ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 44
Registered No. 99
Arizona

1. PLACE OF BIRTH

County Cochise State Arizona
Township Bisbee or Village
City Bisbee No. St. Ward
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Gloria Anne Echave [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 8 1934 (Month, day, year), 19

FATHER	MOTHER
9. Full name Alberto Echave	18. Full maiden name Emma Rientord
10. Residence (usual place of abode) (If non-resident, give place and State) Bisbee	19. Residence (usual place of abode) (If non-resident, give place and State) Bisbee
11. Color or race Mexican; 12. Age at last birthday 45 (Years)	20. Color or race Mexican; 21. Age at last birthday 26 (Years)
13. Birthplace (city or place) Hermosillo (State or country) Sonora	22. Birthplace (city or place) Cananea (State or country) Sonora
OCCUPATION: 14. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Clothes Cleaner; 15. Industry or business in which work was done, as silk mill, sawmill, bank, etc.; 16. Date (month and year) last engaged in this work, 19; 17. Total time (years) spent in this work	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 5 (b) Born alive but now dead 2 (c) Stillborn ------

28. If stillborn, period of gestation 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 a. m. on the date above stated

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

Given name added from a supplemental report 755-508-594 (Date of)

(Signed) Thos. Watkins, M. D.
or
Address Bisbee Ariz
Filed May 31, 1934 R. B. Lemberg Registrar.

Registrar.

N. B.—In case of more than one ch... NT RECORD each, and the number of each

10M 2-8-33 MB-47971