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R. A. WATKINS PRINTING CO., PHOENIX

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 161

Co. Register No. 509

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 Alice Elizabeth Payne

Born Alive: ~~NO~~ YES

If child is not named, make Supplemental Report on blank obtainable from local registrar.

Sex of Child: F | Twin, Triplet or other: 1 | and | Number in order of birth: 1 | Legitimate? Y | Date of Birth: Sept 24 1919 (Month) (Day) (Yr.)

FATHER		MOTHER	
Full Name	Patrick Joseph Payne	Full Maiden Name	Elizabeth Pickett
Residence	Miami	Residence	Miami
Color or Race	White	Color or Race	WL
Age at last Birthday	29 (Years)	Age at last Birthday	24 (Years)
Birthplace	Ky	Birthplace	Ky
Occupation	Machinist	Occupation	H

Number of child of this mother: 2 | Number of Children, of this mother, now living: 2 | 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 Sept 24 1919, at 2 P M.

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

(Signature) Charles E Jones M.D.
(Attending physician, midwife, householder.*)

Address

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

Filed Sept 30 1919

W D Brayton
LOCAL REGISTRAR.

175-924-573
COUNTY REGISTRAR.

A True Copy
Filed Oct 6 1919

B Y Jof
COUNTY REGISTRAR.