

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

State File No. 169
 Registered No. 282

1. PLACE OF BIRTH

County Gila State Ariz.
 District or Township _____ or Village _____
 City Globe No. _____ St. _____ Ward _____

2. Full name of child James Larkin Orr (If birth occurred in a hospital or institution, give its NAME instead of street and number)
 { 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. _____ 6. Legitimate? yes
 5. No., in order of birth _____ 7. Date of birth 12-18-26
 Month Day Year

8. **FATHER**
 Full name George Larkin Orr

14. **MOTHER**
 Full maiden name Addie Lucile Dobbin

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

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

10. Color or race white
 11. Age at last birthday 26 (Years)

16. Color or race white
 17. Age at last birthday 18 (Years)

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

18. Birthplace (city or place) Texas
 (State or country)

13. Occupation
 Nature of industry Previer.

19. Occupation
 Nature of industry Housewife

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 at 9:30 A.M. on the date above stated
 (Born alive or stillborn.)

Signature [Signature]

 (Physician or midwife)

Given name added from a supplemental report _____
 Address Globe Ariz.
 Month, day, year _____

Filed 12/31, 1926 M. St. Nord

 Registrar Registrar

169-1216-142

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD—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.