4913

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS 126

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 906a

Co. Register No. 135

Local Registrar's No. .....

PLACE OF BIRTH

County of Gila

District of Globe

Town of Copper Hill

or

City of .....

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

FULL NAME OF CHILD Victor Norman

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

Born Alive YES ~~NO~~

Sex of Child	Twin, Triplet or other	and	Number in order of birth	Legitimate?	Date of Birth
Boy	Other		1	yes	Dec. (Month) 3 (Day) 1915 (Yr.)

FATHER	MOTHER
Full Name: Victor Norman	Full Maiden Name: Fannie Akerblad
Residence: Copper Hill, Ariz.	Residence: Copper Hill, Ariz.
Color or Race: Finlander; Age at last Birthday 29 (Years)	Color or Race: White; Age at last Birthday 31 (Years)
Birthplace: Finland	Birthplace: Finland
Occupation: Miner	Occupation: Housewife

Number of child of this mother ... 3 ... | Number of children, of this mother, now living .... 3 ... | Were precautions taken against Ophthalmia neonatorum? .. yes ....

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE* A.

I hereby certify that I attended the birth of above child; and that it occurred on Dec. 3 1915, at 12.30 M.

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

(Signature) [signature]

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

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

Address .....

Filed 6/30 1916 B. G. Fox LOCAL REGISTRAR.

555-1203-614 COUNTY REGISTRAR.

Filed 7/5 1916 A True Copy B. G. Fox COUNTY REGISTRAR.

(Overlooked by Sales)