555

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

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.

ARIZONA TERRITORIAL BOARD OF HEALTH

BUREAU OF VITAL STATISTICS.

ORIGINAL CERTIFICATE OF BIRTH.

Ter. Index No. 86

Register No. 79

PLACE OF BIRTH

County of Gila

District of

Town of / of City of Globe

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

FULL NAME OF CHILD Earl Hunnecott — Born Alive Yes No

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

Sex of Child Male — Twin, Triplet or other — and Number in order of birth 1 — Legitimate? Yes — Date of Birth Apr (Month) 21 (Day) 1910 (Year)

FATHER	MOTHER
Full Name: Frank Hunnecott	Full Maiden Name: Susan Hesland
Residence: Copper Hill Ariz.	Residence: Copper Hill Ariz.
Color or Race: White — Age at last Birthday 33 (Years)	Color or Race: White — Age at last Birthday 31 (Years)
Birthplace: Texas	Birthplace: Texas
Occupation: Miner	Occupation: Housewife

ARIZONA TERRITORIAL BOARD OF HEALTH BUREAU OF VITAL STATISTICS Received at Phoenix MAY 1-1 1910

Number of child of this mother 5 — Number of children, of this mother, now living 5 — 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 Apr 21, 1910, at 10 a.M

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

(Signature) J. L. Wales (Attending physician, ~~midwife, householder~~, *)

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

Filed April 25 1910 — Address Globe Ariz.

B. G. Fox — LOCAL REGISTRAR.

A TRUE COPY.

583-421-284 — COUNTY REGISTRAR.

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