

977

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

City of Glendale
District of Miami
Town of Miami
County of _____
City of _____ (No. _____ St. _____ Ward)

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 115
Co. Registrar No. 160
Local Registrar's No. _____

Full Name of Child Everett Percy Lyman { Born YES
Alive

| | | | | | | | | | | |
|--------------------------------|------------------------------|--|-----------|---|------------------------------|-----------|----------------------|-----------|---------------|------------------------|
| Sex of Child | <u>M</u> | Twin, Triplet or other | <u>1</u> | and | Number in order of birth | <u>5</u> | Legitimate? | <u>Y</u> | Date of Birth | <u>April 22 - 1922</u> |
| Full Name | FATHER <u>George A Lyman</u> | | | | MOTHER <u>Maybelle Olson</u> | | | | | |
| Residence | <u>Miami</u> | | | | <u>Miami</u> | | | | | |
| Color or Race | <u>Wh</u> | Age at last Birthday | <u>50</u> | (Years) | Color or Race | <u>Wh</u> | Age at last Birthday | <u>30</u> | (Years) | |
| Birthplace | <u>Michigan</u> | | | | <u>Mich</u> | | | | | |
| Occupation | <u>Fireman</u> | | | | <u>H</u> | | | | | |
| Number of Child of this mother | <u>5</u> | Number of children of this mother now living | <u>5</u> | Were precautions taken against Ophthalmia neonatorum? | <u>Y</u> | | | | | |

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child, and that it occurred on April 22, 1922, at 11 P.M.
(Signature) Charles E. Dinn MD
(Attending physician, midwife, householder.*)

Given or Christian name added from a supplemental report _____ 1922 Filed Apr 24 1922 2 B M Hawk LOCAL REGISTRAR.
535-472-416 Filed May 1 1922 A True Copy B S Jof COUNTY REGISTRAR.