657

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. 81

Co. Register No. 34

Local Registrar's No. .....

(No. ..... 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
Female	\		\	Yes	Feb. (Month) 7 (Day) 1914 (Yr.)

FATHER		MOTHER	
Full Name	Carl Fitz Davis	Full Maiden Name	Minnie Benninger
Residence	Globe	Residence	Globe
Color or Race	White	Color or Race	White
Age at last Birthday	29 (Years)	Age at last Birthday	21 (Years)
Birthplace	Maine	Birthplace	California
Occupation	Electrician	Occupation	Housewife

Number of child of this mother 2 | Number of children, of this mother, now living 2 | 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 Feb. 7 1914, at 2.50 A.M.

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

(Signature) Ben C Schnell
(Attending physician, midwife, householder.*)

Address Globe Ariz.

Given or christian name added from a supplemental report ..... 191....

Filed 2/10 1914 — B G Fox
LOCAL REGISTRAR.

A True Copy

042-207-429
COUNTY REGISTRAR.

Filed 3/5 1914 — B G Fox W.O.
COUNTY REGISTRAR.

Midwife with each local Registrar within 5 days after birth.