

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

1. County of Sila
 District of _____
 Town of Hayden
 or _____
 City of _____

BUREAU OF VITAL STATISTICS
 ORIGINAL CERTIFICATE OF BIRTH

State Index No. 151
 County Registrar No. 8576
 Local Registrar No. 112

2. Full name of child Marion Maxine McCullough (If birth occurred in a hospital or institution, give its NAME instead of street and number)
 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 _____ 6. Legitimate? Yes 7. Date of birth Sept 29 1924 Month day year

8. FATHER
 Full name James George McCullough
 Residence Hayden Ariz
 If nonresident, give place and state _____

14. MOTHER
 Full maiden name Lois Kenagy
 Residence Hayden
 If nonresident, give place and state _____

10. Color, or race White

16. Color or race White

11. Age at last birthday 21 (Years)

17. Age at last birthday 20 (Years)

12. Birthplace Bradysville Iowa
 (State or country)

18. Birthplace Clavinda Iowa
 (State or country)

13. Occupation Mill operator
 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 herein certified and including this child.) (a) Born alive and now living 1 (b) Born alive but now dead _____ (c) Stillborn _____

21. Were precautions taken against ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born alive at 6:50 A.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 evidences of life after birth.

Signature Charles B. Hunt, M.D.
 (Physician or midwife)
 Address Hayden Arizona

Given name added from a supplemental report _____
 Month, day, year.

Filed NOV 8 1924 19 _____
 Local Registrar.

Filed 11-9 1924 BS Joy
 County Registrar.

Registrar.

448-929-326

In order of birth stated.