241

PLACE OF BIRTH

County of Gila

District of

Town of Miami
or
City of

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 170

Co. Register No. 158

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD Frank Jaoquin Ross

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	1		1	Y	Mch 28 1917

FATHER		MOTHER	
Full Name	Frank Ross	Full Maiden Name	Louie Walser
Residence	Miami	Residence	Miami
Color or Race	White	Color or Race	White
Age at last Birthday (Years)	27	Age at last Birthday (Years)	27
Birthplace	California	Birthplace	Utah
Occupation	Machinist	Occupation	Housewife

Number of child of this mother 2 | Number of Children, of this mother, now living 1 | Were precautions taken against Ophthalmia neonatorum? Y

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child; and that it occurred on Mch 28 1917, at 5:10 A.M.

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

(Signature) Charles E. Irwin M.D.
(Attending physician, ~~midwife, householder.*~~)

Given or Christian name added from a supplemental report 191

Address Miami

Filed Mar 30 1917 John H. Lacy
LOCAL REGISTRAR.

692-328-669
COUNTY REGISTRAR.

Filed May 5 1917 A True Copy B. G. Fox
COUNTY REGISTRAR.