ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 133

Registered No. 41

1. PLACE OF BIRTH

County: Gila State: Arizona

District or Township: or Village:

City: Globe No. 415 So. 3rd St. Ward

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

2. Full name of child: Shirley Ann Mallock. (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: Mar 18 1932 (Month Day Year)

FATHER

8. Full name: J. Dee Mallock

9. Residence (Usual place of abode): Globe, Arizona

If non-resident, give place and state.

10. Color or race: White

11. Age at last birthday: 29 (Years)

12. Birthplace (city or place): Waverly

(State or country): Tennessee

13. Occupation: Salesman

Nature of industry: Arizona Edison Co.

MOTHER

14. Full maiden name: Clara A. Blum

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): El Paso,

(State or country): Texas

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:

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 4:15 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

242-318-324

Registrar

Filed 4/8 1932 L. E. Wightman Registrar

N. B.—In case of more than one child at a birth, a SEPARATE RECORD must be made for each child.

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD