

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 181
566

Registered No. _____

1. PLACE OF BIRTH

County Gila State Arizona

District or Township _____ or Village 04108 Kent St. Miami,

City Miami No. Miami - Insp. Hospital St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Mary Louise Croci { 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 _____ 6. Legitimate? yes 7. Date of birth Dec. 26 - 1928
Month Day Year

8. FATHER Full name John Croci

9. Residence (Usual place of abode) Miami
If non-resident, give place and state. Arizona.

10. Color or race Cauc. 11. Age at last birthday 25 (Years)

12. Birthplace (city or place) Salt Lake City
(State or country) Utah

13. Occupation Nature of industry Salesman

14. MOTHER Full maiden name Ruby Trevana

15. Residence (Usual place of abode) Miami
If non-resident, give place and state. Arizona.

16. Color or race Cauc. 17. Age at last birthday 20 (Years)

18. Birthplace (city or place) Globe,
(State or country) Arizona.

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.) 1 (a) Born alive and now living 1 (b) Born alive but now dead 0 (c) Stillborn 0 21. Were precautions taken against ophthalmia neonatorum? yes

I hereby certify that I attended the birth of this child, who was born alive at 2:55 (Born alive or stillborn.) at 4 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 evidence of life after birth. Signature Cyril M. Brown M.D. Physician

Given name added from a supplemental report _____ Address Miami, Arizona (Physician or midwife).

Month, day, year _____ Filed Jan 10, 1929 R. E. Tom Registrar

439-1226-931