

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 164
 Registered No. 69

1. PLACE OF BIRTH

County Gila State Arizona
 District or Township Claypool or Village _____
 City Miami No. 12 Claytonwood St. _____ Ward _____
 (If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Violet Mae Horneth { 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 _____ 6. Legitimate? Yes
 5. No., in order of birth _____ 7. Date of birth Feb 15 1928
 Month Day Year

8. FATHER
 Full name Roscoe Frederick Horneth

14. MOTHER
 Full maiden name Leatha Smith

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

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

10. Color or race White

11. Age at last birthday 30 (Years)

15. Color or race White

17. Age at last birthday 26 (Years)

12. Birthplace (city or place) Idaho
 (State or country)

18. Birthplace (city or place) Colorado
 (State or country)

13. Occupation Miner
 Nature of industry Coppering

19. Occupation Housewife
 Nature of industry _____

20. Number of children of this mother. } (a) Born alive and now living 3
 (Taken as of time of birth of child herein certified and including this child). } (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 at 8:54 A m. on the date above stated.
 (Born alive or stillborn)

Signature J. J. Miller

 (Physician or midwife)

Given name added from a supplemental report _____
 Address Miami, Ariz
 Month, day, year _____
 Filed Feb 25 1928 C. E. Brown
 Registrar. Registrar.

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

588-215-377
 521-216