967

WRITE PLAINLY, 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, order of birth, stated. This certificate must be filed by the attending Physician or Midwife with the Local Registrar within 5 days after birth.

PLACE OF BIRTH

County of Gila

District of

Town of

or

City of Globe

ARIZONA TERRITORIAL BOARD OF HEALTH

BUREAU OF VITAL STATISTICS.

ORIGINAL CERTIFICATE OF BIRTH.

Ter. Index No. 96

Co. Register No. 208

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD Mary Pourrock

{Born / Alive} YES / NO

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

Sex of Child F | Twin, Triplet or other plural } and { Number; in order of birth | Legitimate? yes | Date of Birth July (Month) 16 (Day) 1911 (Yr.)

FATHER		MOTHER	
Full Name	Paul Pourrock	Full Maiden Name	Jennie Corgat
Residence	Globe Ariz	Residence	Same
Color or Race	W	Color or Race	W
Age at last Birthday (Years)	29	Age at last Birthday (Years)	28
Birthplace	Italy	Birthplace	Italy
Occupation	Miner	Occupation	Housewife

Number of child of this mother 2 | Number of children, of this mother, now living 2 | Were Precautions taken against Ophthalmia neonatorum?

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of above child; and that it occurred on, July 16 1911, at 11.30 AM

(Signature) Paul Rock Tailier
(Attending physician, midwife, householder.*)

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

Address Globe Ariz

Given or christian name added from a supplemental report 191

Filed Oct 21 1911 B. G. Fox
LOCAL REGISTRAR.

472-716-133
COUNTY REGISTRAR.

Filed Nov 5 1911 B. G. Fox M.D.
COUNTY REGISTRAR.