4189

PLACE OF BIRTH

County of Gila

District of Miami

Town of Miami
or

City of

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

State Index No. 1820

Co. Register No. 189

Local Registrar's No.

ORIGINAL CERTIFICATE OF BIRTH

(No. Miami-Inspiration Hospital; Ward)

FULL NAME OF CHILD

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

Born Alive: Yes ~~No~~

Sex of Child	Twin, Triplet or other	and	Number in order of birth	Legitimate?	Date of Birth (Month) (Day) (Yr.)
Male			1st.	Yes	3/20/21 192

FATHER		MOTHER	
Full Name	Martin Wright.	Full Maiden Name	Hannah Anderson
Residence	Inspiration	Residence	Inspiration
Color or Race	Cau.	Color or Race	Cau.
Age at last Birthday	35 (Years)	Age at last Birthday	23 (Years)
Birthplace	Texas.	Birthplace	New Mexico
Occupation	Guard	Occupation	Housewife.

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*

I hereby certify that I attended the birth of the above child; and that it occurred on 3/20/21 192, at 12.55AM M.

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

(Signature) Jno. A. Paige
(Attending physician, ~~midwife, householder.*~~)

Address Miami, Arizona.

Given or Christian name added from a supplemental report 192

Filed Mar 25 1921 B. F. Hardy M.D.
LOCAL REGISTRAR.

A True Copy

Filed Apr 6 1921 B. G. Jones
COUNTY REGISTRAR.

COUNTY REGISTRAR.

063-320-815