530

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.

PLACE OF BIRTH

County of Gila

District of

Town of

or

City of Globe

ARIZONA TERRITORIAL BOARD OF HEALTH

BUREAU OF VITAL STATISTICS. Ter. Index No. 64

ORIGINAL CERTIFICATE OF BIRTH. Co. Register No. 3

Local Registrar's No. 3

(No. St; Ward)

FULL NAME OF CHILD Jesse Gustave Wolf

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

Born Alive YES ~~NO~~

Sex of Child Male | Twin, Triplet or other ✓ | and | Number; in order of birth ✓ | Legitimate? Yes | Date of Birth Jan. 4 1912 (Month) (Day) (Yr.)

FATHER		MOTHER	
Full Name	Rudolph Wolf	Full Maiden Name	Helma Pruett
Residence	Bone St.	Residence	Same
Color or Race	White	Color or Race	White
Age at last Birthday	22 (Years)	Age at last Birthday	15 (Years)
Birthplace	Nebraska	Birthplace	Texas
Occupation	Teamster	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

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of above child; and that it occurred on, Jan 4 1912, at 8 9 M

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

(Signature) C. T. Stringer

(Attending physician, midwife, householder. *)

Given or christian name added from a supplemental report 191

Address

Filed Jan 8 1912 B. G. Fox LOCAL REGISTRAR.

166-104-873 COUNTY REGISTRAR

Filed Feb 5 1912 B. G. Fox M.D. COUNTY REGISTRAR.