196

PLACE OF BIRTH

County of Gila

District of

Town of Miami
or

City of

# ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

State Index No. 145

Co. Register No. 600

Local Registrar's No.

## ORIGINAL CERTIFICATE OF BIRTH

(No. Miami Inspiration Hospital St; Ward)

FULL NAME OF CHILD Thomas Richard Peach

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 |
|---|---|---|---|---|---|
| Male | | | | Yes | Nov. 21, 1921 (Month) (Day) (Yr.) |

| FATHER | | MOTHER | |
|---|---|---|---|
| Full Name | Thomas Jefferson Peach | Full Maiden Name | Francis Aileen Anthony |
| Residence | Miami, Ariz. | Residence | Miami, Ariz |
| Color or Race | White | Color or Race | White |
| Age at last Birthday | 25 (Years) | Age at last Birthday | 18 (Years) |
| Birthplace | Pine, Ariz | Birthplace | Texas |
| Occupation | Truck driver (automobile) | 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 Nov. 21, 1921, at 6:30 A. M.

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

(Signature) F. F. Miller
(Attending physician, midwife, householder.*)

Address Miami, Ariz.

Given or Christian name added from a supplemental report 192

Filed Nov 29 1921 B. M. Ward LOCAL REGISTRAR.

378-1121-618 COUNTY REGISTRAR.

Filed Dec 5 1921 A True Copy B. G. Fox COUNTY REGISTRAR.

within 5 days after birth.