PLACE OF BIRTH

County of Gila

District of

Town of Miami

or

City of

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 129

Co. Register No. 18

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD Maud Ester Stone

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

Born Alive: YES ~~NO~~

Sex of Child F | Twin, Triplet or other and Number in order of birth 1st | Legitimate? Yes | Date of Birth Jan 2 1920 (Month) (Day) (Yr.)

FATHER

Full Name William F. Stone

Residence Inspiration

Color or Race White | Age at last Birthday 47 (Years)

Birthplace Ark

Occupation Crusher Man

MOTHER

Full Maiden Name Alpha Taylor

Residence Inspiration

Color or Race White | Age at last Birthday 35 (Years)

Birthplace Kansas

Occupation Housewife

Number of child of this mother 1st | Number of Children, of this mother, now living One | 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 Jan 2 1920, at 10 A.M.

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

(Signature) Geo. A. Paige

(Attending physician, midwife, householder.*)

Address Inspiration

Given or Christian name added from a supplemental report 191

Filed Jan 5 1920 N. D. Brayton

LOCAL REGISTRAR.

425-102-139

COUNTY REGISTRAR.

A True Copy

Filed Jan 26 1920. R. G. Dion

COUNTY REGISTRAR.