2239

SUPPLEMENT ATTACHED

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 305

County Registrar No. 2366

Local Registrar No. 407

PLACE OF BIRTH

1. County of Maricopa

District of # 3

Town of Mesa

or

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 Merkley — 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 Dec 6 1924 (Month day year)

8. FATHER	14. MOTHER
Full name LaVern Mathias Merkley	Full maiden name Daisy Annie Merkley
9. Residence (Usual place of abode) Mesa, Ariz — If nonresident, give place and state	15. Residence (Usual place of abode) Mesa, Ariz — If nonresident, give place and state
10. Color or race: white — 11. Age at last birthday 37 (Years)	16. Color or race: white — 17. Age at last birthday 39 (Years)
12. Birthplace (city or place) Idaho (State or country)	18. Birthplace (city or place) Australia (State or country)
13. Occupation Nature of industry Mechanic	19. Occupation Nature of industry Housewife

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 4
(b) Born alive but now dead 0
(c) Stillborn 0

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 3:30 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 Dr. F. W. Brown (Physician or midwife)

Address Mesa, Ariz

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

Filed Dec. 15, 1924 H. D. McNeill Local Registrar.

Registrar.

Filed ..... 19.... HARRY J. FE[illegible] County Registrar.

548-1206-488

In order of birth stated.