CATE OF BIRTH

legal, or economic—in which the evidence
test value, not only to the individual, but
certificates but good business, for they are

o in the administration of estates, the settle-
and pensions;
ce to prove the irresponsibility of children
for crime and misdemeanor, and various
the criminal code;
ce in the enforcement of law relating to
child labor;
ce to determine the relations of guardians

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MARGIN RESERVED FOR BINDING
USE PERMANENT INK

ARIZONA STATE DEPARTMENT OF HEALTH
DIVISION OF VITAL STATISTICS
SUPPLEMENTARY REPORT OF BIRTH

(This return should preferably be made by the person who made the original)

County Registrar's No.*.....

Place of Birth Claypool (Registration District) County Gila No..... St.

SEX OF CHILD*	Twin Triplet or other?	and	Number in order of birth
male			

DATE OF BIRTH* Dec. (Month) 24 (Day) 1932 (Year)

FULL NAME — FATHER: Aristeo Echeveste

FULL MAIDEN NAME — MOTHER: Ramona Padilla

I HEREBY CERTIFY that the child described herein has been named

Samuel (Give name in full) Echeveste (Surname)

Ramona Echeveste (Parent's Signature)

(Signature of Physician or Midwife)

*These items to be entered by the local registrar before giving out this form.

Blank supplemental reports of birth may be obtained from the local registrar.

10M—8-42—Bower Co.

255-1224-971

011—7117