

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

State File No. 103
Registered No. 40

1. PLACE OF BIRTH

County Gila State Arizona
District or Township _____ 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

Theodore Smith { If child is not yet named, make supplemental report, as directed.

3. Sex of Child

male

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

3-2-1928
Month Day Year

8. FATHER

Full name

Byrd J. Smith

9. Residence
(Usual place of abode)

If non-resident, give place and state.

Globe, Ariz.

10. Color or race

white

11. Age at last birthday 46 (Years)

12. Birthplace (city or place)

(State or country)

Sprangdale Ark.

13. Occupation

Nature of industry

Carpenter

14. MOTHER

Full maiden name

Lillie Jane Suggs

15. Residence
(Usual place of abode)

If non-resident, give place and state.

Globe, Ariz.

16. Color or race

white

17. Age at last birthday 33 (Years)

18. Birthplace (city or place)

(State or country)

Huntsville Ala.

19. Occupation

Nature of industry

Housewife

20. Number of children of this mother

(Taken as of time of birth of child herein certified and including this child.)

6

(a) Born alive and now living 3

(b) Born alive but now dead 2

(c) Stillborn 1

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 1:50 P. m. on the date above stated
(Born alive or stillborn.)

Signature

T. C. Harper

Physician

(Physician or midwife)

Address

Globe, Arizona

*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.

Given name added from a supplemental report

Month, day, year

Registrar

Filed 4/4

1928

E. E. Wightman
Registrar

328-302-322