

1553

RESIDENCE NO. 10110

SEE COURT ORDER # 475,570 #.9

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 101
Registered No.

1. PLACE OF BIRTH

County Gila State ARIZONA
Township _____ or Village _____
City Globe No. _____ St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Aubra Brandt Gilliland

3. Sex Male If plural births _____ 4. Twin, triplets, or other _____ 5. Number in order of birth _____
6. Premature _____ Full term _____ 7. Is mother married? yes 8. Date of birth Jan. 2, 19 22
(Month, day, year)

9. Full name Aubra Gilliland FATHER

18. Full maiden name Violet Fern Mahoney MOTHER

10. Residence (usual place of abode) (If non-resident, give place and State) _____

19. Residence (usual place and abode) (If non-resident, give place and State) _____

11. Color or race White 12. Age at last birthday 38 (Years)

20. Color or race White 21. Age at last birthday 21 (Years)

13. Birthplace (city or place) (State or Country) Kentucky

22. Birthplace (city or place) (State or Country) Ontario, Canada

14. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Farmer

23. Trade, profession, or particular kind of work done, as housekeeper, typist, nurse, clerk, etc. Musician

15. Industry or business in which work was done, as silk mill, sawmill, bank, etc. _____

24. Industry or business in which work was done, as own home, lawyer's office, silk mill, etc. _____

16. Date (month and year) last engaged in this work _____ 17. Total time (years) spent in this work _____

25. Date (month and year) last engaged in this work _____ 26. Total time (years) spent in this work _____

27. Number of children of this mother (At time of birth and including this child) _____ (a) Born alive and now living _____ (b) Born alive but now dead _____ (c) Stillborn _____

COURT ORDER

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102
348