933

ARIZONA TERRITORIAL BOARD OF HEALTH

BUREAU OF VITAL STATISTICS.

ORIGINAL CERTIFICATE OF BIRTH. Ter. Index No. 111

Register No. 111

PLACE OF BIRTH

County of Gila

District of

Town of or City of Globe

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

FULL NAME OF CHILD Edward Charles Johns — 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 ✓ | Legitimate? Yes | Date of Birth May (Month) 22 (Day) 1910 (Year)

FATHER		MOTHER	
Full Name	William Johns	Full Maiden Name	Sarah Bice
Residence	School Hill	Residence	Same
Color or Race	White	Color or Race	White
Age at last Birthday (Years)	30	Age at last Birthday (Years)	
Birthplace	Cornwall, Eng.	Birthplace	Negaunee Mich
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

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 22, 1910, at 8 a 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 26 1910 Address

~~A TRUE COPY.~~ B. G. Fox LOCAL REGISTRAR.

512-522-225 COUNTY REGISTRAR. Filed June 1 1910 B. G. Fox M.D. COUNTY REGISTRAR.

...ainly, w... ...ding Ink.—This is a Permanent Record.

...ase of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each, in order birth, stated. This certificate must be filed by the attending Physician or Midwife with the Local registrar with 5 days after birth.