ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 140a

Registered No. 43

1. PLACE OF BIRTH

County Globe State Arizona

District or Township ..... or Village .....

City Globe No. 1245 Cupute St. ..... Ward

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Elsie Earnestein Medcalf. (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 April 23, 1931 (Month Day Year)

8. FATHER

Full name General C. Medcalf

9. Residence (Usual place of abode) Globe,

If non-resident, give place and state. Arizona

10. Color or race: White

11. Age at last birthday 34 (Years)

12. Birthplace (city or place) Aron County

(State or country) Missouri

13. Occupation: Miner.

Nature of industry

14. MOTHER

Full maiden name Ida Hatfield.

15. Residence (Usual place of abode) Globe,

If non-resident, give place and state. Arizona

16. Color or race: White

17. Age at last birthday 30 (Years)

18. Birthplace (city or place) Madison County

(State or country) Arkansas

19. Occupation: Housewife.

Nature of industry

20. Number of children of this mother 4

(Taken as of time of birth of child herein certified and including this child.)

(a) Born alive and now living 4

(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 4:50 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 Herman C. Bodemer

Physician (Physician or midwife).

Address Globe, Arizona.

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

..... Registrar

Filed 6/9 1931 G. E. Wightman Mrs Registrar

546-423-984