

971

PLACE OF BIRTH

County of Yuma
District of Shobe
Town of Roosevelt
or
City of _____ (No. _____ St; _____ Ward)

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 109
Co. Register No. 104
Local Registrar's No. _____

FULL NAME OF CHILD Marionette Geneva Martin { Born } Yes
If child is not named, make Supplemental Report on blank obtainable from local Registrar. { Alive } NO

Sex of Child Female { Twin, Triplet or other } and { Number in order of birth 1 Legitimate? Yes Date of Birth April 17 1922
(Month) (Day) (Yr.)

FATHER
Full Name Arthur G. Martin
Residence Roosevelt, Ariz.
Color or Race White Age at last Birthday 28 (Years)
Birthplace Arizona
Occupation _____

MOTHER
Full Maiden Name Anna Melnick
Residence Roosevelt, Ariz.
Color or Race White Age at last Birthday 30 (Years)
Birthplace New Mexico
Occupation housewife

Number of child of this mother 2 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 April 17 1922, at 11:30 AM.

*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 _____ 1922

Address [Address]

COUNTY REGISTRAR.

Filed 4/20 1922
Filed 5/6 1922 A True Copy

[Signature]
LOCAL REGISTRAR.
COUNTY REGISTRAR.

445-117-543

WALSH 5 DAYS AFTER BIRTH.