

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

City of Gila
County of Gila

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 121
Co. Registrar No. 147
Local Registrar's No. _____

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

NAME OF CHILD Margaret Ferguson { Born YES
If child is not named, make Supplemental Report on blank obtainable from local registrar. { Alive ~~NO~~

Female Twin, Triplet or other _____ { and } Number in order of birth _____ Legitimate? yes Date of Birth March 1 1923
(Month) (Day) (Yr.)

FATHER
Name Albert Forest Ferguson
Residence Globe, Arizona
Age at last Birthday 45 (Years)
Color or Race White
Birthplace Texas
Occupation Groceryman

MOTHER
Full Maiden Name Margaret Sandler
Residence Globe, Ariz.
Color or Race White Age at last Birthday 36 (Years)
Birthplace North Vernon Indiana
Occupation Housewife

Number of children of this mother 3 Number of children of this mother now living 3 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 March 1 1923, at 9¹⁵ P.M.

*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 _____ Address Globe, Arizona

Supplemental report _____ 1923 Filed 3-4 1923 R. Y. J. of
LOCAL REGISTRAR.

465-301-429 Filed 4-6 1923 A True Copy R. Y. J. of
COUNTY REGISTRAR. COUNTY REGISTRAR.