9890

PLACE OF BIRTH

County of Gila

District of Globe

Town of

or

City of Globe

# ARIZONA TERRITORIAL BOARD OF HEALTH

*BUREAU OF VITAL STATISTICS.*

**ORIGINAL CERTIFICATE OF BIRTH.**

Ter. Index No. 80 ~~[illegible]~~

Co. Register No. 64

Local Registrar's No. 53

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

FULL NAME OF CHILD Still Born

Born ~~YES~~ / Alive ~~NO~~ 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 |
|---|---|---|---|---|---|
| Female | ✓ | | ✓ | Yes | April 6 1912 (Month) (Day) (Yr.) |

| FATHER | | MOTHER | |
|---|---|---|---|
| Full Name | Michael Edward McCarthy | Full Maiden Name | Aline Wright |
| Residence | Cor Cedar & Sutherland | Residence | Same |
| Color or Race | White | Color or Race | White |
| Age at last Birthday | 41 (Years) | Age at last Birthday | 31 (Years) |
| Birthplace | Negaunee, Michigan | Birthplace | Winnipeg, Canada |
| Occupation | Mine Manager | Occupation | Housewife |

Number of child of this mother 5 | Number of children, of this mother, now living 4 | 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,* April 6 *191*2*, at* 12 *M*

*(Signature)* C. T. Sturgeon
*(Attending physician, midwife, householder.*)*

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

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

*Address* .....

*Filed* Apr 24 *1912* B. G. Fox
LOCAL REGISTRAR.

048-406-663
COUNTY REGISTRAR.

*Filed* May 1 *1912* B. G. Fox MD
COUNTY REGISTRAR.

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.