PLACE OF BIRTH

County of Gila

District of

Town of Miami

or

City of

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 1133

Co. Registrar's No. 362

Local Registrar's No.

(No. St: Ward)

FULL NAME OF CHILD Daisy Grace Renowden

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.)
Female		2	yes	June 23 1921

FATHER		MOTHER	
Full Name	James Renowden	Full Maiden Name	Florence Stribling
Residence	Miami Arizona	Residence	Miami, Arizona
Color or Race	White	Color or Race	White
Age at last Birthday	24 Years	Age at last Birthday	23 Years
Birthplace	St. Ives, Cornwall, Eng.	Birthplace	Woolich, England
Occupation	Miner	Occupation	Housewife

Number of child of this Mother 2 | Number of Children, of this mother, now living 2 | 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 June 23, 1921, at 10 A. M.

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

Signature C. M. Dow M.D.

Attending physician, ~~midwife, householder~~.*

Address Miami, Arizona.

Given or Christian name added from a supplemental report ..... 191..

Filed June 30 1921 B. W. Hardy M.D.

LOCAL REGISTRAR.

495-623-627

COUNTY REGISTRAR.

Filed July 5 1921 A True Copy B. G. [illegible]

COUNTY REGISTRAR.

the number of each, in order of birth, stated. This certificate must be made for each, and or midwife with each local Registrar within 5 days after birth. must be filed by the attending Physician