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ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 92 ~~257~~

Co. Register No. 43

Local Registrar's No.

PLACE OF BIRTH

County of Gila

District of Globe

Town of or City of Globe

(No. St; Ward)

FULL NAME OF CHILD Ralph Charles Bailey

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 Feb (Month) 17 (Day) 1914 (Yr.)

FATHER		MOTHER	
Full Name	Charles Bailey	Full Maiden Name	Jennie Velasco
Residence	185 Mesquite St	Residence	Same
Color or Race	White	Color or Race	White
Age at last Birthday	30 (Years)	Age at last Birthday	21 (Years)
Birthplace	~~Bt~~ Helena, Mont	Birthplace	Phoenix Ariz
Occupation	Blacksmith	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 Feb 17 1914, at 59 M.

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

(Signature) O. T. Sturgeon
(Attending physician, midwife, householder.*)

Given or christian name added from a supplemental report 191

Address

Filed 2/20 1914 B G Fox LOCAL REGISTRAR.

A True Copy B G Fox MD COUNTY REGISTRAR.

Filed 3/5 1914

929-217-156
COUNTY REGISTRAR.

the number of each, in order of birth, stated. This certificate must be filed by the attending Midwife with each local Registrar within 5 days after birth.