960

Write [illegible]ly, with Unfading Ink.—This is a Permanent Record.

N. B.—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 5 days after birth.

ARIZONA TERRITORIAL BOARD OF HEALTH

BUREAU OF VITAL STATISTICS. 91

ORIGINAL CERTIFICATE OF BIRTH. Ter. Index No. ~~[illegible]~~

Register No. 145

PLACE OF BIRTH

County of Gila

District of

Town of or City of Globe

(No. St.; Ward)

FULL NAME OF CHILD Carlos Alvarez — Born Alive Yes ~~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 1 — Legitimate? Yes — Date of Birth July (Month) 8 (Day) 1911 (Year)

FATHER		MOTHER	
Full Name	Julio Alvarez	Full Maiden Name	Elena Valencia
Residence	Globe Ariz.	Residence	Globe Ariz.
Color or Race	Mexican	Color or Race	Mexican
Age at last Birthday	29 (Years)	Age at last Birthday	25 (Years)
Birthplace	Durango Mex	Birthplace	Florence Ariz
Occupation	Laborer	Occupation	Housewife

Number of child of this mother 4 — Number of children, of this mother, now living 4 — 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 July 8, 1911, at 12 M

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

(Signature) J. L. Walls (Attending physician, ~~midwife, householder.~~*)

Given or christian name added from a supplemental report ..... 19.....

Filed 7/12 1911 — Address Globe, Ariz.

A TRUE COPY. — B. G. Fox, LOCAL REGISTRAR.

319-708-551 COUNTY REGISTRAR. — Filed 7/12 1911 — B. G. Fox, Now COUNTY REGISTRAR