

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

State File No. 114-11
 Registered No. _____
 Arizona _____

Place of Birth _____
 County Gila State ARIZONA
 Township _____ or Village _____
 City Hayden St. _____ Ward _____
 (If birth occurred in a hospital or institution, give its NAME instead of street and number)

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

3. Sex <u>Female</u>	If plural births _____	4. Twin, triplet, or other _____	6. Premature _____ Full term <u>X</u>	7. Legitimate? <u>YES</u>	8. Date of birth <u>February 9, 1931</u> (Month, day, year)
----------------------	------------------------	----------------------------------	------------------------------------------	---------------------------	----------------------------------------------------------------

9. Full name of father Ruperto Martinez

18. Full maiden name of mother Maria Martinez

10. Residence (usual place of abode) Hayden, Arizona
 (If non-resident, give place and State)

19. Residence (usual place of abode) Hayden, Arizona
 (If non-resident, give place and State)

11. Color or race Mex 12. Age at last birthday 47 (Years)

20. Color or race Mex 21. Age at last birthday 30 (Years)

13. Birthplace (city or place) Union de San Antonio Jalisco, Mexico
 (State or country)

22. Birthplace (city or place) Union de San Antonio Jalisco, Mexico
 (State or country)

14. Trade, profession, or particular kind of work done, as spinner, weaver, bookkeeper, etc. Laborer

23. Trade, profession, or particular kind of work done, as housekeeper, typist, nurse, clerk, etc. Housewife

15. Industry or business in which work was done, as silk mill, sawmill, bank, etc. Copper Smelter

24. Industry or business in which work was done, as own home, lawyer's office, silk mill, etc. At Home

16. Date (month and year) last engaged in this work February, 1931

25. Date (month and year) last engaged in this work February, 1931

17. Total time (years) spent in this work 10

26. Total time (years) spent in this work 11

27. Number of children of this mother (At time of this birth and including this child) (a) Born alive and now living 4 (b) Born alive but now dead 2 (c) Stillborn _____

28. If stillborn, month of gestation _____ months or weeks _____ 29. Cause of stillbirth _____ } Before labor }
 _____ } During labor }

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born alive at 11:30 P.M. on the date above stated (Born alive or stillborn)

(Signed) Ruperto Martinez Father M.D.
 Address, Hayden, Arizona Midwife

Acknowledged Apr 11, 1934 Justice of the Peace
 Filed April 11th, 1934 Registrar.

N. B. - In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and in case of twins, a SEPARATE RETURN must be made for each, in order of birth stated.

449-209-1119