615

MARGIN [illegible]VED FOR BINDING

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.

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 453

County Registrar No. 340

Local Registrar No. 117

PLACE OF BIRTH

1. County of Maricopa

District of

Town of

or

City of Phoenix — No. Arizona Deaconess Hosp. St. Ward

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

2. Full name of child Frederick William Pannkoke — 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 1

6. Legitimate? Yes

7. Date of birth 1 - 31 - 24 (Month Day Year)

8. FATHER

Full name Erich Friederich Pannkoke

9. Residence (Usual place of abode) 849 N. 7th Ave.,

If nonresident, give place and state

10. Color or race: White

11. Age at last birthday 29 (Years)

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

13. Occupation Nature of industry Cotton Buyer

14. MOTHER

Full maiden name Florence Sage

15. Residence (Usual place of abode) 849 N. 7th Ave.,

If nonresident, give place and state

16. Color or race: White

17. Age at last birthday 27 (Years)

18. Birthplace (city or place) Denver, Colorado (State or country)

19. Occupation Nature of industry Housewife

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 0

(c) Stillborn 0

21. Were precautions taken against ophthalmia neonatorum? Ag. NO3. 1%

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was born alive at 2:30 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 [illegible] (Physician or midwife)

Address Phoenix Arizona

Given name added from a supplemental report

Month, day, year.

Registrar.

Filed 2-7-, 1924 [illegible] Local Registrar.

Filed , 19 County Registrar.

675-131-625