

## PLACE OF BIRTH

## ARIZONA STATE BOARD OF HEALTH

1. County of.....

District of.....

Town of.....

or

City of.....

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 163County Registrar No. 257Local Registrar No. 257No. \_\_\_\_\_ St. \_\_\_\_\_ Ward \_\_\_\_\_  
(If birth occurred in a hospital or institution, give its NAME instead of street and number)2. Full name of child Paula Lopez

{ If child is not yet named, make supplemental report, as directed.

3. Sex of Child

FTo be answered ONLY  
in event of plural  
births.

4. Twin, triplet or other.....

6. Legitimate?

Yes7. Date of birth 6 18 27  
Month Day Year

5. No., in order of birth.....

8. FATHER

Full name Juan Lopez9. Residence  
(Usual place of abode)If non-resident, give place and state. Miami

10. Color or race

Mex11. Age at last birthday 21 (Years)

12. Birthplace (city or place)

Mexico

(State or country)

13. Occupation

Nature of Industry Winn

14. MOTHER

Full maiden name Aurora Arrellano15. Residence  
(Usual place of abode)If non-resident, give place and state. Miami

16. Color or race

Wen17. Age at last birthday 18 (Years)

18. Birthplace (city or place)

Mexico

(State or country)

19. Occupation

Nature of Industry HW

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 1

(b) Born alive but now dead

(c) Stillborn

21. Were precautions taken against oph-  
thalmia neonatorum?Yes

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

I hereby certify that I attended the birth of this child, who was Alive at 2:00 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.....

C. H. Perkins

Address.....

Miami

(Physician or midwife.)

Given name added from  
a supplemental report

Month, day, year

739-618-119

Registrar

Filed

June 25, 1927

Filed

19

Local Registrar.

County Registrar.