PLACE OF BIRTH

1. County of Gila

District of

Town of

or

City of Globe. No. Gila County Hosp. St. Ward

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

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 131

County Registrar No.

Local Registrar No. 50

2. Full name of child Robt. Eugene Christensen. } 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 2

6. Legitimate? Yes.

7. Date of birth Mar. 12. 1928 (Month day year)

FATHER	MOTHER
8. Full name Eugene Leslie Christensen	14. Full maiden name Martha Schofield.
9. Residence (Usual place of abode) Globe	15. Residence (Usual place of abode) Globe.
If nonresident, give place and state	If nonresident, give place and state
10. Color or race W.	16. Color or race W.
11. Age at last birthday 29 (Years)	17. Age at last birthday 28 (Years)
12. Birthplace (city or place) Salt Lake City (State or country) Utah	18. Birthplace (city or place) Utah. (State or country)
13. Occupation M.D. Nature of industry	19. Occupation Housewife. Nature of industry

20. Number of children of this mother (Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living 2
(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 Mar. 12th (Born alive or stillborn.) at 5:45 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 evidences of life after birth.

Signature C. Gunter M.D. (Physician or midwife)

Address Globe. Ariz.

Given name added from a supplemental report ..... Filed 4/4, 1928 S. E. Wightman Local Registrar.

Month, day, year.

Registrar. Filed ..... 19.... County Registrar.

935-312-424