

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 11136

Registered No. 136

1. PLACE OF BIRTH

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

2. Full name of child Charmaine Iris Schuster { 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 April 2 1928  
 Month Day Year

8. FATHER  
 Full name Clark Anson Schuster

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

10. Color or race white  
 11. Age at last birthday 38 (Years)

12. Birthplace (city or place) Elgin Illinois  
 (State or country)

13. Occupation Machinist  
 Nature of industry Copper mine

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 0  
 (b) Born alive but now dead 0  
 (c) Stillborn 0

14. MOTHER  
 Full maiden name Rena Iris Trontner

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

16. Color or race white  
 17. Age at last birthday 19 (Years)

18. Birthplace (city or place) Ionia Iowa  
 (State or country)

19. Occupation Housewife  
 Nature of industry

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 12:35 m. on the date above stated.  
 (Born alive or stillborn)

Signature J. J. Miller  
 \_\_\_\_\_  
 \_\_\_\_\_ (Physician or midwife)

Address Miami, Arizona

Filed Apr 11 1928 R. C. Davis  
 Registrar Registrar

Registrar \_\_\_\_\_  
329-402-939