156

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

State File No. 264
Registered No.

1. PLACE OF BIRTH

County: Gila State: ARIZONA

District or Township: Live Oak or Village:

City: MIAMI No. K-16 Live Oak Cyn St. Ward
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child: Avigail Padilla (If child is not yet named, make supplemental report, as directed.)

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: Aug 27 193 (Month Day Year)

8. FATHER
Full name: Camuto Padilla

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

10. Color or race: Mexican

11. Age at last birthday: 31 (Years)

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

13. Occupation: Surface laborer
Nature of Industry: Copper mine

14. MOTHER
Full maiden name: Catalina Linon

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

16. Color or race: Mexican

17. Age at last birthday: 29 (Years)

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

19. Occupation: Housewife
Nature of Industry:

20. Number of children of this mother (Taken as of time of birth of child herein certified and including this child.) 6
(a) Born alive and now living: 4
(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 alive (Born alive or stillborn) at 3:30 a.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: F. F. Miller
F. F. MILLER, M.D.
(Physician or midwife).

Address: MIAMI, ARIZONA

Given name added from a supplemental report (Month, day, year)

171-827-335
Registrar

Filed Sep 2, 1931 L. E. Drew
Regist.

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.