4279

PLACE OF BIRTH

County of Gila

District of Globe

Town of Miami

or

City of Glo

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 130 502

Co. Register No. 251

Local Registrar's No.

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

FULL NAME OF CHILD Baby Karich

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

Born Alive YES ~~NO~~

Sex of Child Female | ~~Twin, Triplet~~ or other | and | Number in order of birth 1 | Legitimate? yes | Date of Birth Aug. 16 1914 (Month) (Day) (Yr.)

FATHER		MOTHER	
Full Name	Pete Karich	Full Maiden Name	Mary Bosich
Residence	Red Spring Cañon Miami Ariz.	Residence	Miami Ariz
Color or Race	White Austrian	Color or Race	Austrian
Age at last Birthday	22 (Years)	Age at last Birthday	24 (Years)
Birthplace	Austria	Birthplace	Austria
Occupation	Miner	Occupation	Housewife

Number of child of this mother 1 | Number of children, of this mother, now living 1 | 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. 16 1914 at 6 15 P.M.

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

(Signature) C. M. Cron M.D.

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

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

Address Miami Ariz. Box 100

Filed Aug 29 1914

B. G. Fox

LOCAL REGISTRAR.

028-016-426

COUNTY REGISTRAR.

Filed Sept 1 1914

A True Copy

B. G. Fox M.D.

COUNTY REGISTRAR.

... 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.