PLACE OF BIRTH

County of Gila

District of

Town of Miami

or

City of (No. St. Ward)

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 168

Co. Registrar No. 375

Local Registrar's No.

FULL NAME OF CHILD Louis Keith Nelson

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.)
Male	One		One	Yes	7/19/21.

FATHER	MOTHER
Full Name: Thomas Adolph Nelson	Full Maiden Name: Ozona Ophelia Jackson
Residence: Miami Ariz	Residence: Miami Ariz
Color or Race: White — Age at last Birthday: 28 (Years)	Color or Race: White — Age at last Birthday: 19. (Years)
Birthplace: New Mex. Co.	Birthplace: Arizona
Occupation: Miner	Occupation: Housewife

Number of Child of this mother	Number of children of this mother now living	Were precautions taken against Ophthalmia neonatorum?
1	1	Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child, and that it occurred on 7/19 1921, at 1.45 P.M.

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

(Signature) B. N. Hardy MD

(Attending physician, midwife, householder.*)

Address Miami Ariz

B N Hardy MD

LOCAL REGISTRAR.

Given or Christian name added from a supplemental report 192 Filed 7/25 1921

355-719-615

COUNTY REGISTRAR.

A True Copy

Filed Aug 3 1921

B. G. Fox

COUNTY REGISTRAR.