

ARIZONA STATE BOARD OF HEALTH

108

1. PLACE OF BIRTH

BUREAU OF VITAL STATISTICS

State File No.

STANDARD CERTIFICATE OF BIRTH

Registered No.

County: Sila State

Township

City: Winkelman or Village

2. Full name of child: Juan R. Lopez Jr (If birth occurred in a hospital or institution, give its NAME instead of street and number) Ward

If child is not yet named, make supplemental report, as directed

Sex: Male 3. Twin, triplet, or other

9. Full name of FATHER: Juan R. Lopez

10. Full name of MOTHER: Manuela Pural

11. Residence (usual place of abode) (If non-resident, give place and State): Winkelman

12. Residence (usual place of abode) (If non-resident, give place and State): Winkelman

13. Color of hair: Black 14. Age at last birthday (Years): 3

15. Color or race: Mex 16. Age at last birthday (Years): 7

17. Birthplace (city or place) (State or country): Arizona

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

19. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc.: Teacher

20. Trade, profession, or particular kind of work done, as housekeeper, typist, nurse, clerk, etc.: Housewife

21. Industry or business in which work was done, as silk mill, sawmill, bank, etc.: Teacher

22. Industry or business in which work was done, as own home, lawyer's office, silk mill, etc.: Home

23. Date (month and year) last engaged in this work: 19

24. Date (month and year) last engaged in this work: 19

25. Number of children of this mother (At time of this birth and including this child) (a) Born alive and now living: 3 (b) Born alive but now dead: 0 (c) Stillborn: 0

26. If stillborn, period of gestation: months or weeks 27. Cause of stillbirth: Before labor / During labor

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE - 00

I hereby certify that I attended the birth of this child, who was born alive at 3:20 m. on the date above stated

When there was no attending physician or midwife, then the father, householder, etc., should make this return.

(Signed) Charles H. Hurlbut, M.D.

Given named added from a supplemental report (Date of)

or

Address: Oct 8th 1932 PG Hurlbut

Filed: Oct 8th 1932 PG Hurlbut Registrar.

139-918-423