

2521

PLACE OF BIRTH

1. County of Gila  
District of \_\_\_\_\_  
Town of Miami

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS  
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 128  
Co. Registrar No. 473  
Local Registrar No. \_\_\_\_\_

City of \_\_\_\_\_ No. \_\_\_\_\_ St. \_\_\_\_\_ Ward \_\_\_\_\_  
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Marguerite Gene Thielicke } If child is not yet named, make supplemental report, as directed

3. Sex of child Female To be answered ONLY in event of plural births. 4. Twin, triplet or other. \_\_\_\_\_ 5. No., in order of birth 1 6. Legitimate? yes 7. Date of birth 10 - 4 - 1922 (Month, day, year)

8. FATHER Full name Charles Thielicke

14. MOTHER Full maiden name Carry Edna Bacon

9. Residence (Usual place of abode) If nonresident, give place and State Miami, Ariz.

15. Residence (Usual place of abode) If nonresident, give place and State Miami, Ariz.

10. Color or race Caucasion 11. Age at last birthday 34 (Years)

16. Color or race caucasian 17. Age at last birthday 33 (Years)

12. Birthplace (city or place) Mich. (State or country)

18. Birthplace (city or place) Mich. (State or country)

13. Occupation Mine Supt. Nature of industry \_\_\_\_\_

19. Occupation house wife Nature of industry \_\_\_\_\_

20. Number of children of this mother (Taken as of time of birth of child here-in certified and including this child.) (a) Born alive and now living 1 (b) Born alive but now dead 0 (c) Stillborn 0

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was alive at 1 p.m. on the date above stated.

Signature Geo A Paige (Physician or midwife)  
Address Miami, Arizona

\*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Given name added from a supplemental report \_\_\_\_\_ (Month, day, year)

Filed 10/6, 1922 B. M. Hardy Local Registrar.  
Filed 11/6, 1922 B. G. J. Joy County Registrar.

Registrar. 435-1004-325

In case of more than one child at a birth, a SEPARATE RETURN must be made for each, the number of each, in order of birth, stated.