PLACE OF BIRTH

County of Gila

District of

Town of Miami

or

City of

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

127 State Index No. 500

ORIGINAL CERTIFICATE OF BIRTH

Co. Register No. 251

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD Samuel Edward Besner

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

Born Alive YES ~~NO~~

Sex of Child Male. Twin, Triplet or other and Number in order of birth Legitimate? Yes Date of Birth Aug. 17 1916 (Month) (Day) (Yr.)

FATHER		MOTHER	
Full Name	John Benjamin Besner	Full Maiden Name	Harriet Ann Webster
Residence	Miami	Residence	Miami
Color or Race	White	Color or Race	White
Age at last Birthday	38 (Years)	Age at last Birthday	34 (Years)
Birthplace	Phoenix Ariz.	Birthplace	Utah
Occupation	Mill Man.	Occupation	Housewife.

Number of child of this mother 6 | Number of Children, of this mother, now living 6 | Were precautions taken against Ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child; and that it occurred on Aug 17th 1916, at 8 a.m.

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

(Signature) S. H. Eckles

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

Given or Christian name added from a supplemental report 191

Address

Filed Aug 25 1916. John H Leary LOCAL REGISTRAR.

A True Copy

Filed Sep 6 1916. Geo. Fox Mtn COUNTY REGISTRAR.

229-817-819

COUNTY REGISTRAR.

My Commission expires 09-28-52 Address 510 N.