

PLACE OF BIRTH
 County of Dala
 District of Miami
 Town of _____
 or _____
 City of _____

ARIZONA STATE BOARD OF HEALTH
 BUREAU OF VITAL STATISTICS

State Index No. 137
 Co. Register No. 132
 Local Registrar's No. _____

ORIGINAL CERTIFICATE OF BIRTH

(No. _____ St; _____ Ward)

Full Name of Child Venita Fern Nicholson { Born } YES
 { Alive } NO
 If child is not named, make Supplemental Report on blank obtainable from local registrar.

Sex of Child F Twin, Triplet or other 1 } and } Number in order of birth 1 Legitimate? Y Date of Birth March 11 1918
 (Month) (Day) (Yr.)

FATHER
 Name Herschel V. J. Nicholson
 Residence Miami
 Color or Race White Age at last Birthday 30 (Years)
 Birthplace Texas
 Occupation Clerk

MOTHER
 Full Maiden Name Aurora Laura Hammar
 Residence Miami
 Color or Race White Age at last Birthday 20 (Years)
 Birthplace New Mexico
 Occupation Housewife

Number of children 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 March 11, 1918, at 10 M.
 *When there is no attending physician or midwife, then the householder could make this return.

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

Given or Christian name added from a supplemental report _____ 1918

Address Miami, Arizona
John H. Racy
 LOCAL REGISTRAR.

555-311-189
 COUNTY REGISTRAR.

Filed Mar 15 1918

Filed Apr 6 1918 A True Copy

B. J. Fox
 COUNTY REGISTRAR.