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ARIZONA STATE BOARD OF HEALTH
 BUREAU OF VITAL STATISTICS

State Index No. 186
 Co. Registrar's No. 141
 Local Registrar's No. _____

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

FULL NAME OF CHILD Helen Maria Lee Born USA
 If child is not named, make Supplemental Report on blank obtainable from local registrar. Alive USA

Sex of Child	<u>Female</u>	Twin, Triplet or other		and	Number in order of birth	Legitimate? <u>yes</u>	Date of Birth	<u>3</u> Month	<u>29</u> Day	<u>1919</u> Yr.
Full Name	FATHER <u>Joseph D. Lee</u>					MOTHER <u>Harriet Grover</u>				
Residence	<u>Globe</u>					<u>Globe</u>				
Color or Race	<u>White</u>					<u>White</u>				
Age at last Birthday	<u>30</u> Years					<u>21</u> Years				
Birthplace	<u>New Mexico</u>					<u>Arizona</u>				
Occupation	<u>Blacksmith</u>					<u>Housewife</u>				
Number of child of this Mother	<u>3</u>		Number of Children, of this mother, now living	<u>3</u>		Were precautions taken against Ophthalmia neonatorum?	<u>yes</u>			

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child; and that it occurred on 3/29 1919, at 8:30P M.

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

Signature L. E. Wightman M.D.
 Attending physician, midwife, householder.

Given or Christian name added from a supplemental report _____ 1911

Address Globe, Arizona

Filed Mar 31 1919 B. G. Jay LOCAL REGISTRAR.

Filed Apr 5 1919 B. G. Jay COUNTY REGISTRAR.

835-329-879 COUNTY REGISTRAR.

A True Copy