ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 123

Registered No. 1

1. PLACE OF BIRTH

County Gila State Arizona

District or Township or Village

City 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 Henry John Hocking { 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 2 | 5. No., in order of birth 2 | 6. Legitimate? yes | 7. Date of birth Jan. 2, 1926 (Month Day Year)

8. FATHER

Full name Henry Hocking

9. Residence (Usual place of abode)

If non-resident, give place and state Globe, Ariz.

10. Color or race White | 11. Age at last birthday 41 (Years)

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

13. Occupation Nature of industry Miner

14. MOTHER

Full maiden name Minnie Trembath

15 Residence (Usual place of abode)

If non-resident, give place and state. Globe, Ariz.

16 Color or race White | 17. Age at last birthday 41 (Years)

18. Birthplace (city or place) England (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 Seven

(b) Born alive but now dead none

(c) Stillborn none

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 4:10 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 T. C. Harper, M.D.

physician (Physician or midwife).

Given name added from a supplemental report Month, day, year

Address Globe, Ariz.

W. W. 11 Registrar

Filed Jan 4, 1926 W. Wstorst Registrar

887-102-438

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.