHILD Ida May Woon { Born } YES
If child is not named, make Supplemental Report on blank obtainable from local registrar. { Alive }

Sex of Child M { Twin, Triplet or other } 1 { and } { Number in order of birth } 1 { Legitimate? } Y Date of Birth Feb 21 1919
(Month) (Day) (Yr.)

FATHER
Full Name Harry Woon
Residence Miami
Color or Race English Age at last Birthday 37 (Years)
Birthplace England
Occupation Miner

MOTHER
Full Maiden Name Margaret Alford
Residence Miami
Color or Race White Age at last Birthday 38 (Years)
Birthplace England
Occupation Housewife

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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of above child; and that it occurred on Feb 21 1919 at 5 A.M.
*When there is no attending physician or midwife, then the householder should make this return. (Signature) Charles E. Jones
(Attending physician, midwife, householder,*)

Given or christian name added from a supplemental report... 191...
964-321-414 COUNTY REGISTRAR.
Address Miami
W.D. Brayton LOCAL REGISTRAR.
Filed Feb 23 1919 A True Copy B.S. J.W. COUNTY REGISTRAR.
Filed Apr 5 1919