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

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 91

Registered No. 81

1. PLACE OF BIRTH

County Gila State Ariz

District or Township or Village

City Globe No. 316 Pinol St St. Ward

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Hydana Pavlichevich (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 X | 5. No., in order of birth X | 6. Legitimate? yes | 7. Date of birth 9 (Month) 24 (Day) 1933 (Year)

8. Full name nick Pavlichevich (FATHER)

9. Residence (Usual place of abode) 316 Pinol St Globe

If non-resident, give place and state.

10. Color or race white | 11. Age at last birthday 37 (Years)

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

13. Occupation miner Nature of industry

14. Full maiden name Violet Yovetich (MOTHER)

15. Residence (Usual place of abode) 316 Pinol St Globe

If non-resident, give place and state.

16. Color or race white | 17. Age at last birthday 21 (Years)

18. Birthplace (city or place) Globe Ariz (State or country)

19. Occupation Housewife Nature of industry

20. Number of children of this mother 4 (Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living 2
(b) Born alive but now dead 2
(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 at 2 30 A m. 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 Clarence Gunter M.D.

Globe Ariz (Physician or Midwife)

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

Address

Registrar

File NOV 10 1933

Anna Blagg Registrar

878-924-588