

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD  
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.

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

1. County of Gila

BUREAU OF VITAL STATISTICS

State Index No. 142<sup>a</sup>

District of \_\_\_\_\_

ORIGINAL CERTIFICATE OF BIRTH

County Registrar No. 130

Town of Miami

or

Local Registrar No. \_\_\_\_\_

City of \_\_\_\_\_

No. Miami - Inop Hook St. \_\_\_\_\_ Ward \_\_\_\_\_  
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Roy Thomas Campbell (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 June 26, 1926  
Month Day Year

8. FATHER Full name Thomas W. Campbell

14. MOTHER Full maiden name Pauline Swift

9. Residence (Usual place of abode) Miami, Arizona  
If non-resident, give place and state.

15. Residence (Usual place of abode) Miami, Arizona  
If non-resident, give place and state.

10. Color or race Cauc. 11. Age at last birthday 28 (Years)

16. Color or race Cauc. 17. Age at last birthday 25 (Years)

12. Birthplace (city or place) Hillsboro, New Mex.  
(State or country)

18. Birthplace (city or place) Ash Grove, Mo.  
(State or country)

13. Occupation Electrician  
Nature of industry Mining

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 \_\_\_\_\_  
(b) Born alive but now dead \_\_\_\_\_  
(c) Stillborn \_\_\_\_\_

21. Were precautions taken against ophthalmia neonatorum? \_\_\_\_\_

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

I hereby certify that I attended the birth of this child, who was stillborn at 4 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 evidence of life after birth.

Signature Cyril M. Brown, M.D. (Physician or midwife)  
Address Miami, Arizona

Given name added from a supplemental report. Filed Aug 3, 1926 E. E. Jinn Local Registrar.

Registered \_\_\_\_\_ Filed \_\_\_\_\_, 19 \_\_\_\_\_ County Registrar.

933-626-723