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. 628

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 Mary Alice Quail

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

Born Alive ~~NO~~ YES

Sex of child	Twin, Triplet or other	and	Number in order of birth	Legitimate?	Date of Birth (Month) (Day) (Yr.)
female	Un		Un	No	Nov 11 1919

FATHER		MOTHER	
Full name	Ben Adams	Full Maiden Name	Rachel Quail
Residence	unknown	Residence	Miami Ariz
Color or Race	white	Color or Race	white
Age at last Birthday (Years)	21	Age at last Birthday (Years)	14
Birthplace	Wis	Birthplace	Kan
Occupation	Soldier	Occupation	None

Number of child this mother 1 | Number of Children, of this mother, now living 1 | 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 Nov 11 1919, at 12.30 P. M.

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

(Signature) B. W. Hard M. D.

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

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

Address Miami Ariz

Filed Nov 19 1919

N. D. Brayton

LOCAL REGISTRAR.

483-1111-983

COUNTY REGISTRAR.

A True Copy

Filed 11/30 1919

B. G. Fox

COUNTY REGISTRAR.