2412

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 106

Co. Registrar's No. 421

Local Registrar's No. .....

PLACE OF BIRTH

County of Gila

District of .....

Town of Miami

or

City of ..... (No. ..... St. ..... Ward)

FULL NAME OF CHILD Jesse Edward Wixom | 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 (Month / Day / Yr.)
M	1		1	Y	June 4 1919

FATHER		MOTHER	
Full Name	Jesse Edward Wixom	Full Maiden Name	Anna Lucille Pogodil
Residence	Miami	Residence	Miami
Color or Race	White	Color or Race	White
Age at last Birthday	18 Years	Age at last Birthday	16 Years
Birthplace	Texas	Birthplace	Texas
Occupation	Miner	Occupation	Housewife

Number of child of this Mother 1 | Number of Children, of this mother, now living 0 | Were precautions taken against Ophthalmia neonatorum? No

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child; and that it occurred on June 4 1919, at 7 P.M.

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

Signature Charles E. Irwin

Attending physician, midwife, ~~householder~~.*

Address Miami, Arizona

Given or Christian name added from a supplemental report ..... 191..

Filed July 6 1919

N.D. Brayton

LOCAL REGISTRAR.

164-604-533

COUNTY REGISTRAR.

Filed SEP 1919

A True Copy

B. G. Fox

COUNTY REGISTRAR.

or midwife with each local Registrar within 5 days after birth.