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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 Roosevelt

Town of Roosevelt

or

City of ..... (No. ..... St; ..... Ward)

ARIZONA TERRITORIAL BOARD OF HEALTH

BUREAU OF VITAL STATISTICS. 95 Ter. Index ~~[illegible]~~

ORIGINAL CERTIFICATE OF BIRTH.

Co. Register No. 28

Local Registrar's No. 1

FULL NAME OF CHILD Herbert Kennet Holm

Born / Alive YES / ~~NO~~

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

Sex of Child	Twin, Triplet or other plural	and	Number; in order of birth	Legitimate?	Date of Birth
male				yes	February (Month) 25 (Day) 1912 (Yr.)

FATHER		MOTHER	
Full Name	Edgar Holm	Full Maiden Name	Agnes Marie Nielsen
Residence	Roosevelt Ariz	Residence	Roosevelt Ariz
Color or Race	White	Color or Race	White
Age at last Birthday (Years)	34	Age at last Birthday (Years)	35
Birthplace	Denmark	Birthplace	Denmark
Occupation	Physician	Occupation	Housewife

Number of child of this mother 3 | Number of children, of this mother, now living 3 | 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, Feb 25th 1912, at 11 A.M.

(Signature) E. Holm M.D.
(Attending physician, midwife, householder.*)

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

Address Roosevelt Ariz

Given or christian name added from a supplemental report ..... 191.....

Filed Feb 27 1912 — F. F. Frazier, LOCAL REGISTRAR.

844-225-155 COUNTY REGISTRAR. — Filed Feb 29 1912 — B. G. Fox M.D. COUNTY REGISTRAR.