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

State File No. 179
Registered No. 47

**1. PLACE OF BIRTH**

County Gila State Arizona

District or Township or Village

City Globe No. St. Ward
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Jo-Ann Cochrane { 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 Mar. 18, 1930 (Month Day Year)

**FATHER**

8. Full name Joseph Sampson Cochrane

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

10. Color or race White 11. Age at last birthday 35 (Years)

12. Birthplace (city or place) Lonaconing
(State or country) Maryland

13. Occupation
Nature of industry Printer

**MOTHER**

14. Full maiden name Thelma Josephine Neymeyer

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

16 Color or race White 17. Age at last birthday 29 (Years)

18. Birthplace (city or place) Alamogordo
(State or country) N. Mexico

19. Occupation
Nature of industry Housewife

20. Number of children of this mother 3
(Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living 3
(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 Live (Born alive ~~or stillborn~~) at 7:20 P m. on the date above stated

* 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 C W Adams
Physician.
(Physician or ~~midwife~~).

Address Box 636 Globe, Ariz

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

Registrar

Filed 4/8, 1930 L. E. Wright Registrar

135 - 318 - 357