

PLACE OF BIRTH

County of Gila  
District of Globe  
Town of \_\_\_\_\_  
or \_\_\_\_\_  
City of Globe

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS  
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 128  
Co. Register No. 20  
Local Registrar's No. \_\_\_\_\_

(No. \_\_\_\_\_ St; \_\_\_\_\_ Ward)

FULL NAME OF CHILD

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

Born } YES  
Alive } NO

Sex of Child Female Twin, Triplet or other \_\_\_\_\_ and Number in order of birth 1 Legitimate? ye Date of Birth January 21 1914  
(Month) (Day) (Yr.)

FATHER  
Full Name Peter Milardovich  
Residence Pinal St. Globe Ariz.  
Color or Race White Age at last Birthday 27 (Years)  
Birthplace Smocky Darmontcia Austria  
Occupation Miner

MOTHER  
Full Maiden Name Mary Setka  
Residence Pinal St. Globe Ariz.  
Color or Race White Age at last Birthday 2 (Years)  
Birthplace Smocky Darmontcia Austria  
Occupation Housewife

Number of child of this mother... 1 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 Jan. 21 1914, at 12 M.  
(When there is no attending physician or midwife, then the householder should make this return.)

(Signature) Alvin Purnee M.D.  
(Attending physician, midwife, householder.\*)

Given or christian name added from a supplemental report \_\_\_\_\_ 191\_\_\_\_

Address Globe Arizona

Filed 1/25 1914

B.G. Jay  
LOCAL REGISTRAR.

048-121-471  
COUNTY REGISTRAR.

Filed 2/5 1914

A True Copy  
B.G. Jay M.D.  
COUNTY REGISTRAR.

the number of each, in order of birth, stated. I use certificate with each local Registrar within 5 days after birth.