

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD
N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.

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

State File No. 177
Registered No. 207

1. PLACE OF BIRTH

County Pima State Ariz.
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 Dorothy Anne Carriter { 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 10-20-1930
Month Day Year

8. FATHER
Full name Refus Darland Carriter
9. 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)
12. Birthplace (city or place) Water Valley, Miss
(State or country) _____
13. Occupation Auto Top man
Nature of Industry _____

14. MOTHER
Full maiden name Helen Elizabeth Schwarz
15. Residence (Usual place of abode) Globe Ariz.
If non-resident, give place and state. _____
16. Color or race white
17. Age at last birthday 21 (Years)
18. Birthplace (city or place) Globe Ariz.
(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 11:09 A.M. on the date above stated.
(Born alive or stillborn.)

Signature T. S. Harper
Physician
(Physician or Midwife)
Address Globe, Ariz.
Filed 11/9 1930 H. E. Wightman
Registrar Registrar

* 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.

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

Registrar
432-1020-829