

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

State File No. 478a
 Registered No. 76

1. PLACE OF BIRTH

County Gila State Arizona
 District or Township _____ or Village _____
 City Globe No. 118 E Cottonwood St. Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child James Michael Curcio
(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 _____ 5. No., in order of birth _____ 6. Legitimate? yes 7. Date of birth April 16, 1930
 Month Day Year

8. FATHER
 Full name Michael Curcio
 9. Residence (Usual place of abode) Globe Arizona
 If non-resident, give place and state. _____
 10. Color or race white
 11. Age at last birthday 23 (Years)
 12. Birthplace (city or place) Rakland California
 (State or country) _____
 13. Occupation Cook
 Nature of industry _____

14. MOTHER
 Full maiden name Alice Darton
 15. Residence (Usual place of abode) Globe 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) La Vague Mexico
 (State or country) _____
 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 Born alive at 3:45 P.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 German C. Bodemer

 (Physician or Midwife)

Given name added from a supplemental report _____
 Month, day, year 135-416-175
 Registrar

Address Globe Arizona
 Filed 5/12, 1930 G. E. W. ...
 Registrar

STATE OF ARIZONA