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ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS

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

State Index No. 121
Co. Register No. 643
Local Registrar's No. _____

ORIGINAL CERTIFICATE OF BIRTH

FULL NAME OF CHILD Alvin Gilmore } Born } YES
If child is not named, make Supplemental Report on blank obtainable from local registrar. } Alive } ~~NO~~

Sex of Child <u>Male</u>	Twin, Triplet or other	and	Number in order of birth	Legitimate? <u>yes</u>	Date of Birth <u>Oct 1 1920</u> (Month) (Day) (Yr.)
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FATHER			MOTHER		
Full Name <u>Joseph Gilmore</u>	Residence <u>Miami Arizona</u>	Color or Race <u>White</u>	Full Maiden Name <u>Effie McBroon</u>	Residence <u>Miami Arizona</u>	Color or Race <u>White</u>
Age at last Birthday <u>23</u> (Years)	Birthplace <u>New Mexico; Roswell</u>	Occupation <u>Warehouse foreman</u>	Age at last Birthday <u>18</u> (Years)	Birthplace <u>Globe, Arizona</u>	Occupation <u>Housewife</u>

Number of child of this mother 1 Number of Children, of this mother, now living 1 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 Oct 1 1920, at 6¹⁵ 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)

Given or Christian name added from a supplemental report _____ 101 _____

Address Globe, Arizona

Filed Nov 12 1920 LOCAL REGISTRAR.

175-1001-544 COUNTY REGISTRAR.

Filed 12/6 1920 A True Copy LOCAL REGISTRAR.

185 Jox COUNTY REGISTRAR.