STANDARD CERTIFICATE OF BIRTH

1. Place of Birth

County Gila State Arizona

City or Town --

2. Full Name of Child

KEIFER, --

Sex Male Twin? -- Date of Birth Apr.27,1909

FATHER		MOTHER	
Name	KEIFER, L.	~~Maiden~~ Name	KEIFER, Hattie
Color or Race	White	Color or Race	White
Age		Age	
Birthplace	Texas	Birthplace	Arizona

Born alive or Stillborn --

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Doctor or Attendant

Filed Apr. 30, 1909

Registrar

029-1427-9629