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ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 113

County Registrar No. 26

Local Registrar No.

PLACE OF BIRTH

1. County of Gila

District of

Town of

or City of Miami No. 1070 Adonis Ave St. Ward

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child John Henry Ford Jr. } If child is not yet named, make supplemental report, as directed.

3. Sex of Child Male

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 Jan. 4. 1924 (Month day year)

FATHER	MOTHER
8. Full name John Henry Ford	14. Full maiden name Viola Horner
9. Residence (Usual place of abode) Miami Ariz. If nonresident, give place and state	15. Residence (Usual place of abode) Miami Ariz. If nonresident, give place and state
10. Color or race White	16. Color or race White
11. Age at last birthday 38 (Years)	17. Age at last birthday 27 (Years)
12. Birthplace (city or place) Sophemising (State or country) Mich.	18. Birthplace (city or place) Leadville (State or country) Colo
13. Occupation Nature of industry Miner	19. Occupation Nature of industry Housewife

20. Number of children of this mother (Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living 5
(b) Born alive but now dead None
(c) Stillborn None

21. Were precautions taken against ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was ..... at 2.45 p.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 evidences of life after birth.

Signature J. L. Sotel M.D. (Physician or midwife)

Address Miami Ariz.

Given name added from a supplemental report ..... Month, day, year.

Filed Jan 31, 1924 C. E. Irwin Local Registrar.

Registrar.

Filed 2/5 1924 B. L. Fia County Registrar.

164-104-589

V. S. No. 2

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD. MARGIN RESERVED FOR BINDING

N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each, in order of birth stated.