

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

State File No. 107
 Registered No. 23

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 Georgia Lorraine Martin { 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 Apr. 20, 1930
 Month Day Year

8. FATHER
 Full name George Fielding Martin

14. MOTHER
 Full maiden name Bernice Lucile Sanko

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

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

10. Color or race White 11. Age at last birthday 31 (Years)

16. Color or race White 17. Age at last birthday 20 (Years)

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

18. Birthplace (city or place) Safford Arizona
 (State or country)

13. Occupation
 Nature of industry Labourer

19. Occupation
 Nature of industry Housewife

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 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 12:45 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 C. W. Williams
Physician
(Physician or midwife)

Given name added from a supplemental report. Month, day, year
7/15-4/20-222
 Registrar

Address Box 636 Globe Ariz
 Filed 5/12 1930 G. E. Wightman Registrar