

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

State File No. 1678
 Registered No. 208

1. PLACE OF BIRTH
 County Gila State Arizona
 District or Township _____ or Village _____
 City Miami No. 918 Merritt St. St. _____ Ward _____
 (If birth occurred in a hospital or institution, give its NAME instead of street and number)
 2. Full name of child Harry Leslie Conner (If child is not yet named, make supplemental report, as directed.)

3. Sex of Child Male To be answered ONLY in event of plural births. } 4. Twin, triplet or other _____ 6. Legitimate? yes
 5. No., in order of birth _____ 7. Date of birth June 19-1927
 Month Day Year

8. FATHER
 Full name Harry Moses Conner
 9. Residence (Usual place of abode) Miami, Arizona
 If non-resident, give place and state.
 10. Color or race Cauc.
 11. Age at last birthday 34 (Years)

14. MOTHER
 Full maiden name Annie E. Payne
 15. Residence (Usual place of abode) Miami, Arizona
 If non-resident, give place and state.
 16. Color or race Cauc.
 17. Age at last birthday 36 (Years)

12. Birthplace (city or place) Hawesville, Kentucky
 (State or country)
 13. Occupation Millman
 Nature of industry Mining

18. Birthplace (city or place) Knottsville, Kentucky
 (State or country)
 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 5
 (b) Born alive but now dead _____
 (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 at 5:50 A. m. on the date above stated
 (Born alive or stillborn)
 Signature Byril M. Brown, M.D.
 _____ (Physician or midwife).
 Address Miami, Arizona
 Given name added from a supplemental report _____
 Month, day, year 8 39 - 6 19 - 1 75
 Registrar Lo-E. Dorn
 Filed June 25 1927 Registrar

* 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.