

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

State File No. 176  
Registered No. 31

**1. PLACE OF BIRTH**

County Gila State Arizona  
District or Township Globe or Village \_\_\_\_\_  
City \_\_\_\_\_ No. \_\_\_\_\_ St. \_\_\_\_\_ Ward \_\_\_\_\_

2. Full name of child Mildred Brown (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 Feb 19-1928  
Month Day Year

**8. FATHER**  
Full name John Wm. Brown  
9. Residence (Usual place of abode) Globe, Ariz.  
If non-resident, give place and state.

**14. MOTHER**  
Full maiden name Maudie Nesbit  
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 52 (Years)

16. Color of race White  
17. Age at last birthday 46 (Years)

12. Birthplace (city or place) San Francisco  
(State or country) California

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

13. Occupation stock man  
Nature of Industry sheep

19. Occupation Housewife  
Nature of Industry \_\_\_\_\_

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 7  
(b) Born alive but now dead 2  
(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 Feb 19 at 1:30 P. m. on the date above stated  
(Born alive or ~~dead~~)

\*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 E. E. Wightman, M.D.  
Physician  
(Physician or midwife)

Given name added from a supplemental report \_\_\_\_\_  
Month, day, year \_\_\_\_\_

Address Globe, Arizona

Filed 3/1, 19 28 E. E. Wightman  
Registrar

N. B.—In case of more than one child at a birth, a SEPARATE AND ONLY ONE order of birth stated.

475-217-1123