ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 85

Registered No. 5

1. PLACE OF BIRTH

County Gila 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 Eino Matti Jacobson, 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 Jan. 18, 1933 (Month Day Year)

8. FATHER

Full name Eino Matti Jacobson

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 26 (Years)

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

13. Occupation Nature of industry Student

14. MOTHER

Full maiden name Clara Josephine Frick

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 25 (Years)

18. Birthplace (city or place) Odebolt (State or country) Iowa

19. Occupation Nature of industry Housewife

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 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 5:50 a.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. Waldman

Physician (Physician or midwife).

Given name added from a supplemental report Month, day, year

Address Box 636 Globe, Ariz.

Registrar

Filed 2/7, 1933 L. E. Wrightsman Jr. Registrar

SKS-118-362

*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.