176

PLACE OF BIRTH

County of Gila

District of

Town of

or

City of Miami

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 128

Co. Registrar's No. 582

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD Alice Elizabeth Stewart

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			4	yes	Nov - 13 - 1921

FATHER		MOTHER	
Full Name	Chas. B. Stewart	Full Maiden Name	Elizabeth Bissett
Residence	Miami Ariz	Residence	Miami Ariz
Color or Race	white	Color or Race	white
Age at last Birthday	56 Years	Age at last Birthday	35 Years
Birthplace	American	Birthplace	American
Occupation	Wis.	Occupation	Wis.
	Mechanic		Housewife

Number of child of this Mother 4 | Number of Children, of this mother, now living 3 | 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 Nov-13-1921, at 5 A M

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

Signature T H Slaughter
Attending physician, midwife, householder.*

Address Miami Ariz

Given or Christian name added from a supplemental report 191

Filed Nov 29 1921

B. M. Hardy
LOCAL REGISTRAR.

123-11-13-523
COUNTY REGISTRAR.

Filed Dec 5 1921 A True Copy

B. G. Fox
COUNTY REGISTRAR.

N. B. In case of more than one child at birth, a SEPARATE RETURN must be made for the number of each, in order of birth, stated. This certificate must be filed by the attending or midwife with each local Registrar within 5 days after birth.