1514

ARIZONA TERRITORIAL BOARD OF HEALTH

BUREAU OF VITAL STATISTICS.

CERTIFICATE OF BIRTH.

Ter. Index No. 75

Register No. 112

PLACE OF BIRTH

County of Gila

District of

Town of or City of Globe

(No. St.; Ward)

FULL NAME OF CHILD Chas Davis

Born Alive Yes No

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

Sex of Child	Twin, Triplet or other	and Number in order of birth	Legitimate?	Date of Birth (Month) (Day) (Year)
M		1	yes	Nov 3 1909

FATHER		MOTHER	
Full Name	Chas W Davis	Full Maiden Name	Winnie Black Davis
Residence	E Globe	Residence	E Globe
Color or Race	white	Color or Race	White
Age at last Birthday (Years)	34	Age at last Birthday (Years)	19
Birthplace	Term	Birthplace	Tex
Occupation	Saloon keeper	Occupation	Housewife

Number of child of this mother 1 | 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 Nov 3, 1909, at 6 P.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 Nov 5 1909

Address Globe

B G Fox M.D.
LOCAL REGISTRAR.

Filed Dec 1 1909

B G Fox M.D.
COUNTY REGISTRAR.

COUNTY REGISTRAR.

642-1103-622

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. This certificate must be filed by the attending Physician or Midwife with the Local registrar within 5 days after birth.