121

PLACE OF BIRTH

County of Gila

District of Keystone

Town of

or

City of Miami Ariz

ARIZONA TERRITORIAL BOARD OF HEALTH

BUREAU OF VITAL STATISTICS. Ter. Index No. 21

ORIGINAL CERTIFICATE OF BIRTH. Co. Register No. 101

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD John Rutledge { Born / Alive } YES / NO

If child is not named, make Supplemental Report on blank obtainable from local registrar.

Sex of Child Male | Twin, Triplet or other | and | Number; in order of birth 1st | Legitimate? Yes | Date of Birth May (Month) 3 (Day) 1911 (Yr.)

FATHER		MOTHER	
Full Name	Clarence Rutledge	Full Maiden Name	Vernie Davidson
Residence	Miami Ariz	Residence	Miami Ariz
Color or Race	American	Color or Race	American
Age at last Birthday (Years)	37	Age at last Birthday (Years)	28
Birthplace	Iowa	Birthplace	Tenn.
Occupation	Miner	Occupation	House-wife

Number of child of this mother 1st | Number of children, of this mother, now living One | Were Precautions taken against Ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of above child; and that it occurred on, May 3 1911, at 6 P.M.

*When there is no attending physician or midwife, then the householder should make this return.

(Signature) John H Lacy MD (Attending physician, midwife, householder. *)

Given or christian name added from a supplemental report _____ 191__

Address Miami Ariz

Filed May 6 1911 B. G. Fox LOCAL REGISTRAR.

195-503-545 COUNTY REGISTRAR.

Filed 6/5 1911 B. G. Fox MD COUNTY REGISTRAR.

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. This certificate must be filed by the attending Physician or Midwife with the Local Registrar within 5 days after birth.

Write [illegible]y, with Unfading Ink.—This is a Perm[illegible]nt Record.*