199

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

County of Gila

District of Winkelman Maple

Town of Winkelman

or

City of

State Index No. 141

Co. Register No. 524

Local Registrar's No. 1

(No. ..... St; ..... Ward)

FULL NAME OF CHILD Jonathan E. Booth

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

Born Alive YES ~~NO~~

Sex of Child M | Twin, Triplet or other ✓ | and | Number in order of birth ✓ | Legitimate? Yes | Date of Birth Nov (Month) 12 (Day) 1917 (Yr.)

FATHER		MOTHER	
Full Name	Jonathan L. Booth	Full Maiden Name	Minnie C. Salomon
Residence	Winkelman	Residence	Winkelman
Color or Race	Wh.	Color or Race	Am.
Age at last Birthday	33 (Years)	Age at last Birthday	36 (Years)
Birthplace	Kansas	Birthplace	New Mex
Occupation	Mechanic (copper mill)	Occupation	Housewife

Number of child of this mother 3 | Number of children, of this mother, now living 3 | Were precautions taken against Ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of above child; and that it occurred on Nov 12 1917, at 3:30 A.M.

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

(Signature) Charles H. Sowan

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

Given or christian name added from a supplemental report ..... 191....

Address Hayden

Filed Nov 30 1917

H. J. Roberts

LOCAL REGISTRAR.

128-1112-425

COUNTY REGISTRAR.

Filed Dec 5 1917

A True Copy B. G. Fox

COUNTY REGISTRAR.