ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

1. PLACE OF BIRTH

State File No. 16

Registered No. 344

County Cochise State Arizona

Township Paul Spur or Village

City No. St. Ward

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

2. Full name of child Raymundo Acevedo — If child is not yet named, make supplemental report, as directed

3. Sex Male | If plural births: 4. Twin, triplet, or other 0; 5. Number, in order of birth 0 | 6. Premature 0; Full term Yes | 7. Legitimate? Yes | 8. Date of birth Dec. 2, 1932 (Month, day, year)

FATHER

9. Full name Raymundo Acevedo

10. Residence (usual place of abode) (If non-resident, give place and State) Paul Spur, Ariz.

11. Color or race Mex. | 12. Age at last birthday 26 (Years)

13. Birthplace (city or place) Cananea, (State or country) Son., Mex.

OCCUPATION

14. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Laborer

15. Industry or business in which work was done, as silk mill, sawmill, bank, etc. lime quarry

16. Date (month and year) last engaged in this work Dec., 1932 | 17. Total time (years) spent in this work 8

MOTHER

18. Full maiden name Andrea Escalante

19. Residence (usual place of abode) (If non-resident, give place and State) Paul Spur, Ariz.

20. Color or race Mex. | 21. Age at last birthday 26 (Years)

22. Birthplace (city or place) Bacadeouach (State or country) Son., Mex.

OCCUPATION

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

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

25. Date (month and year) last engaged in this work Dec., 1932 | 26. Total time (years) spent in this work 6

27. Number of children of this mother (At time of this birth and including this child) (a) Born alive and now living 4 (b) Born alive but now dead 0 (c) Stillborn 0

28. If stillborn, period of gestation -0- months or weeks | 29. Cause of stillbirth -0- | Before labor -0- | During labor -0-

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born alive at 3:45 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.)

(Signed) Jack Hild, M.D.

or Jack Hild, Midwife

Address 1060 G Ave., Douglas, Ariz.

Given named added from supplemental report (Date of)

916-1202-155 Registrar.

Filed 1/1, 1933 [signature] Registrar.