162

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

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. 162

Co. Registrar's No. 314

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD John Edward Thomas

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

Born Alive: YES ~~NO~~

Sex of Child: Male | ~~Twin~~, ~~Triplet~~ or other: | and | Number in order of birth: 1st | Legitimate? yes | Date of Birth: July (Month) 15 (Day) 1922 (Yr.)

FATHER		MOTHER	
Full Name	Hinson Thomas Jr.	Full Maiden Name	Miriam Riggs
Residence	Globe, Arizona	Residence	Miami, Arizona
Color or Race	White	Color or Race	White
Age at last Birthday	23 Years	Age at last Birthday	24 Years
Birthplace	Globe, Arizona	Birthplace	Cripple Creek, Col.
Occupation	Miner	Occupation	Housewife

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 July 15, 1922 at 8:15 A.M.

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

Signature C. M. Crow M.D.
Attending physician, midwife, householder.*

Address Miami, Arizona

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

Filed July 22 1922 B. Morand
LOCAL REGISTRAR.

132-715-492
COUNTY REGISTRAR.

A True Copy

Filed Aug 9 1922 B. G. Fry
COUNTY REGISTRAR.