4943

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 each local Registrar within 5 days after birth.

PLACE OF BIRTH

County of Gila

District of Globe

Town of Copper Hill

or

City of Globe

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS.

ORIGINAL CERTIFICATE OF BIRTH.

State Index No. 121

Co. Register No. 217

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD Dorothy Mabel Anderson

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
Female				yes	Oct. 26, 1912 (Month) (Day) (yr.)

FATHER	MOTHER
Full Name: William M. Anderson	Full Maiden Name: Edith M. Haggard
Residence: Copper Hill, Ariz.	Residence: Copper Hill, Ariz.
Color or Race: White — Age at last Birthday 36 (Years)	Color or Race: White — Age at last Birthday 32 (Years)
Birthplace: Minn.	Birthplace: Minn.
Occupation: Mechanic	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 Oct. 26, 1912, at 2.45 A.M.

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

(Signature) J. L. Wales

(Attending physician ~~midwife, householder~~)

Given or christian name added from a supplemental report 191

Address

Filed Oct 29 1912 — B. G. Fox, LOCAL REGISTRAR.

A True Copy

Filed Nov 5 1912 — B. G. Fox M.D., COUNTY REGISTRAR.

415-1026-584

COUNTY REGISTRAR.