

PLACE OF BIRTH

County of Maricopa
District of _____
Town of Phoenix
or
City of _____

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

State Index No. 195 50

ORIGINAL CERTIFICATE OF BIRTH

Co. Register No. 453

Local Registrar's No. 2431

(No. RR 103 St; _____ Ward)

FULL NAME OF CHILD

Boy Archer

Born NO
Alive NO

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

Sex of Child Female Twin, Triplet or other Single and Number in order of birth 1 Legitimate? yes Date of Birth 6-6-1914
(Month) (Day) (Yr.)

FATHER
Full Name Gray Archer
Residence Phoenix
Color or Race white Age at last Birthday 28
(Years)
Birthplace N. C.
Occupation Bank Clerk

MOTHER
Full Maiden Name Pearl Irwin
Residence Phoenix
Color or Race white Age at last Birthday 26
(Years)
Birthplace N. C.
Occupation House wife

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 do by certify that I attended the birth of above child; and that it occurred on 6/6 1914, at 7:30 P. M.
(When there is no attending physician or midwife, then the householder should make this return.)

(Signature) [Signature]
(Attending physician, midwife, householder.*)

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

JUN 13 1914 Address Phoenix, Ariz
Filed.....191.....

019-606-795
COUNTY REGISTRAR.

Filed 7/7 1914 A True Copy [Signature]
LOCAL REGISTRAR.
COUNTY REGISTRAR.

the number of each, in order of birth, in Arizona State Board of Health, Bureau of Vital Statistics, and the number of each local Registrar within 5 days after birth.