

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS ORIGINAL CERTIFICATE OF BIRTH

1. County of Gila
District of _____
Town of _____
or Globe
City of _____

State Index No. 121
County Registrar No. 32
Local Registrar No. _____

2. Full name of child Roderick Kennedy Meyers (if birth occurred in a hospital or institution, give its NAME instead of street and number)
No. _____ St. _____ Ward _____
If child is not yet named, make supplemental report, as directed.

3. Sex of Child M To be answered ONLY in event of plural births. } 4. Twin, triplet or other. _____ 5. No., in order of birth 6 } 6. Legitimate? yes } 7. Date of birth Dec 8 - 23
Month Day Year

8. FATHER
Full name Solomon P. Meyers
9. Residence (Usual place of abode) Globe Ariz
If nonresident, give place and state
10. Color or race W
11. Age at last birthday 48 (Years)

14. MOTHER
Full maiden name Jesta E Dennis
15. Residence (Usual place of abode) Globe Ariz
If nonresident, give place and state
16. Color or race W
17. Age at last birthday 40 (Years)

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

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

13. Occupation Restauranter
Nature of industry

19. Occupation Housewife
Nature of industry

20. Number of children of this mother (Taken as of time of birth of child herein certified and including this child.) (a) Born alive and now living 4 (b) Born alive but now dead 2 (c) Stillborn 0 } 21. Were precautions taken against ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*
I hereby certify that I attended the birth of this child, who was born alive at 4 P. 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 R. D. Kennedy (Physician or midwife)
Address Globe Ariz

Given name added from a supplemental report _____
Month, day, year. Filed 12-12, 1923 B. G. Jay Local Registrar.
Filed 1-5, 1924 B. G. Jay County Registrar.

Registrar. 942-1208-142

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