ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 138

Registered No. 446

1. PLACE OF BIRTH

County: Gila State: Arizona

District or Township: or Village:

City: Miami No. St. Ward

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

2. Full name of child: Esperanza Rubulcava

{ 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: October 16-1927 (Month Day Year)

FATHER

8. Full name: Bernardino Rubulcava

9. Residence (Usual place of abode): Miami

If non-resident, give place and state: Arizona

10. Color or race: Mexican

11. Age at last birthday: 27 (Years)

12. Birthplace (city or place): Jalisco

(State or country): Mexico

13. Occupation: Miner

Nature of industry: Copper

MOTHER

14. Full maiden name: Maria Loza

15. Residence (Usual place of abode): Miami

If non-resident, give place and state: Arizona

16. Color or race: Mexican

17. Age at last birthday: 28 (Years)

18. Birthplace (city or place): Jalisco

(State or country): Mexico

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: 0

(b) Born alive but now dead:

(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 (Born alive or stillborn.) at 5 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 E. Dunn, M.D.

Miami Arizona

(Physician or midwife).

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

Address:

Registrar

Filed Oct 25, 1927 C E Dunn

Registrar

591-1016-421

n, a SEPARATE RETURN must be made for each, in order of birth stated.