0250

PLACE OF BIRTH

County of Gila

District of Arizona

Town of Miami

or

City of _____

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS 144 State Index No. 5190

ORIGINAL CERTIFICATE OF BIRTH

Co. Register No. 322

Local Registrar's No. _____

(No. _____ St; _____ Ward)

FULL NAME OF CHILD Robert Howard Rhodes

Born Alive: YES ~~NO~~

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

Sex of Child: Male | ~~Twin, Triplet~~ or other: and | Number in order of birth: 3rd | Legitimate? yes | Date of Birth: June 21 - 1917 (Month) (Day) (Yr.)

FATHER		MOTHER	
Full Name	Albert Howard Rhodes	Full Maiden Name	Josie Cox
Residence	Miami - Arizona	Residence	Miami - Arizona
Color or Race	White	Color or Race	White
Age at last Birthday (Years)	50	Age at last Birthday (Years)	25
Birthplace	California	Birthplace	Texas
Occupation	Miner	Occupation	Housewife

Number of child of this mother 3 | Number of Children, of this mother, now living 2 | 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 June 21 1917, at 7 30 P.M.

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

(Signature) Cyril M. Crow M.D.
(Attending physician, midwife, householder.*)

Address Miami - Arizona

Given or Christian name added from a supplemental report _____ 191__

Filed July 24 1917. John H. Lacy
LOCAL REGISTRAR.

992-621-137
COUNTY REGISTRAR.

A True Copy

Filed Aug 7 1917. B. M. Cox
COUNTY REGISTRAR.