2629

...ly, with Unfading Ink.—This is a Permanent Record.

N. B.—In case of more than ... child at a birth, a SEPARATE RE... must be made for each, and the number of each, in order of birth, stated. This certificate must be filed by the at TUR... Physician or Midwife with the Local registrar within 5 days after birth.

ARIZONA TERRITORIAL BOARD OF HEALTH

BUREAU OF VITAL STATISTICS.

ORIGINAL CERTIFICATE OF BIRTH. Ter. Index No. 83

PLACE OF BIRTH

County of Gila

District of

Town of or City of Globe

Register No. 36

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

FULL NAME OF CHILD Elsie Kent — Born Alive Yes No

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

Sex of Child Female — Twin, Triplet or other ✓ and Number in order of birth ✓ — Legitimate? Yes — Date of Birth Feb (Month) 28 (Day) 1910 (Year)

FATHER		MOTHER	
Full Name	Nichols Thomas Kent	Full Maiden Name	Mary Ann Mitchell
Residence	428 Nofstger Hill	Residence	Same
Color or Race	White	Color or Race	White
Age at last Birthday	39 (Years)	Age at last Birthday	30 (Years)
Birthplace	Portreath, England	Birthplace	Beacon, England
Occupation	Miner	Occupation	Housewife

Number of child of this mother 4 — Number of children, of this mother, now living 4 — 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. 28, 1910, at 6 9 M

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

(Signature) C. T. Sturgeon
(Attending physician, midwife, householder.*)

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

Filed Mar 1 1910 — Address Globe

A TRUE COPY. B. G. Fox NW W
LOCAL REGISTRAR.

523-228-443
COUNTY REGISTRAR.

Filed Mar 1 1910 — B. G. Fox NW W
COUNTY REGISTRAR