

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 124
 Registered No. 21

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 Shelma Jean Lewis { If child is not yet named, make supplemental report, as directed.

3. Sex of Child Female To be answered ONLY in event of plural births. 4. Twin, triplet or other L 6. Legitimate? yes 7. Date of birth Jan. 2, 1926
 Month Day Year

8. FATHER
 Full name William Henry Lewis
 9. Residence (Usual place of abode) Globe, Ariz.
 If non-resident, give place and state.
 10. Color or race white
 11. Age at last birthday 28 (Years)

14. MOTHER
 Full maiden name Hannah Loretta Wright
 15. Residence (Usual place of abode) Globe, Ariz.
 If non-resident, give place and state.
 16. Color or race white
 17. Age at last birthday 23 (Years)

12. Birthplace (city or place) Missouri
 (State or country) U. S. A.
 13. Occupation
 Nature of Industry Mechanic

18. Birthplace (city or place) Clifton, Ariz.
 (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 two
 (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 at 7:05 A.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 T.C. Harper, M.D.

 (Physician or midwife)

Given name added from a supplemental report _____
 Month, day, year _____
 Address Globe, Ariz.
 Filed 1-4 1926 _____
 Registrar _____ Registrar

332-102-863

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.