

420

MADE IN U.S.A. CALIFORNIA
In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each, in order of birth, stated. This certificate must be filed by the attending Physician or Midwife with the Local Registrar within 8 days after birth.

ARIZONA TERRITORIAL BOARD OF HEALTH

BUREAU OF VITAL STATISTICS. 315201
ORIGINAL CERTIFICATE OF BIRTH. Co. Registrar No. 59

PLACE OF BIRTH
County of Yuma,
District of Yuma,
Town of _____
or
City of Yuma,

Local Registrar's No. _____

(No. _____ St; _____ Ward)

FULL NAME OF CHILD Thomas Mendoza, { Born } **YES**
{ Alive } **NO**

If child is not named, make Supplemental Report on blank obtainable from local registrar.

Sex of Child Male { Twin, Triplet or other } _____ and { Number; in order of birth } _____ Legitimate? Yes Date of Birth May, 23, 1911
(Month) (Day) (Yr.)

FATHER
Full Name Thomas Mendoza,
Residence Dead,
Color or Race Mexican Age at last Birthday 21 (Years)
Birthplace Yuma, Ariz.
Occupation Laborer,

MOTHER
Full Maiden Name Jesus Coz,
Residence Yuma, Ariz.
Color or Race Mexican, Age at last Birthday 18 (Years)
Birthplace Mohawk, Ariz.
Occupation Housewife,

Number of child of this mother 1 Number of children, of this mother, now living 1 Were Precautions taken against Ophthalmia neonatorum? **YES**

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of above child; and that it occurred on May, 23, 1911, I, Am

*When there is no attending physician or midwife, then the householder should make this return.

(Signature) E. B. Ketchum, D.
(Attending physician, midwife, householder)

Given or christian name added from a supplemental report _____ 1911

Address Yuma, Ariz.

Filed May 20 1911

Henri Ketchum
REGISTRAR

Filed May 23 1911

E. B. Ketchum
REGISTRAR

341-503-139
COUNTY REGISTRAR