

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

State File No. 137
 Registered No. 222

1. PLACE OF BIRTH

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

2. Full name of child Patricia Ann Busse { 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 Nov. 14, 1930
 Month Day Year

8. FATHER Full name Edward Peter Busse

14. MOTHER Full maiden name Helen Marie Klein

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 28 (Years)

16. Color or race White 17. Age at last birthday 22 (Years)

12. Birthplace (city or place) Leigh
 (State or country) Nebraska

18. Birthplace (city or place) Spaulding
 (State or country) Nebraska

13. Occupation Nature of industry Mechanic

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 6 (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 2:50 am. 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. Adams Physician

Given name added from a supplemental report _____ Address Box 636 Globe, Ariz

Month, day, year _____ Filed 12/4, 1930 H. E. Wright Registrar
 Registrar 725-1114-825