

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

State File No. 191
 Registered No. 64

1. PLACE OF BIRTH

County Gila State _____
 District or Township Globe or Village _____
 City Globe No. 555 Cedar St. St. _____ Ward _____
 (If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Lois Ellen Clifford { 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 _____	6. Legitimate? yes	7. Date of birth <u>3 28 1926</u> Month Day Year
		5. No., in order of birth _____		

8. FATHER
 Full name Roy A. Clifford

14. MOTHER
 Full maiden name Helema E. Loftus

9. Residence
 (Usual place of abode) Globe
 If non-resident, give place and state.

15. Residence
 (Usual place of abode) Globe
 If non-resident, give place and state.

10. Color or race
White

11. Age at last birthday 42 (Years)

16. Color or race
White

17. Age at last birthday 36 (Years)

12. Birthplace (city or place) Alton
 (State or country) Ill.

18. Birthplace (city or place) Turon
 (State or country) Kansas

13. Occupation
 Nature of Industry Wholesale Grocery

19. Occupation
 Nature of Industry Housewife

20. Number of children of this mother 9
 (Taken as of time of birth of child herein certified and including this child.)

(a) Born alive and now living <u>6</u>	21. Were precautions taken against ophthalmia neonatorum? Yes
(b) Born alive but now dead <u>3</u>	
(c) Stillborn <u>0</u>	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was Born Alive at 11:45 P.M. on the date above stated
 (Born alive or stillborn)

Signature G. E. Wightman

 Physician
 (Physician or midwife)

Given name added from a supplemental report _____ Address Globe, Ariz.
 Month, day, year _____
 Registrar _____ Filed Nov 31 1926 W. Watson
 Registrar _____

334 - 328 - 832

WRITE IN INK 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.