

SUPPLEMENT ATTACHED

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 130  
Registered No. 349

1. PLACE OF BIRTH

County Gila State Arizona  
District or Township \_\_\_\_\_ or Village \_\_\_\_\_  
City Miami No. P.O. Box 415 Miami, Ariz. Ward \_\_\_\_\_  
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Sharon Clive Speen { 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 \_\_\_\_\_ 6. Legitimate? yes 7. Date of birth June 2 - 1928  
5. No., in order of birth \_\_\_\_\_ Month Day Year

8. FATHER  
Full name William David Speen  
9. Residence Cinnibar Claims near Payson - Arizona  
(Usual place of abode)  
If non-resident, give place and state.

11. MOTHER  
Full maiden name Lura Agatha Holden  
14. Residence Miami  
(Usual place of abode)  
If non-resident, give place and state. Arizona

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

15. Color or race Cauc. 17. Age at last birthday 27 (Years)

12. Birthplace (city or place) Aurora, Mo.  
(State or country)

18. Birthplace (city or place) Alamogorda - New Mex.  
(State or country)

13. Occupation  
Nature of industry Miner

19. Occupation  
Nature of industry Housewife

20. Number of children of this mother: (a) Born alive and now living 5  
(Taken as of time of birth of child herein certified and including this child). (b) Born alive but now dead \_\_\_\_\_  
(c) Stillborn \_\_\_\_\_

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 born alive at 8:30 a.m. on the date above stated.  
(Born alive or stillborn)

Signature Cyril M. Brown M.D.  
Physician (Physician or midwife)

Given name added from a supplemental report \_\_\_\_\_ Address Miami, Arizona  
Month, day, year \_\_\_\_\_ Filed June 11 1928 Registrar Le-E. Tom

Registrar. 225-602-385

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