

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

213
State File No. 396
Registered No. 396

1. PLACE OF BIRTH

County Gila State Arizona
District or Township Lower Miami or Village _____
City Miami No. 6 Cottonwood St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Mayleen Maroney *
(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, ~~or other~~ birth 6. Legitimate? yes
5. No., in order of birth 1st 7. Date of birth Aug 21 1919
Month Day Year

8. FATHER
Full name Edward Tate Maroney
9. Residence (Usual place of abode) Miami, Arizona
If non-resident, give place and state.

14. MOTHER
Full maiden name Lucy Wamsley
15. Residence (Usual place of abode) Miami, Arizona
If non-resident, give place and state.

10. Color or race white
11. Age at last birthday 22 (Years)

16. Color or race white
17. Age at last birthday 22 (Years)

12. Birthplace (city or place) Lower Georgia
(State or country)

18. Birthplace (city or place) Hubbard Arizona
(State or country)

13. Occupation Miner
Nature of industry Copper

19. Occupation Housewife
Nature of industry

20. Number of children of this mother... 2
(Taken as of time of birth of child herein certified and including this child). } (a) Born alive and now living 2
(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 alive at 12:15 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 evidence of life after birth.
Signature J. J. Wamsley
(Physician or midwife)

Given name added from _____ Address Miami, Arizona
a supplemental report. Month, day, year Aug 30 1919
448-821-368 Registrar. R. E. J. J. Wamsley Registrar.

* no name; died 1 hour after birth

This form must be filled out in duplicate for each child, and the number of each in order of birth stated.