

Damaged Document(s)

PLACE OF BIRTH **CERTIFICATE AMENDED** ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS

1. County of Maricopa SEE NOTATION State Index No. 130
 District of _____ Co. Registrar No. 634
 Town of Miami ORIGINAL CERTIFICATE OF BIRTH Local Registrar No. _____
 or _____ No. _____
 City of _____ (If birth occurred in a hospital or institution, give its NAME instead of street and number) St. Claypool (2-28-74) Ward _____

2. Full name of child John A. Webster If child is not yet named, make supplemental report, as directed

3. Sex of child Male 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 Dec 28 1922 (Month, day, year)

FATHER		MOTHER	
8. Full name <u>John Finley K. Webster</u>	14. Full maiden name <u>Martha Johnson</u>	9. Residence (Usual place of abode) <u>Miami, Ariz.</u> If nonresident, give place and State	15. Residence (Usual place of abode) <u>Miami, Ariz.</u> If nonresident, give place and State
10. Color or race <u>white</u>	16. Color or race <u>white</u>	11. Age at last birthday <u>23</u> (Years)	17. Age at last birthday <u>16</u> (Years)
12. Birthplace (city or place) <u>At Sea - England to New York</u> (State or country)	18. Birthplace (city or place) <u>Denver, Col.</u> (State or country)	13. Occupation <u>Machinist</u>	19. Occupation <u>Housewife</u>
Number of children of this mother taken as of time of birth of child here-certified and including this child. <u>1</u>		(a) Born alive and now living <u>1</u> (b) Born alive but now dead _____ (c) Stillborn _____	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born at 4:10 p.m. on the date above stated.
(Born alive or stillborn)

*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.

Signature C. M. Crow M.D. (Physician or midwife)
 Address Miami, Arizona
 Filed 12/31/22, 19 1922 by B. W. Hurl, L. E. J.
 Filed 1-5-23
 Registrar _____