

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

State File No. 88
 Registered No. 71

1. PLACE OF BIRTH

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

2. Full name of child

Robert Orday

(If child is not yet named, make supplemental report, as directed.)

3. Sex of Child

To be answered ONLY
 in event of plural
 births.

4. Twin, triplet or other

5. Legitimate?

7. Date of birth

Female 1st Yes 6-5-1932
 Month Day Year

8. FATHER
 Full name Louis Orday

14. MOTHER
 Full maiden name Francisca Rios

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
Mex.

11. Age at last birthday 38 (Years)

16. Color or race
Mex.

17. Age at last birthday 36 (Years)

12. Birthplace (city or place)
 (State or country)
Mex.

18. Birthplace (city or place)
 (State or country)
Mex.

13. Occupation
 Nature of Industry Laborer

19. Occupation
 Nature of Industry Housewife

20. Number of children of this mother 5
(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 1
 (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 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 J. S. Harper
 Physician (Physician or midwife)

Given name added from a supplemental report _____
 Month, day, year
569-605-692
 Registrar

Address Globe, Arizona
 Filed 7/7 1932 U. S. Weighman
 Registrar

MARGIN RESERVED FOR BINDING
 WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD
 N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.