ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 117

Registered No. 17

1. PLACE OF BIRTH

County Gila State Arizona

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

City Globe No. Gila 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 James Milford Mercer (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 Sept. 8, 1931 (Month Day Year)

8. FATHER

Full name John Franklin Mercer

9. Residence (Usual place of abode) Globe

If non-resident, give place and state. Ariz.

10. Color or race: White

11. Age at last birthday 37 (Years)

12. Birthplace (city or place) Blacksburg

(State or country) S. C.

13. Occupation

Nature of Industry Electrician

14. MOTHER

Full maiden name Christina Lorena Moelick

15. Residence (Usual place of abode) Globe

If non-resident, give place and state. Ariz.

16. Color or race: White

17. Age at last birthday 36 (Years)

18. Birthplace (city or place) Waverly

(State or country) N. Y.

19. Occupation

Nature of Industry Housewife

20. Number of children of this mother 3

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

(a) Born alive and now living 3

(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 (Born alive or ~~stillborn~~) at 2:15 P m. on the date above stated.

* 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 Wadams

Physician (Physician or ~~Midwife~~)

Given name added from a supplemental report 149-908-342 (Month, day, year)

Address Box 636 Globe Ariz.

Registrar

Filed 10/5 1931 L. E. Wightman Mrs. Registrar