971

PLACE OF BIRTH

County of Gila

District of

Town of Miami

or

City of

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS 141 State Index No. 677

ORIGINAL CERTIFICATE OF BIRTH

Co. Register No. 456

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD Arvie Lennart Wrang { 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.)
M	1		1	Y	Aug 4 1917

FATHER		MOTHER	
Full Name	Olaf Wrang	Full Maiden Name	Martha M Hendricks
Residence	Miami	Residence	Miami
Color or Race	Wh	Color or Race	Wh
Age at last Birthday (Years)	28	Age at last Birthday (Years)	22
Birthplace	Sweden	Birthplace	Sweden
Occupation	Miner	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 Aug 4 1917, at 1:15 A.M.

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

(Signature) Charles E Irvin M D

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

Given or Christian name added from a supplemental report 191

Address Miami, Ariz.

Filed Nov 2 1917. John C Lacey LOCAL REGISTRAR.

167-804-482 COUNTY REGISTRAR.

Filed Nov 6 1917 A True Copy B. G. Fox COUNTY REGISTRAR.