ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 205

Registered No.

1. PLACE OF BIRTH

County Gila State

District or Township or Village

City Winkelman No. St., Ward

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

2. Full name of child Julio Hill (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 July 30 1927 (Month Day Year)

8. FATHER

Full name Conrad Hill

9. Residence (Usual place of abode) Hayden

If non-resident, give place and state Ariz

10. Color or race Mexican | 11. Age at last birthday 21 (Years)

12. Birthplace (city or place) Christmas

(State or country) Arizona

13. Occupation Laborer

Nature of industry

14. MOTHER

Full maiden name Mary Monterch

15 Residence (Usual place of abode) Hayden

If non-resident, give place and state Ariz

16 Color or race Mexican | 17. Age at last birthday 20 (Years)

18. Birthplace (city or place) Nogaby

(State or country) Arizona

19. Occupation Housewife

Nature of industry

20. Number of children of this mother 1

(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 ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was (Born alive or stillborn) at 10 A 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 Charles B Hughes MD

Hayden (Physician or Midwife).

Given name added from a supplemental report

Month, day, year

Address

Registrar

Filed Aug 6, 1927 P. L. Hutton

Registrar

183-730-448

N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made, order of birth stated.