1027

PLACE OF BIRTH

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ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS 138 State Index No. 720

ORIGINAL CERTIFICATE OF BIRTH

Co. Register No. 581

Local Registrar's No.

(No. St; Ward)

L NAME OF CHILD Gaspar Chodini { Born Alive } YES ~~NO~~

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

of d Male	Twin, Triplet or other { and } Number in order of birth	Legitimate Yes	Date of Birth Aug 30 1917 (Month) (Day) (Yr.)	

FATHER		MOTHER	
ae Leonis Chodini		Full Maiden Name Inez Teresa	
esidence Globe		Residence Globe	
olor Race White	Age at last Birthday 34 (Years)	Color or Race White	Age at last Birthday 31 (Years)
rth Place Italy		Birthplace Italy	
cupation Millwright		Occupation Housewife	

mber of child of this mother 2 | Number of Children, of this mother, now living 2 | Were precautions taken against Ophthalmia neonatorum? no

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

hereby certify that I attended the birth of the above child; and that it occurred on Aug 30 1917, at 6 10 A.M.

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

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

Address Globe

Given or Christian name added from a supplemental report 191

Filed Sept 6 1917 B. G. Fox
LOCAL REGISTRAR.

A True Copy

Filed Sept 6 1917 B. G. Fox
COUNTY REGISTRAR.

139-830-631
COUNTY REGISTRAR.