

PLACE OF BIRTH  
 County of Gila ARIZONA STATE BOARD OF HEALTH  
 District of \_\_\_\_\_ BUREAU OF VITAL STATISTICS 166 State Index No. 898  
 Town of Miami ORIGINAL CERTIFICATE OF BIRTH Co. Register No. 291  
 or \_\_\_\_\_  
 City of \_\_\_\_\_ (No. \_\_\_\_\_ St. \_\_\_\_\_ Ward \_\_\_\_\_)

FULL NAME OF CHILD Frank Lee Howard { Born } YES  
 If child is not named; make Supplemental Report on blank obtainable from local registrar. { Alive } ~~NO~~

Sex of Child Male Twin, Triplet or other None } and } Number in order of birth 1st Legitimate Yes Date of Birth Sept 27 1916  
 (Month) (Day) (Yr.)

FATHER  
 Full Name Walter Lee Howard  
 Residence Miami Ariz.  
 Color or Race White Age at last Birthday 33 (Years)  
 Birthplace Minnesota  
 Occupation Merchant

MOTHER  
 Full Maiden Name Myrtle Edna Hansen  
 Residence Miami Ariz.  
 Color or Race White Age at last Birthday 22 (Years)  
 Birthplace Wisconsin  
 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 the above child; and that it occurred on Sept 27 1916, at 4:45 P. M.  
 { \*When there is no attending physician or midwife, then the householder should make this return. } (Signature) B. W. Hardy M. D.  
 (Attending physician, midwife, householder.\*)

Given or Christian name added from a supplemental report \_\_\_\_\_ 1916 Address Miami Ariz.  
 Filed Sept 30 1916 John H. Loey  
 LOCAL REGISTRAR.

684-927-485 Filed Oct 10 1916 A True Copy B. J. W. D.  
 COUNTY REGISTRAR. COUNTY REGISTRAR.