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PLACE OF BIRTH
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ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 32
7 Co. Register No. 1
Local Registrar's No. 17

(No. St; Ward)

LL NAME OF CHILD Marvine Anderson — Born / Alive — YES

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

of ild	~~Twin, Triplet~~ or other	and	Number in order of birth	Legitimate?	Date of Birth
Female				Yes	May 9, 1917 (Month) (Day) (Yr)

FATHER		MOTHER	
ll ame	Albert Franklin Anderson	Full Maiden Name	Cora Sherwood
sidence	St. Johns, Ariz.	Residence	St. Johns, Ariz.
lor Race	White — Age at last Birthday 27 (Years)	Color or Race	White — Age at last Birthday 26 (Years)
rthplace	St. Johns, Arizona	Birthplace	St. Johns, Ariz.
ccupation	Pharmacist	Occupation	Housewife

ber 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*

hereby certify that I attended the birth of the above child; and that it occurred on May 9 1917, at 8:30 A.M.

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

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

Given or Christian name added from a upplemental report 191

Address T. C. Sherwood St. Johns, Ariz.

Filed 7/1 1917 — LOCAL REGISTRAR.

415-509-324 COUNTY REGISTRAR.

Filed Aug 10 1917 — A True Copy — T. J. Bauldin COUNTY REGISTRAR.