ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 154

Registered No. 313

1. PLACE OF BIRTH

County Gila State Arizona

District or Township ..... or Village .....

City Miami No. Miami - Inspiration Hospital St., ... Ward

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Sylvia May Joy — 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 .....

5. No., in order of birth .....

6. Legitimate? yes

7. Date of birth July 18 1928 (Month Day Year)

8. FATHER

Full name John Elsie Joy

9. Residence (Usual place of abode) Miami, Arizona

If non-resident, give place and state.

10. Color or race: White

11. Age at last birthday 27 (Years)

12. Birthplace (city or place) .....

(State or country) New Mexico

13. Occupation: Stationary fireman

Nature of industry: Copper mine

14. MOTHER

Full maiden name Lillie Bessie Ross

15. Residence (Usual place of abode) Miami, Arizona

If non-resident, give place and state.

16. Color or race: White

17. Age at last birthday 24 (Years)

18. Birthplace (city or place) Silver City

(State or country) New Mexico

19. Occupation: Housewife

Nature of industry

20. Number of children of this mother 1 (Taken as of time of birth of child herein certified and including this child).

(a) Born alive and now living 1

(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 2:15 A 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 F. F. Miller

M.D.

(Physician or midwife).

Given name added from a supplemental report ..... Month, day, year

Address Miami, Arizona

Registrar.

Filed July 19, 1928 C. E. Troy Registrar.

218-718-392