

PLACE OF BIRTH

1. County of Gila
 District of _____
 Town of Miami
 or _____
 City of _____

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 128
 County Registrar No. 139
 Local Registrar No. _____

No. 57 Hill

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

2. Full name of child Richard Wade

3. Sex of Child male To be answered ONLY in event of plural births. 4. Twin, triplet or other. _____ 6. Legitimate? Yes 7. Date of birth April 3 1927
 { If child is not yet named, make supplemental report, as directed.

5. No., in order of birth. _____

8. * FATHER
Full name Pearce J. Wade9. Residence (Usual place of abode) Miami, Arizona
If non-resident, give place and state.10. Color or race White 11. Age at last birthday 33 (Years)12. Birthplace (city or place) Tucson
(State or country) Arizona13. Occupation Blacksmith
Nature of Industry Copper mine14. MOTHER
Full maiden name Theresa Barron15. Residence (Usual place of abode) Miami, Arizona
If non-resident, give place and state.16. Color or race Mexican 17. Age at last birthday 34 (Years)18. Birthplace (city or place) Tucson
(State or country) Arizona19. Occupation Housewife
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 4
(b) Born alive but now dead 2
(c) Stillborn 021. 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 1:21 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. Miller
Address Miami, Arizona
(Physician or midwife)Given name added from a supplemental report. 905-403-325 Filed Apr 12, 1927 Local Registrar. C. B. Drury

Registrar _____

Filed _____, 19____

County Registrar. _____

* His no middle name, just an initial "J"