

2179

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

County of Gila

BUREAU OF VITAL STATISTICS

State Index No. 344

District of Globe

ORIGINAL CERTIFICATE OF BIRTH

Co. Register No. 606

Town of Globe
or

Local Registrar's No. _____

City of _____ (No. _____ St. _____ Ward)

FULL NAME OF CHILD Cristobal Franco

{ Born } Yes
{ Alive } NO

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

Sex of Child 7 Twin, Triplet or other _____ and _____ Number in order of birth _____ Legitimate? No. Date of Birth Oct. 12 1920
(Month) (Day) (Yr.)

FATHER
Full Name Pete Harrison
Residence Globe, Ariz.
Color or Race ? Age at last Birthday 26(?) (Years)
Birthplace ?
Occupation Waiter

MOTHER
Full Maiden Name Gregoria Alvarez Franco
Residence Globe, Arizona
Color or Race Mex. Age at last Birthday 19 (Years)
Birthplace Globe Ariz.
Occupation Clerk

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. 12 1920, at 5³⁰ PM.

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

(Signature) C. W. Adams
(Attending physician, midwife, householder.)*

Given or Christian name added from a supplemental report _____ 1920

Address Globe, Arizona

366-1012-766
COUNTY REGISTRAR.

Filed Nov 1 1920
Filed Nov 5 1920 A True Copy

B. S. J. O'H
LOCAL REGISTRAR.
B. S. J. O'H
COUNTY REGISTRAR.