4179

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

County of Gila

District of

Town of Miami
or

City of

State Index No. 158

Co. Register No. 746

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD A. B. Cutler Jr.

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

Born Alive Yes ~~No~~

Sex of Child	Twin, Triplet or other	and	Number in order of birth	Legitimate?	Date of Birth (Month) (Day) (Yr.)
M	1		1	Y	Dec 12 1920

FATHER		MOTHER	
Full Name	A. B. Cutler	Full Maiden Name	Thurza B. Seth
Residence	Miami	Residence	Miami
Color or Race	Wh	Color or Race	Wh
Age at last Birthday (Years)	38	Age at last Birthday (Years)	31
Birthplace	Kansas	Birthplace	Missouri
Occupation	General Store keeper	Occupation	H

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 Dec 12 1920, at 3 30 P M.

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

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

Address Miami Ariz.

Given or Christian name added from a supplemental report 192

Filed 12/15 1920

T H Slaughter
LOCAL REGISTRAR.

139-1212-328
COUNTY REGISTRAR.

A True Copy

Filed 12-27 1920

B. G. Fox
COUNTY REGISTRAR.