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

State File No. 110 AA
Registered No. 165

PLACE OF BIRTH
City Gila 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 Martin Yturri (If child is not yet named, make supplemental report, as directed)

3. Sex of Child Mail — To be answered ONLY in event of plural births. 4. Twin, triplet or other ..... 5. No., in order of birth ..... 6. Legitimate? 7. Date of birth 8 (Month) 5 (Day) 31 (Year)

8. FATHER	14. MOTHER
Full name Pedro Yturri	Full maiden name Maria Cordova
9. Residence (Usual place of abode) Miami. If non-resident, give place and state.	15. Residence (Usual place of abode) Miami. If non-resident, give place and state.
10. Color or race Spaniard — 11. Age at last birthday 39 (Years)	16. Color or race Mexican — 17. Age at last birthday 24 (Years)
12. Birthplace (city or place) Spain (State or country)	18. Birthplace (city or place) Monterey (State or country)
13. Occupation Nature of industry Barber	19. Occupation Nature of industry H. W.

Number of children of this mother 3 (Given as of time of birth of child herein stated and including this child.)
(a) Born alive and now living 2
(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 ..... (Born alive or stillborn) at ..... 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 C. D. Perkins (Physician or midwife).

Given name added from supplemental report 489-805-431 Month, day, year

Address Miami

Filed July 23, 39 C. E. [illegible]

SEPARATE RETURN must be made for each, and the number of each in order of birth stated.