2600

ARIZONA TERRITORIAL BOARD OF HEALTH

BUREAU OF VITAL STATISTICS.

ORIGINAL CERTIFICATE OF BIRTH.

Ter. Index No. 61

Register No. 26

PLACE OF BIRTH

County of Gila

District of

Town of Globe

or

City of

(No. Cupriite St.; Ward)

FULL NAME OF CHILD John Frances Sullivan — Born Alive Yes ~~No~~

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

Sex of Child M — Twin, Triplet or other — and — Number in order of birth — Legitimate? yes — Date of Birth Feb (Month) 4th (Day) 1910 (Year)

FATHER		MOTHER	
Jerry Michael Sullivan		Full Maiden Name Ida May Hart	
Residence Cork, Ireland		Residence Globe, Ariz	
Color or Race W	Age at last Birthday 33 (Years)	Color or Race W	Age at last Birthday 27 (Years)
Birthplace Cork, Ireland		Birthplace Upper Sandusky, Ohio	
Occupation Plumber		Occupation Housewife	

Number of child of this mother 2 — Number of children, of this mother, now living 2 — 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 Feb 4, 1910, at 5:45 PM

*When there is no attending physician or midwife, then the householder must make this return.

(Signature) B. N. Scott (Attending physician, midwife, householder, *)

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

Filed Feb 7 1910 — Address Globe

B. G. Fox M.D. LOCAL REGISTRAR.

~~A TRUE COPY.~~

125-204-983 COUNTY REGISTRAR.

Filed Mar 1 1910 — B. G. Fox M.D. COUNTY REGISTRAR

Write Only,

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.