ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 102
Registered No. 38

1. PLACE OF BIRTH

County Gila State Arizona

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

City Hayden No. ..... St., ... Ward
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Miguel Oropeza } 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 May 8 1931 (Month Day Year)

8. FATHER
Full name Francisco Oropeza

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

10. Color or race Mex | 11. Age at last birthday 46 (Years)

12. Birthplace (city or place) ..... (State or country) Jalisco Mex

13. Occupation Taylor
Nature of Industry TAILOR

14. MOTHER
Full maiden name Delfina Enriquez

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

16. Color or race Mex | 17. Age at last birthday 36 (Years)

18. Birthplace (city or place) ..... (State or country) Chihuahua Mex

19. Occupation House wife
Nature of Industry

20. Number of children of this mother 9 (Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living 8
(b) Born alive but now dead 1
(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 ~~or stillborn~~) at 4:30 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 B Hurst MD
(Physician ~~or midwife~~)

Given name added from a supplementl report ..... Month, day, year

Address Hayden Ariz.

Registrar.

Filed 5/9, 1931 E B Nash
Registrar.

461-508-459