675

PLACE OF BIRTH

County of Gila

District of Arizona

Town of

or

City of Hayden

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS.

ORIGINAL CERTIFICATE OF BIRTH.

State Index No. 115

Co. Register No. 215

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD Harmon

Born / Alive YES ~~NO~~

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

Sex of Child	Twin, Triplet or other	Number in order of birth	Legitimate?	Date of Birth
female	single	1	yes	Aug. 12, 1913 (Month) (Day) (yr.)

FATHER		MOTHER	
Full Name	Edgar W. Harmon	Full Maiden Name	Theresa R. Knapp
Residence	Hayden.	Residence	Hayden
Color or Race	White	Color or Race	White
Age at last Birthday	27 (Years)	Age at last Birthday	26 (Years)
Birthplace	Arkansas	Birthplace	Penn.
Occupation	Fireman	Occupation	House wife.

Number of child of this mother 3rd | Number of children, of this mother, now living 2 | 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 Aug. 12 1913, at 6A M.

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

(Signature) ~~F. C. Norman~~ F. C. Norman

(Attending physician, midwife, householder.*)

Given or christian name added from a supplemental report 191

Address Hayden

Filed Sept 5 1913

F. C. Norman

LOCAL REGISTRAR.

085-812-327

COUNTY REGISTRAR.

Filed 9/10 1913

A True Copy

B. G. Loveno

COUNTY REGISTRAR.

PLACE OF BIR

County of Gila

District of Pays

Town of Pays

or

City of

FULL NAME OF CHIL

If child is not named, make Su

ARIZ

turn should preferably be made
person who made the original)

of Birth Payson
tration District)

HILD* | Twin Triplet or other?

AUGUST 12, 19

BIRTH* (Month)

FATHER

Felix Lann

MOTHER

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mental reports of birth m
P.Co.

MAIDEN NAME My

*These items

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