ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 114

Registered No. 10

1. PLACE OF BIRTH

County Gila State Arizona

District or Township ..... or Village .....

City Miami No. 708 Hill Oak St. St. ..... Ward

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Theodore Vollosteros { 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 Mch 13 1931 (Month Day Year)

8. FATHER

Full name Theodore H Vollosteros

9. Residence (Usual place of abode) Miami

If non-resident, give place and state. Arizona

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

12. Birthplace (city or place) Sonora

(State or country) Mexico

13. Occupation Miner

Nature of industry

14. MOTHER

Full maiden name Ophelia Guzman

15. Residence (Usual place of abode) Miami

If non-resident, give place and state.

16. Color or race Mexican | 17. Age at last birthday 18 (Years)

18. Birthplace (city or place) Cananea

(State or country) Mexico

19. Occupation H W

Nature of industry

20. Number of children of this mother 1 (Taken as of time of birth of child herein certified and including this child.)

(a) Born alive and now living 1

(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 (Born alive or stillborn.) at 1:15 P m. on the date above stated.

* 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 Charles E Winn

Miami Arizona (Physician or midwife).

Given name added from a supplemental report 352-313-675 Month, day, year

Address

Filed Mch 20, 1931 C E Winn Registrar

Registrar