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ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. ~~132~~

County Registrar No. 495

Local Registrar No.

PLACE OF BIRTH

1. County of Gila

District of

Town of Clay Pool

or

City of Broad Street No. St. Ward

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Marjorie Laura Pinson — 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 Jan 4 1925 (Month day year)

FATHER	MOTHER
8. Full name William C Haffy Pinson	14. Full maiden name Thelma Flough
9. Residence (Usual place of abode) If nonresident, give place and state Clay Pool	15. Residence (Usual place of abode) If nonresident, give place and state Clay Pool
10. Color or race White — 11. Age at last birthday 31 (Years)	16. Color or race White — 17. Age at last birthday 23 (Years)
12. Birthplace (city or place) (State or country) Colorado	18. Birthplace (city or place) (State or country) Colorado
13. Occupation Nature of industry Blacksmith	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 1
(b) Born alive but now dead 1
(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 or stillborn.) at 6 A m. on the date above stated.

*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 Nelson D Brayton (Physician or midwife)

Address Miami Arizona

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

Filed Feb 8, 1926 C. E. Irvin Local Registrar.

Registrar. 475-104-368

Filed ....., 19.... County Registrar.

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD

MARGIN RESERVED FOR BINDING

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