

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

PLACE OF BIRTH Globe
 County of Globe
 District of Globe
 Town of Globe
 or Globe
 of Globe (No. _____ St; _____ Ward)

State Index No. _____
 Co. Register No. 3051
 Local Registrar's No. _____

Full Name of Child John Wilmont Walker } Born } YES
 Child is not named, make Supplemental Report on blank obtainable from local registrar. } Alive } ~~NO~~

Sex of Child <u>Male</u>	Twin, Triplet or other _____	and _____	Number in order of birth _____	Legitimate? <u>yes</u>	Date of Birth <u>July 22 1917</u> (Month) (Day) (Yr.)
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FATHER		MOTHER	
Name <u>Andrew J. Walker</u>	Full Maiden Name <u>Marie Payden</u>	Name <u>Marie Payden</u>	Full Maiden Name <u>Marie Payden</u>
Residence <u>Globe, Ariz.</u>	Residence <u>Globe, Ariz.</u>	Residence <u>Globe, Ariz.</u>	Residence <u>Globe, Ariz.</u>
Color or Race <u>White</u>	Age at last Birthday <u>31</u> (Years)	Color or Race <u>White</u>	Age at last Birthday <u>35</u> (Years)
Birthplace <u>Galena, Kansas</u>	Occupation <u>Chiroprapist</u>	Birthplace <u>Hans Prairie, Missouri</u>	Occupation <u>Housewife</u>

Number of children 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 the above child; and that it occurred on July 22 1917, at 8:40 A.M.

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

(Signature) Alvin Kirmser M.D.
 (Attending physician, midwife, householder.)*

Address Globe, Ariz.

Filed July 30 1917 LOCAL REGISTRAR.
R. S. Sox

Filed Aug 6 1917 COUNTY REGISTRAR.
R. S. Sox

91-722-475
 COUNTY REGISTRAR.