

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

State File No. 445
Registered No. 190

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 Albert Lee Culver Jr. 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. _____ 6. Legitimate? yes 7. Date of birth Oct. 19, 1939
Month Day Year

5. No., in order of birth _____ 8. FATHER Full name Albert Lee Culver 14. MOTHER Full maiden name Lola Lucas

9. Residence (Usual place of abode) Globe Ariz. If non-resident, give place and state. 15. Residence (Usual place of abode) Globe Ariz. If non-resident, give place and state.

10. Color or race white 11. Age at last birthday 30 (Years) 16. Color or race white 17. Age at last birthday 25 (Years)

12. Birthplace (city or place) Medina N.Y. (State or country) 18. Birthplace (city or place) Alamogordo New Mex (State or country)

13. Occupation miner Nature of industry _____ 19. Occupation Housewife Nature of industry _____

20. Number of children of this mother 2 (a) Born alive and now living 2
(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 10:23 A.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 T. E. Harper
Physician (Physician or midwife)

Given name added from a supplemental report _____ Address Globe, Arizona

Filed Nov 9, 1939 T. E. Wylton Registrar

139-1019-332