[redacted]

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 150

County Registrar No. 64

Local Registrar No.

PLACE OF BIRTH

1. County of Gila

District of Globe

Town of

or

City of Globe No. St. Ward

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Robert Earl Saunders (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 2

6. Legitimate? yes

7. Date of birth Jan 17 24 (Month, Day, Year)

FATHER

8. Full name Leonard Saunders

9. Residence (Usual place of abode) Globe

If nonresident, give place and state

10. Color or race W

11. Age at last birthday 28 (Years)

12. Birthplace (city or place)

(State or country) Tex

13. Occupation Rancher

Nature of industry

MOTHER

14. Full maiden name Francis Rex

15. Residence (Usual place of abode) Globe

If nonresident, give place and state

16. Color or race W

17. Age at last birthday 20 (Years)

18. Birthplace (city or place) Ariz

(State or country)

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 1

(b) Born alive but now dead 1

(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 (Born alive or stillborn.) at 11 30 a.m. on the date above stated.

*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

Given name added from a supplemental report

Month, day, year.

Registrar.

Filed Jan 20, 1924 B. G. Fox Local Registrar.

Filed 2/6, 1924 B. G. Fox County Registrar.

922-117-697

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD

N. B.—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.