ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 126

Registered No. 238

1. PLACE OF BIRTH

County Gila State Arizona

District or Township ..... or Village .....

City Miami No. 122 Mex. Canon St., ... Ward

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

2. Full name of child Pedro Hernandez { 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 2. 1927. (Month Day Year)

8. FATHER	14. MOTHER
Full name Jacinto Hernandez	Full maiden name Josepha Meabla
9. Residence (Usual place of abode) Miami	15 Residence (Usual place of abode) Miami,
If non-resident, give place and state. Arizona.	If non-resident, give place and state. Arizona.
10. Color or race Mex.	16 Color or race Mex.
11. Age at last birthday 31 (Years)	17. Age at last birthday 35 (Years)
12. Birthplace (city or place) Chihuahua	18. Birthplace (city or place) Sinaloa,
(State or country) Mex.	(State or country) Mex.
13. Occupation	19. Occupation
Nature of industry Miner	Nature of industry Housewife

20. Number of children of this mother ..... (Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living 5
(b) Born alive but now dead 3
(c) Stillborn none

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 5:30 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 Cyril M. Crow M.D.

Physician (Physician or midwife).

Address Miami, Arizona.

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

789-602-141 Registrar

Filed June 11, 1927 C. E. Irvin Registrar