

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

1. County of Pima

District of _____

Town of Miami

or

City of _____

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 137

Co. Registrar No. 563

Local Registrar No. _____

Miami-Inspiration Hospital

No. _____ St. _____ Ward) (If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Bartholomew Larson } If child is not yet named, make supplemental report, as directed

3. Sex of child female } To be answered ONLY in event of plural births. 4. Twin, triplet or other. _____ 5. No., in order of birth. _____ 6. Legitimate? yes 7. Date of birth November 19, 1922 (Month, day, year)

8. FATHER Full name Alexander Larson

14. MOTHER Full maiden name Mary Frances Blair

9. Residence Miami, Arizona (Usual place of abode) If nonresident, give place and State

15. Residence Miami, Arizona (Usual place of abode) If nonresident, give place and State

10. Color or race white 11. Age at last birthday 24 (Years)

16. Color or race white 17. Age at last birthday 22 (Years)

12. Birthplace (city or place) Glenbury, Arizona (State or country)

18. Birthplace (city or place) Thatcher, Arizona (State or country)

13. Occupation Copper miner Nature of Industry

19. Occupation Housewife Nature of Industry

20. Number of children of this mother (Taken as of time of birth of child here-in certified and including this child.) (a) Born alive and now living 2 (b) Born alive but now dead 0 (c) Stillborn 0

the number of each, in order of birth, stated.

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that, I attended the birth of this child, who was alive at 10a m. on the date above stated. (Born alive or stillborn)

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature J. J. Miller (Physician or midwife)

Address Miami, Arizona

Given name added from a supplemental report (Month, day, year)

Filed 11/30/22, 1922 B. W. Hardy by P. E. Day Local Registrar.

435-1119-929 Registrar.

Filed 12/3-, 1922 P. E. Day County Registrar.