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

State File No. 23
Registered No. 151

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 Louis Browning, Jr. (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: Dec. 8, 1932 (Month Day Year)

FATHER

8. Full name: James Louis Browning

9. Residence (Usual place of abode): Miami,
If non-resident, give place and state: Ariz.

10. Color or race: White

11. Age at last birthday: 34 (Years)

12. Birthplace (city or place): Martinville
(State or country): ~~[illegible]~~, Tenn.

13. Occupation: Clerk
Nature of industry:

MOTHER

14. Full maiden name: Mary Elizabeth Johnson

15. Residence (Usual place of abode): Miami, -
If non-resident, give place and state: Ariz.

16. Color or race: White

17. Age at last birthday: 34 (Years)

18. Birthplace (city or place): Bedford
(State or country): Ind.

19. Occupation: Housewife
Nature of industry:

20. Number of children of this mother (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: 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 6:20 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: [illegible] Physician (Physician or midwife).

Address: Box 636 Globe, Ariz.

Given name added from a supplemental report

Month, day, year: 127-1208-475
Registrar

Filed 1/6, 1933 G. E. Leighton M.D.
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.