

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

State File No. 1333
 Registered No. 311

1. PLACE OF BIRTH
 County Gila State Arizona
 District or Township _____ or Village _____
 City Miami No. 724 Church Hill St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Ophelia Luna { 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 Oct. 26-1931
Month Day Year

8. FATHER
 Full name Rafael Luna
 9. Residence (Usual place of abode) Miami, Arizona
If non-resident, give place and state.
 10. Color or race Mex.
 11. Age at last birthday 25 (Years)
 12. Birthplace (city or place) Jalisco, Mex.
(State or country)
 13. Occupation
 Nature of Industry Miner

14. MOTHER
 Full maiden name Angelina Madril
 15. Residence (Usual place of abode) Miami, Arizona
If non-resident, give place and state.
 16. Color or race Mex.
 17. Age at last birthday 23 (Years)
 18. Birthplace (city or place) Tucson, Arizona
(State or country)
 19. Occupation
 Nature of Industry Housewife

20. Number of children of this mother 4
(Taken as of time of birth of child herein certified and including this child)
 (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 at 11:30 a. m. on the date above stated.
(Born alive or stillborn)

Signature Cyril M. Brown, M.D.
(Physician or midwife)

Given name added from a supplemental report _____
 Address Miami, Arizona
 Filled Nov 5, 1931 C. E. Dravin
Month, day, year Registrar

MARGIN RESERVED FOR BINDING
 WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD
 N. E.—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.