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ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. _____

Registered No. 78

1. PLACE OF BIRTH

County Gila State Ariz.

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 Larry Ray Kyle (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 9-8-1933 (Month Day Year)

8. FATHER

Full name William Browning Kyle

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 24 (Years)

12. Birthplace (city or place) El Paso, Tex. (State or country)

13. Occupation Nature of industry Laborer

14. MOTHER

Full maiden name Rose D. Fisher

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 18 (Years)

18. Birthplace (city or place) Pierce Arizona (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 born alive (Born alive or stillborn.) at 8:11 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 T. C. Harper

Physician (Physician or midwife)

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

Address Globe, Arizona

Registrar

Filed NOV 10 1933

Ansen B. [illegible] Registrar

325-908-969

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.