

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS STANDARD CERTIFICATE OF BIRTH

State File No. 2130
187
Registered No. _____

1. PLACE OF BIRTH

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

2. Full name of child Manuel Cabrera } 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. _____ } 7. Date of birth March 31-1930
5. No., in order of birth. _____ } Month Day Year

8. FATHER
Full name Vernabe Cabrera

14. MOTHER
Full maiden name Louise Longley

9. Residence (Usual place of abode) Not known
If non-resident, give place and state.

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

10. Color or race Mex

11. Age at last birthday (Years) Not known

16. Color or race Mex

17. Age at last birthday (Years) 23

12. Birthplace (city or place) Mexico
(State or country)

18. Birthplace (city or place) Mexico
(State or country)

13. Occupation Miner
Nature of Industry

19. Occupation At Home
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 0
(b) Born alive but now dead 0
(c) Stillborn 1

21. Were precautions taken against ophthalmia neonatorum? No

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was Stillborn at 5 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 Richard E. Jovin
(Physician or midwife.)

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

Address Mani Ariz.

Registrar. _____

Filed May 3 1930 Registrar. R. E. Jovin

131-331-377