910

Write P[illegible]y, with Unfading Ink.—This is a Permanent Record.

[illegible]ase 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. 95

PLACE OF BIRTH

County of Gila

District of

Town of or City of Globe

Register No. 99

(No. St.; Ward)

FULL NAME OF CHILD Elsie May Chapman — 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 May (Month) 5 (Day) 1910 (Year)

FATHER	MOTHER
Full Name: Willie Chapman	Full Maiden Name: Jannie Hancock
Residence: 1070 High St	Residence: Same
Color or Race: White — Age at last Birthday 23 (Years)	Color or Race: White — Age at last Birthday 23 (Years)
Birthplace: Cornwall, England	Birthplace: Cornwall, Eng.
Occupation: Miner	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

ARIZONA TERRITORIAL BOARD OF HEALTH BUREAU OF VITAL STATISTICS Received at PHOENIX JUN 13 1910

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of above child; and that it occurred on May 5, 1910, at 1 P 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 May 10 1910 — Address B. G. Fox — LOCAL REGISTRAR.

A TRUE COPY.

535-505-182 — COUNTY REGISTRAR.

Filed June 1 1910 — B. G. Fox MD — COUNTY REGISTRAR.