

5-17-82

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 179
Registered No. 459

1. PLACE OF BIRTH

County Pima State Arizona
District or Township _____ or Village _____
City Miami No. 1113 Live Oak St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child

Pentecostes' Luera

{ 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 Oct 30 1927
Month Day Year

8. FATHER Full name Jesus Luera

14. MOTHER Full maiden name Clara Vinyard

9. Residence (Usual place of abode) El Paso, Texas
If non-resident, give place and state.

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

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

16. Color or race Mexican 17. Age at last birthday 19 (Years)

12. Birthplace (city or place) El Paso Texas
(State or country)

18. Birthplace (city or place) Globe, Arizona
(State or country)

13. Occupation Grocer Clerk
Nature of Industry

19. Occupation Housewife
Nature of Industry

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 2 (b) Born alive but now dead 0 (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 alive at 5:30 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 J. J. Trimmer
(Physician or midwife)

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

Address Miami, Arizona

Filed 5015 37 19 27 Registrar Le G. Jones

Registrar

Registrar

731-1030-354

K-THIS IS A PERMANENT RECORD RETURN must be made for each, and the number of each stated.

in one child at a time.