ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 1270a

Registered No.

1. PLACE OF BIRTH

County Gila State Arizona

Township or Village

City Miami No. 4115 Corcoran Ave. St. Ward

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

2. Full name of child Antonia Padilla (If child is not yet named, make supplemental report, as directed)

3. Sex Female | If plural births: 4. Twin, triplet, or other; 5. Number, in order of birth | 6. Premature; Full term | 7. Legitimate? yes | 8. Date of birth May 11, 1933 (Month, day, year)

FATHER

9. Full name Felix Padilla

10. Residence (usual place of abode) (If nonresident, give place and State) Miami Ariz

11. Color or race Mex | 12. Age at last birthday 28 (Years)

13. Birthplace (city or place) Jalisco Mexico (State or country)

OCCUPATION

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

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

16. Date (month and year) last engaged in this work May 1, 1932 | 17. Total time (years) spent in this work 10

MOTHER

18. Full maiden name Antonia Medina

19. Residence (usual place of abode) (If nonresident, give place and State) Miami Ariz

20. Color or race Mex | 21. Age at last birthday 24 (Years)

22. Birthplace (city or place) Globe Arizona (State or country)

OCCUPATION

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

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, 19 | 26. Total time (years) spent in this work

27. 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 none (c) Stillborn none

28. If stillborn, period of gestation no (months or weeks) | 29. Cause of stillbirth — Before labor — During labor

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 3 30/a m. on the date above stated

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

(Signed) Cyril M. Cron, M.D.

or Midwife

Given name added from a supplemental report 171-511-141 (Date of)

Address Miami Arizona

June 30 1933 [illegible] Registrar

Registrar