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PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

County of Yuma BUREAU OF VITAL STATISTICS State Index No. 92  
District of Maricopa ORIGINAL CERTIFICATE OF BIRTH Co. Register No. 132  
Town of \_\_\_\_\_ Local Registrar's No. \_\_\_\_\_  
or \_\_\_\_\_  
City of \_\_\_\_\_ (No. \_\_\_\_\_ St; \_\_\_\_\_ Ward)

FULL NAME OF CHILD Thomas Theodore O'Bryant } Born } YES  
If child is not named, make Supplemental Report on blank obtainable from local registrar. } Alive } ~~NO~~

Sex of Child M Twin, Triplet or other  and } Number in order of birth  Legiti- mate? Yes Date of Birth Apr. 5 1922  
(Month) (Day) (Yr.)

FATHER  
Full Name Carl O'Bryant  
Residence Inspiration  
Color or Race White Age at last Birthday 24 (Years)  
Birthplace Texas  
Occupation Mechanic

MOTHER  
Full Maiden Name Lillie Bessie Reagan  
Residence Inspiration  
Color or Race White Age at last Birthday 24 (Years)  
Birthplace Texas  
Occupation Housewife

Number of child of this mother... 3 Number of Children, of this mother, now living... 2 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 Apr. 5 1922, at 12<sup>00</sup> A.M.

{ \*When there is no attending physi- cian or midwife, then the householder should make this return. } (Signature) R. L. Loman, M.D.  
(Attending physician, midwife, householder.\*)

Given or Christian name added from a supplemental report \_\_\_\_\_ 191\_\_\_\_ Address Inspiration, Ariz.

Filed Apr 14 1922 B. W. Wadley LOCAL REGISTRAR.

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on midwife with each local Registrar within 5 days after birth.