ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 167

Registered No. 119

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 Jack Kilheffer (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 June 25, 1929. (Month Day Year)

8. FATHER

Full name Malcolm Kilheffer

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 26 (Years)

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

13. Occupation Civil Engineer

Nature of industry

14. MOTHER

Full maiden name Marvel Lucille Roberts

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 16 (Years)

18. Birthplace (city or place) ..... (State or country) Brownwood Co. Texas.

19. Occupation Housewife

Nature of industry

20. Number of children of this mother 1 (Taken as of time of birth of child herein certified and including this child.)

(a) Born alive and now living 1

(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 (Born alive or stillborn.) at 1:55 P. 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 evidence of life after birth.

Signature T. C. Harper

physician (Physician or midwife).

Address Globe Arizona

Given name added from a supplemental report ..... Month, day, year

Filed 7/10 1929 L. E. Wightman Mae Registrar

Registrar

129-425-472

... case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each ... order of birth stated.