

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

State File No. 147
 Registered No. 115

1. PLACE OF BIRTH
 County Gila State _____
 District or Township _____ or Village _____
 City _____ No. _____ St. _____ Ward _____

2. Full name of child Plutkos If birth occurred in a hospital or institution, give its NAME instead of street and number
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 1 6. Legitimate? yes 7. Date of birth June 15 - 29
 Month Day Year

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

14. MOTHER
 Full maiden name Stella Moletta
 15. Residence (Usual place of abode) Globe
 If non-resident, give place and state.

10. Color or race W 11. Age at last birthday 38 (Years)

16. Color or race W 17. Age at last birthday 32 (Years)

12. Birthplace (city or place) Ariz.
 (State or country)

18. Birthplace (city or place) Lead S. D.
 (State or country)

13. Occupation Baker
 Nature of industry

19. Occupation Housewife
 Nature of industry

20. Number of children of this mother 0 (Taken as of time of birth of child herein certified and including this child.)
 (a) Born alive and now living 0
 (b) Born alive but now dead 0
 (c) Stillborn 1 21. Were precautions taken against ophthalmia neonatorum? _____

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was stillborn at 9 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 R. D. Kennedy
Globe Ariz
 (Physician or midwife).

Given name added from a supplemental report _____ Address _____
 Month, day, year

Registrars
 Filled 7/10, 1927 E. E. Wightman
 Registrar Registrar

071-615-241