

NAME ADDED BY SUPPLEMENT

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

County of Apache
District of St Johns
Town of St Johns
or
City of St Johns

State Index No. 15
Co. Registrar's No. 39
Local Registrar's No. 14

ORIGINAL CERTIFICATE OF BIRTH

FULL NAME OF CHILD CALVIN COOLIDGE COWLEY St. _____ Ward _____
If child is not named, make Supplemental Report on blank obtainable from local registrar. } Born YES }
Alive } NO }

Sex of Child M Twin, Triplet or other _____ } and { Number in order of birth _____ Legitimate yes Date of Birth Mar 31 1913
Month Day Yr.

FATHER
Full Name Graham d Cowley
Residence St Johns Ariz
Color or Race W Age at last Birthday 41 Years
Birthplace Alabama
Occupation Foreman & Mill Drilling

MOTHER
Full Maiden Name Martha Duke
Residence St Johns Ariz
Color or Race W Age at last Birthday 31 Years
Birthplace Texas
Occupation Housewife & teacher

Number of child of this Mother 6 Number of Children, of this mother, now living 6 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 Mar 31 1913 at 11:30 M.

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

Signature J. J. Baeldin
Attending physician, midwife, householder.*

Given or Christian name added from a supplemental report _____ 1913

Address St Johns Ariz
Martha Duke
LOCAL REGISTRAR.

338-331-445
COUNTY REGISTRAR.

Filed 4/9 1913
Filed 4/10 1913

A True Copy
J. J. Baeldin
COUNTY REGISTRAR.

or midwife with each local Registrar within 5 days after birth.