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N. B.—In case of more than one child at birth, a SEPARATE RETURN must be made for each, and the number of each, in order of birth, stated. This certificate must be filed by the attending Physician or midwife with each local Registrar within 5 days after birth.

**ARIZONA STATE BOARD OF HEALTH**  
BUREAU OF VITAL STATISTICS

**ORIGINAL CERTIFICATE OF BIRTH**

PLACE OF BIRTH  
County of Gila,  
District of Globe,  
Town of \_\_\_\_\_  
or  
City of Globe, (No. \_\_\_\_\_ St. \_\_\_\_\_ Ward)

State Index No. 1082  
Co. Registrar's No. 75  
Local Registrar's No. \_\_\_\_\_

FULL NAME OF CHILD William James Malone, Born  YES  
If child is not named, make Supplemental Report on blank obtainable from local registrar. Alive  NO

Sex of Child <u>Male</u>	Twin, Triplet or other _____	and _____	Number in order of birth _____	Legitimate? <input checked="" type="checkbox"/> Yes	Date of Birth <u>3</u> <u>6</u> <u>1922</u> Month Day Yr.
Full Name <u>FATHER</u> <u>Otto Malone,</u>			Full Maiden Name <u>MOTHER</u> <u>Hattie Lewis,</u>		
Residence <u>Copper Hill,</u>			Residence <u>Copper Hill,</u>		
Color or Race <u>White</u>	Age at last Birthday <u>32</u> Years	Color or Race <u>White</u>		Age at last Birthday <u>23</u> Years	
Birthplace <u>Texas,</u>	Occupation <u>Miner</u>	Birthplace <u>Alabama,</u>		Occupation <u>Housewife,</u>	
Number of child of this Mother <u>3</u>	Number of Children, of this mother, now living <u>3</u>	Were precautions taken against Ophthalmia neonatorum? <u>Yes</u>			

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

I hereby certify that I attended the birth of the above child; and that it occurred on 3/6, 1922, at 6,30 A.M.

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

Signature [Signature]  
Attending physician, midwife, householder.\*

Given or Christian name added from a supplemental report \_\_\_\_\_ 191 \_\_\_\_\_

Address Globe, Ariz.

File 3/9 1922 [Signature] LOCAL REGISTRAR.  
A True Copy  
File 4/5 1922 [Signature] COUNTY REGISTRAR.

645-306-832  
COUNTY REGISTRAR.