

ABSTRACTED FOR FINDING

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD

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.

PLACE OF BIRTH

1. County of Gila  
District of \_\_\_\_\_  
Town of \_\_\_\_\_  
or Globe  
City of \_\_\_\_\_

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS  
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 168  
County Registrar No. \_\_\_\_\_  
Local Registrar No. 37

2. Full name of child Donald Gerald Warner  
(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 male To be answered ONLY in event of plural births. } 4. Twin, triplet or other L 6. Legitimate? yes 7. Date of birth March 19, 1925  
Month day year

8. FATHER  
Full name Lewis Warner

14. MOTHER  
Full maiden name Clara Hall

9. Residence (Usual place of abode) Globe, Ariz.  
If nonresident, give place and state

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If nonresident, give place and state

10. Color or race white 11. Age at last birthday 31 (Years)

16. Color or race white 17. Age at last birthday 19 (Years)

12. Birthplace (city or place) Lake Victor, Texas  
(State or country)

18. Birthplace (city or place) Woolery, Arizona  
(State or country)

13. Occupation  
Nature of industry miner

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 2  
(b) Born alive but now dead 0  
(c) Stillborn 0

21. Were precautions taken against erythralmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born alive at 8:30 p.m. on the date above stated.  
(Born alive or stillborn.)

Signature J.C. Harper, M.D.  
(Physician or midwife)  
Address Globe, Ariz.

Given name added from a supplemental report \_\_\_\_\_ Filed Apr. 1, 1925 R.E. Wightman  
Month, day, year. \_\_\_\_\_ Registrar.  
County Registrar.

469-319-383