ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 144

Registered No. 83

1. PLACE OF BIRTH

County Gila State Arizona

District or Township Globe or Village

City Globe No. Joe House Canyon St., Ward

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

2. Full name of child Margaret Ruth Howard { 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 May 14 - 1928 (Month Day Year)

8. FATHER

Full name John Raymond Howard

9. Residence (Usual place of abode) Globe

If non-resident, give place and state. Arizona

10. Color or race White | 11. Age at last birthday 50 (Years)

12. Birthplace (city or place) Carson City Arkansas

(State or country)

13. Occupation

Nature of industry Cattleman

14. MOTHER

Full maiden name Gwennie Stoolfire

15 Residence (Usual place of abode) Globe

If non-resident, give place and state. Ariz.

16 Color or race White | 17. Age at last birthday 33 (Years)

18. Birthplace (city or place)

(State or country) Oklahoma

19. Occupation

Nature of industry House wife

20. Number of children of this mother 6

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

(a) Born alive and now living 6

(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 6:30 P.m. on the date above stated

(Born alive or stillborn.)

*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).

Given name added from a supplemental report

Month, day, year

Address Globe Ariz.

Registrar

Filed 6/8, 1928 L. E. Wightman M.D.

Registrar

484-514-725