ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 128 V

Registered No. 279

1. PLACE OF BIRTH

County: Gila State: Ariz.

District or Township: or Village:

City: Globe No.: Gila Co. Hosp St.: Ward

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

2. Full name of child: Rudolph Faletti (If child is not yet named, make supplemental report, as directed.)

3. Sex of Child: M.

To be answered ONLY in event of plural births.

4. Twin, triplet or other:

5. No., in order of birth:

6. Legitimate? Yes.

7. Date of birth: 12-6-26 (Month Day Year)

8. FATHER

Full name: Dominic Faletti

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: 27 (Years)

12. Birthplace (city or place) (State or country): Italy

13. Occupation: Miner

Nature of Industry:

14. MOTHER

Full maiden name: Anna Troglia

15. Residence (Usual place of abode): Globe

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

16. Color or race: White

17. Age at last birthday: 23 (Years)

18. Birthplace (city or place) (State or country): Italy

19. Occupation: Housewife

Nature of Industry:

20. Number of children of this mother: 1

(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? 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 10:30 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: [illegible] Physician (Physician or midwife)

Address: Globe Ariz.

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

Registrar

Filed 12/31, 1926 [illegible] Registrar

969-1206-131

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.

WRITE CLEARLY WITH UNFADING INK—THIS IS A PERM. REC.