

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

County of GilaBUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTHState Index No. 179

City of _____

County Registrar No. _____

City of MiamiLocal Registrar No. 621No. Miami - Inspiration Hospital St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)Full name of child _____
(If child is not yet named, make supplemental report, as directed.)Sex of child male } To be answered ONLY in event of plural births. } 4. Twin, triplet or other _____ } 6. Legitimate? yes } 7. Date of birth April 29 1926
Month Day YearFATHER
Name William Dewey Schrader
Residence 120 S. 2nd St. Globe Arizona
(Usual place of abode)
If non-resident, give place and state.MOTHER
Full maiden name Martha Anna Surman
15 Residence Globe Arizona
(Usual place of abode)
If non-resident, give place and state.Color or race White
11. Age at last birthday 29 (Years)16 Color or race White
17. Age at last birthday 29 (Years)Birthplace (city or place) Allentown
(State or country) Pennsylvania18. Birthplace (city or place) Upper Merion
(State or country) PennsylvaniaOccupation Mining engineer
Nature of industry19. Occupation Housewife
Nature of industryNumber of children of this mother } (a) Born alive and now living 0 } 21. Were precautions taken against oph-
taken as of time of birth of child herein } (b) Born alive but now dead 0 } thalmia neonatorum?
and including this child. } (c) Stillborn 1 }

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was stillborn at 10 A m. on the date above stated
(Born alive or stillborn.)When there was no attending physician or midwife, then the father, householder, or other person 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, ArizonaName added from supplemental report _____
Month, day, year _____
Filed May 28 1926 _____
Local Registrar.Registrar _____
County Registrar.

029-429-425