2258

**PLACE OF BIRTH**

County of Gila

District of Arizona

Town of Miami

or

City of

# ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

**ORIGINAL CERTIFICATE OF BIRTH**

State Index No. 118

Co. Register No. 306

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD Virginia Lutishia Morgan

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

Born / Alive: YES ~~NO~~

Sex of Child Female | ~~Twin, Triplet~~ or other | and | Number in order of birth 1 | Legitimate? yes | Date of Birth June (Month) 7 (Day) 1918 (Yr.)

| FATHER | | MOTHER | |
|---|---|---|---|
| Full Name | John Cecil Morgan | Full Maiden Name | Dewey Lee Brown |
| Residence | Miami - Arizona | Residence | Miami, Arizona |
| Color or Race | White | Color or Race | White |
| Age at last Birthday | 22 (Years) | Age at last Birthday | 20 (Years) |
| Birthplace | Vesta, Arkansas | Birthplace | Austin, Texas |
| Occupation | Millman | 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 above child; and that it occurred on June 7, 1918, at 11 15 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 Aug 9 1918

John H. Doey
LOCAL REGISTRAR

SHS-607-425
COUNTY REGISTRAR.

Filed Aug 6 1918

A True Copy B. G. Fox
COUNTY REGISTRAR.