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ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS.

ORIGINAL CERTIFICATE OF BIRTH.

PLACE OF BIRTH

County of Gila

District of Globe

~~Town~~ of

or

City of Globe

State Index No.

Co. Register No. 79

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD Herman Roland Wimbush

Born / Alive: YES / ~~NO~~

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

Sex of Child: Male

Twin, Triplet or other: ✓ and Number in order of birth: ✓

Legitimate? Yes

Date of Birth: April 24 1913 (Month) (Day) (yr.)

FATHER		MOTHER	
Full Name	Tom James Wimbush	Full Maiden Name	Nellie Prosper
Residence	359 Tonto St	Residence	Same
Color or Race	White	Color or Race	Same
Age at last Birthday	27 (Years)	Age at last Birthday	21 (Years)
Birthplace	Cuero, Texas	Birthplace	Portland, Oregon
Occupation	Carpenter	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 April 24 1913, at 9 9 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.

868-424-579 COUNTY REGISTRAR.

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

—In case of more than one child at a birth, a separate Registrar 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.