2335

CERTIFICATE AMENDED SEE NOTATION Child's name entered and Father's Surname amended as per Affidavit, also from Naval Service Records

PLACE OF BIRTH

County of Gila

District of Globe

Town of Miami

or

City of

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 133

Co. Register No. 167

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD IRVIN THOMAS SOWDEN

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	and	Number in order of birth	Legitimate?	Date of Birth (Month)	(Day)	(Yr.)
Male				yes	May 5	18	1914

FATHER	MOTHER
Full Name: Thomas ~~Sowden~~ SOWDEN	Full Maiden Name: Maggie Jones
Residence: Miami	Residence: Miami
Color or Race: White	Color or Race: White
Age at last Birthday: 32 (Years)	Age at last Birthday: 27 (Years)
Birthplace: Cornwall England	Birthplace: Weatherford Texas
Occupation: Miner	Occupation: House wife

Number of child of this mother: 2

Number of children, of this mother, now living: 2

Were precautions taken against Ophthalmia neonatorum? no

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of above child; and that it occurred on 5/18 1914, at 4:30 A.M.

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

(Signature) G. C. Snyder

(Attending physician, ~~midwife, householder.~~*)

Address Miami Ariz

Given or christian name added from a supplemental report 191

Filed July 1 1914 B. G. Fox

LOCAL REGISTRAR.

035-518-412

COUNTY REGISTRAR.

Filed July 1 1914 A True Copy B. G. Fox M.D.

COUNTY REGISTRAR.

Midwife with each local registrar within 6 days after birth.