ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 131 b

Registered No. 54

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 Carmen Rose Boccalero (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 May 19 1933 (Month Day Year)

8. FATHER

Full name Bert Boccalero

9. Residence (Usual place of abode) Globe

If non-resident, give place and state Italy

10. Color or race White | 11. Age at last birthday 28 (Years)

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

13. Occupation Nature of industry Laborer

14. MOTHER

Full maiden name Annie Guadagnoli

15. Residence (Usual place of abode) Globe

If non-resident, give place and state.

16. Color or race White | 17. Age at last birthday 18 (Years)

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

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 11 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 R. D. Kennedy, M.D. (Physician or Midwife)

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

Address Globe Ariz

Filed 6/5, 1933 L. E. Wightman Registrar

Registrar

326-517-179

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.

WARNING—UNFADING INK—THIS IS A PERMANENT RECORD