ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 142

Registered No. 231

1. PLACE OF BIRTH

County 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 Louis Valasquez (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 Aug 19-193 (Month Day Year)

8. FATHER

Full name Eulalio Valasquez

9. Residence (Usual place of abode) Miami

If non-resident, give place and state. Ariz.

10. Color or race Mex | 11. Age at last birthday 44 (Years)

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

13. Occupation Nature of industry Mechanic Auto

14. MOTHER

Full maiden name Natalia Gonzalez

15. Residence (Usual place of abode) Miami

If non-resident, give place and state. Ariz.

16. Color or race Mex | 17. Age at last birthday 34 (Years)

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

19. Occupation Nature of industry H. W.

20. Number of children of this mother 10 (Taken as of time of birth of child herein certified and including this child.)

(a) Born alive and now living 7

(b) Born alive but now dead 2

(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 at 10 P. 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 Charles E. Irwin M.D. (Physician or midwife).

Given name added from a supplemental report 359-819-572 (Month, day, year)

Address Miami Ariz.

Registrar

Filed Aug 23 1931 C. E. Irwin Registrar

WRITE PLAINLY WITH UNFADING INK—THIS IS A

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.