4653

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

PLACE OF BIRTH

County of Gila.

District of Globe.

Town of

or

City of Globe.

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No.

Co. Registrar's No. 180

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD Elizabeth White, Born Alive YES NO

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

Sex of Child	Twin, Triplet or other	and	Number in order of birth	Legitimate?	Date of Birth Month	Day	Yr.
Female				Yes	5	4	1922

FATHER		MOTHER	
Full Name	Walter G. White.	Full Maiden Name	Blanch Venus Garvin,
Residence	Globe,	Residence	Globe,
Color or Race	White	Color or Race	White
Age at last Birthday	35 Years	Age at last Birthday	28 Years
Birthplace	North Carolina,	Birthplace	Louisiana,
Occupation	Drugist.	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* 7,15

I hereby certify that I attended the birth of the above child; and that it occurred on 5/4th. 1922 at A. M.

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

Signature L. E. Wightman

Attending physician, midwife, householder.*

Address Globe, Ariz.

Given or Christian name added from a supplemental report 191

Filed May 8 1922 — LOCAL REGISTRAR.

565-504-275 COUNTY REGISTRAR.

Filed 6/6 1922 A True Copy — COUNTY REGISTRAR.