4685

MARGIN RESERVED FOR BINDING

Write plainly with Unfading Ink—This is a permanent Record.

N. B.—In case of more than one child at birth, a SEPARATE RETURN must be made for each, the number of each, in order of birth, stated. This certificate must be filed by the attending Physician or midwife with the local Registrar within 5 days after birth.

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 118

Co. Registrar's No. 370

Local Registrar's No. .....

PLACE OF BIRTH

County of Gila

District of Globe

Town of or City of Globe

(No. ..... St; ..... Ward)

FULL NAME OF CHILD Evelyn Connor Bradford

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

Born Alive: YES ~~NO~~

Sex of Child Female | Twin, Triplet or other | and | Number in order of birth | Legitimate? yes | Date of Birth May 3 1919 (Month, Day, Yr.)

FATHER		MOTHER	
Full Name	J. Clinton Bradford	Full Maiden Name	Mamie Connor
Residence	Globe, Arizona	Residence	Globe, Arizona
Color or Race	White	Color or Race	White
Age at last Birthday	31 Years	Age at last Birthday	30 Years
Birthplace	Columbus, Ohio	Birthplace	Canyon, Texas
Occupation	Bank clerk	Occupation	Housewife

Number 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*

I hereby certify that I attended the birth of the above child; and that it occurred on May 3 1919, at 1:45 P. M.

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

Signature Alvin Kirmse M.D.

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

Address Globe, Arizona

Given or Christian name added from a supplemental report ..... 191..

Filed July 15 1919

B. G. Fox

LOCAL REGISTRAR.

A True Copy

S24-S03-439

COUNTY REGISTRAR.

Filed AUG 5 1919

B. G. Fox

COUNTY REGISTRAR