

1126

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

ARIZONA STATE BOARD OF HEALTH
 BUREAU OF VITAL STATISTICS

State Index No. 168
 Co. Register No. 500
 Local Registrar's No. _____

ORIGINAL CERTIFICATE OF BIRTH

(No. _____) (St. _____) (Ward _____)

Full Name of Child No name { Born } YES
 child is not named, make Supplemental Report on blank obtainable from local registrar. { Alive } ~~YES~~

Sex of Child Female Twin, Triplet or other _____ } and } Number in order of birth _____ Legitimate? yes Date of Birth Sept 20 1918
 (Month) (Day) (Yr.)

FATHER
 Full Name Franklin S Crower
 Residence Miami, Arizona
 Color or Race White Age at last Birthday 37 (Years)
 Birthplace Texas
 Occupation Hatchman

MOTHER
 Full Maiden Name Pearl McEuen
 Residence Miami, Arizona
 Color or Race White Age at last Birthday 33 (Years)
 Birthplace New Mexico
 Occupation Housewife

Number of child of this mother 5 Number of Children, of this mother, now living 4 Were precautions taken against Ophthalmia neonatorum? no

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child; and that it occurred on Sept 20 1918, at 3 A.M.

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

(Signature) C. Swackhamer, M.D.
 (Attending physician, midwife, householder.)*

Given or Christian name added from a Supplemental report _____ 1918

Address Miami, Arizona
John H. Lacey
 LOCAL REGISTRAR.

Filed Nov 17 1918 True Copy
B. G. J. of
 COUNTY REGISTRAR. COUNTY REGISTRAR.

039-920-745 Filed Dec 5 1918