

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

State File No. 137a
 Registered No. 127

1. PLACE OF BIRTH

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

2. Full name of child

Carmen Martinez { 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

6. Legitimate?

yes

7. Date of birth

4 20 31
 Month Day Year

8. FATHER

Full name Candido Martinez

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

10. Color or race

Mex.

11. Age at last birthday 28 (Years)

12. Birthplace (city or place)

(State or country) Mexico

13. Occupation

Nature of Industry miner

14. MOTHER

Full maiden name Josefa Gonzalez

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

16. Color or race

Mex.

17. Age at last birthday 25 (Years)

18. Birthplace (city or place)

(State or country) Mexico

19. Occupation

Nature of Industry N.W.

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?

yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was alive at 3:10 p.m. on the date above stated.
(Born alive or stillborn)

Signature [Signature]

(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 supplemental report 3-19-420-179
 Month, day, year

Address Miami

Filed Apr 30, 19 31

Registrar

Registrar

N. B.—In case of more than one child at a birth, a SEPARATE AND ORDERED order of birth stated.