

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

126

State File No. _____
 Registered No. 702

1. PLACE OF BIRTH

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

2. Full name of child Ernestina Atilano (If child is not yet named, make supplemental report, as directed.)

3. Sex of Child F To be answered ONLY in event of plural births. 4. Twin, triplet or other _____ 5. No. in order of birth 4/20 6. Legitimate? _____ 7. Date of birth 11-11-30
 Month Day Year

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

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

10. Color or race Wsp
 11. Age at last birthday 27 (Years)

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

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

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

13. Occupation Carpenter
 Nature of industry

19. Occupation H.W.
 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 _____
 (b) Born alive but now dead _____
 (c) Stillborn _____

21. Were precautions taken against ophthalmia neonatorum? _____

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was Alive at 5:30 a.m. on the date above stated.
 (Born alive or stillborn.)

Signature C. F. Perkins
 (Physician or midwife).

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

Filed Jan 7, 1931
 Registrar 6. E. Dwyer Registrar
 516 111-469