ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 101

Co. Register No. 107

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 Floyd LaVerne Robertson

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

Born Alive: YES ~~NO~~

Sex of Child	Twin, Triplet or other	and	Number in order of birth	Legitimate?	Date of Birth (Month) (Day) (Yr.)
Male	Other		1	yes	Apr. 18 1915

FATHER	MOTHER
Full Name: Irving F. Robertson	Full Maiden Name: Cora Temple
Residence: Globe, Ariz.	Residence: Globe, Ariz.
Color or Race: White	Color or Race: White
Age at last Birthday: 22 (Years)	Age at last Birthday: 18 (Years)
Birthplace: Florida	Birthplace: New Mexico.
Occupation: Fireman	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 Apr. 18 1915, at 11.15 A. M.

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

(Signature) [illegible]

(Attending physician, ~~midwife, householder~~.*)

Address

* Given or christian name added from a supplemental report 191

Filed May 20 1915 — [illegible] LOCAL REGISTRAR.

695-418-335 COUNTY REGISTRAR.

Filed Jun 5 1915 — A True Copy [illegible] COUNTY REGISTRAR.

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