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PLACE OF BIRTH
 County of Gila ARIZONA STATE BOARD OF HEALTH
 BUREAU OF VITAL STATISTICS State Index No. 183
 District of _____ ORIGINAL CERTIFICATE OF BIRTH Co. Register No. 296
 Town of _____ Local Registrar's No. _____
 or _____
 City of Globe (No. _____ St. _____ Ward _____)

FULL NAME OF CHILD _____ { Born } YES
 If child is not named, make Supplemental Report on blank obtainable from local registrar. { Alive } no

Sex of child F Twin, Triplet or other _____ and Number in order of birth 1 Legitimate? ya Date of Birth 29 May 1920
 (Month) (Day) (Yr.)

FATHER
 Full Name George Elsa Baughman
 Residence Hockney ave. Globe
 Color or Race White Age at last Birthday 22 (Years)
 Birthplace Boone Co. Kansas
 Occupation Miner

MOTHER
 Full Maiden Name Virgie Watkins
 Residence Hockney ave. Globe
 Color or Race White Age at last Birthday 18 (Years)
 Birthplace Boone County Kansas
 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 29 1920, at 6 P. M.

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

(Signature) W. Wilford M.D.
 (Attending physician, midwife, householder*)

Given or Christian name added from a _____

Address Globe Ariz

Supplemental report _____ 191 _____ Filed 6-1-1920

B. S. Day
 LOCAL REGISTRAR.

025-579-502 Filed 6-1-1920
 COUNTY REGISTRAR.

A True Copy
B. S. Day
 COUNTY REGISTRAR.