159

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. 1157 ~~88~~

Co. Register No. 180

Local Registrar's No. .....

(No. ..... St; ..... Ward)

FULL NAME OF CHILD Charles Thomas Byrne

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	X		X	Yes	June 17 1914

FATHER		MOTHER	
Full Name	Charles Byrne	Full Maiden Name	Viva Peterson
Residence	Miami Arizona	Residence	Miami
Color or Race	White	Color or Race	White
Age at last Birthday (Years)	28	Age at last Birthday (Years)	21
Birthplace	Texas	Birthplace	Arizona
Occupation	Grocery Solicitor	Occupation	Housework

Number of child of this mother 2. 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 June 17 1914, at 6 a. M.

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

(Signature) Charles E. Irvin M.D.

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

Address Miami Arizona

Given or christian name added from a supplemental report ..... 191.....

Filed June 20 1914 B. G. Ivy

LOCAL REGISTRAR.

325-617-575

COUNTY REGISTRAR.

Filed June 20 1914 A True Copy B. G. Ivy M.D.

COUNTY REGISTRAR.

N. B.—In case of more than one child at a birth, a SEPARATE REPORT must be made for each, in the number of each, in order of birth, stated. This certificate must be filed by the attending Physician or Midwife with each local Registrar within 5 days after birth.