

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 190
Registered No. 211

1. PLACE OF BIRTH

County Isila State Ariz.
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 Eva Bita Babich { 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 _____ 6. Legitimate? Yes 7. Date of birth Nov. 29, 1929
Month Day Year

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

14. MOTHER
Full maiden name Marguerite Deirouva
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 40 (Years)

16. Color or race white
17. Age at last birthday 24 (Years)

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

18. Birthplace (city or place) Austria
(State or country)

13. Occupation miner
Nature of industry

19. Occupation Housewife
Nature of industry

20. Number of children of this mother 3 } (a) Born alive and now living 3
(Taken as of time of birth of child herein certified and including this child.) } (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 2:30 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 T. C. Harper
Physician (Physician or Midwife).

Given name added from a supplemental report _____ Address Globe, Ariz.

Filed 12/7, 1929 H. B. Wylburn Registrar
528-1129-444 Registrar