

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

State File No. 135
 Registered No. 245

1. PLACE OF BIRTH

County Gila State Arizona
 District or Township _____ or Village _____
 City Miami No. 28 Davis Canon St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Maria Beru 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 _____ 5. No., in order of birth _____ 6. Legitimate? yes 7. Date of birth June 6 - 1927
Month Day Year

8. FATHER
 Full name Clesto Beru

9. Residence (Usual place of abode) Miami
 If non-resident, give place and state. Arizona

10. Color or race Mex. 11. Age at last birthday 47 (Years)

12. Birthplace (city or place) San Ilisario, Texas
(State or country)

13. Occupation
 Nature of industry Miner

14. MOTHER
 Full maiden name Ancila Ochoa

15. Residence (Usual place of abode) Miami
 If non-resident, give place and state. Arizona

16. Color or race Mex. 17. Age at last birthday 25 (Years)

18. Birthplace (city or place) Clifton Arizona
(State or country)

19. Occupation
 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 0
 (b) Born alive but now dead 2
 (c) Stillborn _____

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 stillborn at 2:15 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 Byril M. Brown M.D.
Physician
(Physician or midwife).

Given name added from a supplemental report _____
 Address Miami, Arizona
 Filed June 11, 1927 W. E. Drinn
Registrar Registrar

Month, day, year
424-606-161
 Registrar

N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each child must be written on the separate return.