

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS  
STANDARD CERTIFICATE OF BIRTH

State File No. 131A  
Registered No. 215

1. PLACE OF BIRTH

County Gila State Arizona

District or Township \_\_\_\_\_ or Village \_\_\_\_\_

City Miami No. 505A Orphan St. St. \_\_\_\_\_ Ward \_\_\_\_\_

2. Full name of child Felipe Pinedo } 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. \_\_\_\_\_ 6. Legitimate? yes 7. Date May 1-1930 of birth Month May Day 1 Year 1930

8. FATHER  
Full name Jesus Pinedo  
9. Residence (Usual place of abode) Miami  
If non-resident, give place and state. Arizona

14. MOTHER  
Full maiden name Arigua Suarez  
15. Residence (Usual place of abode) Miami  
If non-resident, give place and state. Arizona

10. Color or race Mex. 11. Age at last birthday 28 (Years)

16. Color or race Mex. 17. Age at last birthday 25 (Years)

12. Birthplace (city or place) Zacatecas  
(State or country) Mex.

18. Birthplace (city or place) Zacatecas  
(State or country) Mex.

13. Occupation  
Nature of Industry Mining

19. Occupation  
Nature of Industry Housewife

20. Number of children of this mother 3 } (a) Born alive and now living 2  
(Taken as of time of birth of child herein certified and including this child.) } (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 born alive at 2 A. 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 Loyil M. Brown M.D.

(Physician or midwife.)

Given name added from a supplemental report \_\_\_\_\_ Address Miami, Arizona

Month, day, year \_\_\_\_\_ File May 12 30 Registrar B. E. Dorn

6716-501-129