WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD

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

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 98

Registered No. 125

1. PLACE OF BIRTH

County Gila State Arizona

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

City Globe No. ..... St. ..... Wa

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

2. Full name of child Refugio Bustamante (If child is not yet named, mak supplemental report, as directe

3. Sex of Child Female | 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 July 6, 1931 (Month Day Year)

8. FATHER

Full name Antonio Bustamante

9. Residence (Usual place of abode) Globe, Arizona

If non-resident, give place and state.

10. Color or race Mexican | 11. Age at last birthday 40 (Years)

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

13. Occupation Nature of Industry Laborer

14. MOTHER

Full maiden name Refugio Backom

15. Residence (Usual place of abode) Globe, Arizona

If non-resident, give place and state.

16. Color or race Mexican | 17. Age at last birthday 39 (Year

18. Birthplace (city or place) El Paso, Texas (State or country)

19. Occupation Nature of Industry Housewife

20. Number of children of this mother fourteen (Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living Ten
(b) Born alive but now dead four
(c) Stillborn none

21. Were precautions taken against op thalmia 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 2 A. m. on the date above stat

* 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 T. C. Harper

physician (Physician or midwife).

Given name added from a supplemental report 925-706-924 Month, day, year

Address Globe, Arizona

Filed 8/7, 1931 S. E. Wightman Registrar

Registrar