1184

ARIZONA TERRITORIAL BOARD OF HEALTH

BUREAU OF VITAL STATISTICS.

CERTIFICATE OF BIRTH.

Ter. Index No. 28 ~~10~~

404

Register No. 3

PLACE OF BIRTH

County of Gila

District of

Town of or City of Globe

(No. ..... St.; ..... Ward)

FULL NAME OF CHILD McClaskey

If child is not named, make Supplemental report on blank obtainable from local registrar.

Born Alive Yes ~~No~~

Sex of Child M | Twin, Triplet or other and Number in order of birth 2nd | Legitimate? yes | Date of Birth June (Month) 2 (Day) 1909 (Year)

FATHER	MOTHER
Full Name: Lewis McClaskey	Full Maiden Name: Pearl Blevins McClaskey
Residence: Globe	Residence: Globe
Color or Race: White — Age at last Birthday 23 (Years)	Color or Race: White — Age at last Birthday 21 (Years)
Birthplace: Mo	Birthplace: Ind Ter.
Occupation: Smelterman	Occupation: Housewife

Number of child of this mother 2 | Number of children, of this mother, now living 1 | Were precautions taken against Ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of above child; and that it occurred on June 2nd, 1909, at 2 a. M

*When there is no attending physician or midwife, then the householder should make this return. See instructions on back.

(Signature) R D Kennedy

(Attending physician, midwife, householder. *)

Given or christian name added from a supplemental report ..... 19.....

Filed June 5 1909

Address Globe Ariz

B G Fox MD

LOCAL REGISTRAR.

Filed July 1 1909

B G Fox MD

COUNTY REGISTRAR.

COUNTY REGISTRAR.