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ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No.

Registered No. 289

1. PLACE OF BIRTH

County: Gila State: Arizona

District or Township: or Village: P. O. Box 118 Miami

City: Miami No. 80 Red Springs Canon Ward

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

2. Full name of child: Arturo Sanchez { 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: Sept. 15 - 1931. (Month Day Year)

8. FATHER

Full name: Becente Sanchez

9. Residence (Usual place of abode): Miami

If non-resident, give place and state: Arizona

10. Color or race: Mex.

11. Age at last birthday: 34 (Years)

12. Birthplace (city or place): Durango,

(State or country): Mex.

13. Occupation

Nature of industry: Miner

14. MOTHER

Full maiden name: Consuela Mendoza

15. Residence (Usual place of abode): Miami

If non-resident, give place and state: Arizona

16. Color or race: Mex.

17. Age at last birthday: 29 (Years)

18. Birthplace (city or place): Durango,

(State or country): Mex.

19. Occupation

Nature of industry: Housewife

20. Number of children of this mother (Taken as of time of birth of child herein certified and including this child.): 4

(a) Born alive and now living: 4

(b) Born alive but now dead: 0

(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 (Born alive or stillborn) at 8 45 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: Cyril M. Crow M. D. (Physician or midwife)

Address: Miami, Arizona.

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

129-915-341

Registrar

Filed Oct 2, 1931 G. E. Davis

Registrar