4144

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 196

Co. Registrar's No. 151

Local Registrar's No.

PLACE OF BIRTH

County of Gila

District of

Town of Miami

or

City of (No. St: Ward)

FULL NAME OF CHILD Leslie Eugene Cornett

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 1 | and | Number in order of birth 1 | Legitimate? Y | Date of Birth Mch 5 1921 (Month Day Yr.)

FATHER		MOTHER	
Full Name	Leslie Eugene Cornett	Full Maiden Name	Elva Jane Kidney
Residence	Miami	Residence	Miami
Color or Race	Wh	Color or Race	White
Age at last Birthday	24 Years	Age at last Birthday	18 Years
Birthplace	Arizona	Birthplace	Colo
Occupation	Printer	Occupation	X

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 Mch 5 1921, at 7:45 P.M.

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

Signature Charles E. Tim M.D.
Attending physician, midwife, householder.*

Given or Christian name added from a supplemental report 191

Address Miami Ariz

Filed Mar 21 1921

B. W. Hardy M.D.
LOCAL REGISTRAR.

A True Copy

333-305-528
COUNTY REGISTRAR.

Filed Apr 6 1921

B. G. Tia
COUNTY REGISTRAR.

or midwife with each local Registrar within 5 days after birth.