

2405

In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each, in order of birth, stated.

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

1. County of Gila
District of _____
Town of Miami
or _____

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 1539
Co. Registrar No. 340
Local Registrar No. _____

City of _____ No. Bairy Campou St. _____ Ward) _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Lloyd Ulmer Tibbens If child is not yet named, make supplemental report, as directed

3. Sex of child male To be answered ONLY in event of plural births. 4. Twin, triplet or other _____ 5. No., in order of birth _____ 6. Legitimate? yes 7. Date of birth June 29, 1922 (Month, day, year)

8. Full name George Hugh Tibbens FATHER

14. Full maiden name Ora Irene Spivey MOTHER

9. Residence Miami Ariz. (Usual place of abode) If nonresident, give place and State

15. Residence Miami, Ariz. (Usual place of abode) If nonresident, give place and State

10. Color or race White 11. Age at last birthday 42 (Years)

16. Color or race W. 17. Age at last birthday 35 (Years)

12. Birthplace (city or place) Pennsylvania (State or country)

18. Birthplace (city or place) Texas (State or country)

13. Occupation Carpenter Nature of industry

19. Occupation Housewife Nature of industry

20. Number of children of this mother (Taken as of time of birth of child here-in certified and including this child.) (a) Born alive and now living 2 (b) Born alive but now dead 0 (c) Stillborn 0

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was alive at 4:20 m. on the date above stated. (Born alive or stillborn)

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature J. J. Tompkins (Physician or midwife)

Address Miami, Ariz.

Given name added from a supplemental report 332-629-628 (Month, day, year) Registrar.

Filed July 7, 1922 B. W. Starks Local Registrar.
Filed 7-18, 1922 B. W. Starks County Registrar.