

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 144
Registered No. 711

1. PLACE OF BIRTH
County Gila State ARIZONA
District or Township Lower Miami or Village _____
City MIAMI No. 64 Crown Canyon St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)
2. Full name of child Jesse Lara } 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 twins 6. Legitimate? yes 7. Date Mar 26 1931
of birth Month Day Year

3. FATHER
Full name Jose Lara

14. MOTHER
Full maiden name Julia de la Riva

9. Residence (Usual place of abode) MIAMI, ARIZONA
If non-resident, give place and state.

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

10. Color or race Mexican

11. Age at last birthday 47 (Years)

16. Color or race Mexican

17. Age at last birthday 36 (Years)

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

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

13. Occupation Labor
Nature of Industry Copper Smelter

19. Occupation _____
Nature of Industry Housewife

20. Number of children of this mother: } (a) Born alive and now living 6
(Taken as of time of birth of child herein } (b) Born alive but now dead 2
certified and including this child.) } (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 alive at 3:35 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 F. F. Miller
131-326-191
F. F. MILLER, M. D.
(Physician or midwife.)

Given name added from a supplemental report _____
Month, day, year _____
Address MIAMI, ARIZONA
Jack 30.31 6. E. Jones
Registrar Registrar