ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 172

Registered No. 132

1. PLACE OF BIRTH

County: Gila State: Arizona

District or Township: or Village:

City: Globe No. 139 N. Devney St. Ward

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

2. Full name of child: Frank Robert Sanders

(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: June 16 1931 (Month Day Year)

FATHER

8. Full name: Frank R. Sanders

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: 30 (Years)

12. Birthplace (city or place): Fort Stockton

(State or country): Texas

13. Occupation: Electrician

Nature of industry: Miami Copper Co.

MOTHER

14. Full maiden name: Alice Beatrice Lewis

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: 24 (Years)

18. Birthplace (city or place): Mesa

(State or country): Arizona

19. Occupation: Housewife

Nature of industry:

20. Number of children of this mother: 6

(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:

(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 (Born alive or stillborn.) at 10:45 a.m. on the date above stated

Signature: Herman C. Bodemer

Physician (Physician or midwife).

Address: Globe, Arizona

* 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

Filed 8/7, 1931 L. E. Wightman Registrar

622-616-132