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ARIZONA STATE BOARD OF HEALTH

96

BUREAU OF VITAL STATISTICS.

ORIGINAL CERTIFICATE OF BIRTH.

PLACE OF BIRTH

County of Gila

District of Globe

Town of Copper Hill

or

City of

State Index No. 100

Co. Register No. 78

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD James Stell Jacka

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	✓		✓	Yes	April 23 1913 (Month) (Day) (yr.)

FATHER		MOTHER	
Full Name	James Jacka	Full Maiden Name	Danilla Stell
Residence	Copper Hill	Residence	Same
Color or Race	White	Color or Race	White
Age at last Birthday	44 (Years)	Age at last Birthday	37 (Years)
Birthplace	Clifton, Michigan	Birthplace	Harrison, Arkansas
Occupation	Miner	Occupation	Housewife

Number of child of this mother 2 | 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, April 29 1913, at 10 P.M.

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

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

Given or christian name added from a supplemental report 191

Address

Filed 4/26 1913 B. G. Fox LOCAL REGISTRAR.

111-423-223 COUNTY REGISTRAR.

Filed 5/5 1913 A True Copy B. G. Fox M.D. COUNTY REGISTRAR.

...in case of more than one child at a birth, this certificate must be filed by the attending Physician or ...mber 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.