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ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

PLACE OF BIRTH
 County of Pima State Index No. 170
 District of _____ Co. Register No. 35
 Town of Miami Local Registrar's No. _____
 or _____
 City of _____ (No. 103 Coffee Canyon St.; _____ Ward)

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

Sex of Child	Female	Twin, Triplet or other	}	and	}	Number in order of birth	Legitimate? <u>yes</u>	Date of Birth	Nov. 16, 1919	
								(Month)	(Day)	(Yr.)

FATHER				MOTHER			
Full Name	<u>James Martin McHugh</u>			Full Maiden Name	<u>Tessie Patterson</u>		
Residence	<u>Miami, Ariz.</u>			Residence	<u>Miami, Ariz.</u>		
Color or Race	<u>White</u>	Age at last Birthday	<u>35</u>	Color or Race	<u>White</u>	Age at last Birthday	<u>21</u>
		(Years)				(Years)	
Birthplace	<u>Wada</u>			Birthplace	<u>Michigan</u>		
Occupation	<u>Civil engineer</u>			Occupation	<u>Housewife</u>		

Number of child of 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* 10:45

I hereby certify that attended the birth of the above child; and that it occurred on Nov. 16, 1919, at A. M.

*When there is an attending physician or midwife, the householder should make this return.

Given or Christian name added from a Supplemental report _____ 191____

(Signature) J. J. Miller M.D.
 (Attending physician, midwife, householder.*)
 Address Miami, Ariz. Box 100
N.W. Brantley
 LOCAL REGISTRAR.

448-1116-375 Filed Nov 22 1919 A True Copy
11/24 1919 Filed _____
 COUNTY REGISTRAR. COUNTY REGISTRAR.