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...—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and t... number of each, in order of birth, stated. This certificate must be filed by the attending Physician o... Midwife with each local Registrar within 5 days after birth.

PLACE OF BIRTH

County of Cochise

District of

Town of

or

City of Bisbee

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS.

ORIGINAL CERTIFICATE OF BIRTH.

State Index No. 55 ~~327~~

Co. Register No. 226

Local Registrar's No.

(No. Brewery Gulch St; Ward)

FULL NAME OF CHILD { 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	and	Number in order of birth	Legitimate?	Date of Birth
Male			3	Yes	June 28 1912 (Month) (Day) (yr.)

FATHER		MOTHER	
Full Name	Elmer Jos. Leftault	Full Maiden Name	Mary Dragovich
Residence	Bisbee	Residence	Bisbee
Color or Race	White	Color or Race	Mexican
Age at last Birthday	28 (Years)	Age at last Birthday	21 (Years)
Birthplace	Minnesota	Birthplace	Mexico
Occupation	Hostler	Occupation	Housewife

Number of child of this mother 3 | Number of children, of this mother, now living 3 | Were precautions taken against Ophthalmia neonatorum? No

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of above child; and that it occurred on 6/28 1912, at A.M.

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

(Signature) Chas. F. Hawley M.D.
(Attending physician, midwife, householder.*)

Given or christian name added from a supplemental report 191

Address Bisbee Ariz.

Filed 6-30 1912

R. H. Kent
LOCAL REGISTRAR.

633-628-478
COUNTY REGISTRAR.

Filed 7/24 1912

A True Copy

R. L. Miner
COUNTY REGISTRAR.