PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

1. County of Gila

District of

Town of Miami

or

City of

State Index No. 139

County Registrar No.

Local Registrar No. 619

No. Miami-Inspiration Hospital St., Ward

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

2. Full name of child Olga Rose Sherwin (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 April 10 1926 (Month Day Year)

8. FATHER

Full name John Dickerson Sherwin

9. Residence (Usual place of abode) Miami, Arizona

If non-resident, give place and state.

10. Color or race White

11. Age at last birthday 41 (Years)

12. Birthplace (city or place) Denver

(State or country) Colorado

13. Occupation Testing engineer

Nature of industry Copper flotation

14. MOTHER

Full maiden name Olga Rose Sproesser

15 Residence (Usual place of abode) Miami, Arizona

If non-resident, give place and state.

16 Color or race White

17. Age at last birthday 32 (Years)

18. Birthplace (city or place)

(State or country) South Dakota

19. Occupation Housewife

Nature of industry

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 2

(b) Born alive but now dead 0

(c) Stillborn 0

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 alive (Born alive ~~or stillborn.~~) at 1:50 A m. on the date above stated

* 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 F. F. Miller (Physician ~~or midwife~~)

Address Miami, Arizona

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

Filed May 28, 1926 C. E. Irvin Local Registrar.

Registrar

Filed , 19

County Registrar.

625-410-628