ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 132

Registered No. 22

1. PLACE OF BIRTH

County: Gila State: Arizona

District or Township: Globe 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: Sigrid Lillian Ferguson (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:

5. No., in order of birth:

6. Legitimate? Yes.

7. Date of birth: 2 - 5 - 1928 (Month Day Year)

FATHER

8. Full name: Edward Ferguson

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: 40 (Years)

12. Birthplace (city or place):

(State or country): Norway.

13. Occupation: Photo Engraver

Nature of industry: Advertising

MOTHER

14. Full maiden name: Esther Diaz.

15. Residence (Usual place of abode): Globe, Ariz

If non-resident, give place and state.

16. Color or race: Mexican

17. Age at last birthday: 28 (Years)

18. Birthplace (city or place): Linolia,

(State or country): Mexico.

19. Occupation: House wife

Nature of industry:

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

(a) Born alive and now living: four

(b) Born alive but now dead:

(c) Stillborn:

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 5:30 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: L. E. Wightman M.D.

Physician (Physician or midwife).

Address: Globe Arizona

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

Filed 2/10, 1928 L. E. Wightman Registrar

Registrar

265-205-549

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 PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD