21-1

PLACE OF BIRTH

County of Gila

District of

Town of Globe

or

City of

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 149

Co. Register No. 107

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD John Lomax Clark

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
male				Y	March 14 1919 (Month) (Day) (Yr.)

FATHER	MOTHER
Full Name: Richmond O. Clark	Full Maiden Name: Sarah McKeown
Residence: Noflager Hill	Residence: Noflager Hill
Color or Race: white — Age at last Birthday: 36 (Years)	Color or Race: white — Age at last Birthday: 21 (Years)
Birthplace: Coleman city Ky	Birthplace: house wife N. York city
Occupation: Rail ~~rade~~ road work	Occupation:

Number of child of this mother 3 | 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 March 14 191, at 10 A. M.

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

(Signature) C Gunter

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

Address Globe

Given or christian name added from a supplemental report 191

Filed Mar 16 1919 B. G. Fox LOCAL REGISTRAR.

132-314-245 COUNTY REGISTRAR.

Filed Apr 5 1919 A True Copy B. G. Fox COUNTY REGISTRAR.