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PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS 133 128

State Index No. 900a

ORIGINAL CERTIFICATE OF BIRTH

Co. Register No. 414

Local Registrar's No. 1

County of Gila

District of Winkleman

Town of Winkleman

or

City of

(No. ..... St; ..... Ward)

FULL NAME OF CHILD Lawrence E. Cooper

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 (Month) (Day) (Yr.)
M				Yes	July 13th 1916

FATHER		MOTHER	
Full Name	Rexall C. Cooper	Full Maiden Name	Audrey Parkinson
Residence	Winkleman	Residence	Winkleman
Color or Race	Am — Age at last Birthday 23 (Years)	Color or Race	Am — Age at last Birthday 21 (Years)
Birthplace	New Mex	Birthplace	Michigan
Occupation	Smelter	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 July 13 1916 at 2:30 A. M.

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

(Signature) Charles H. Gowan

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

Address Hayden

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

Filed July 15 1916

W. Roberts

LOCAL REGISTRAR.

A True Copy

[illegible] 3-175

COUNTY REGISTRAR.

Filed Jan 10 1917

B. G. Fox M.D.

COUNTY REGISTI