4893

WRITE PLAINLY, 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.

PLACE OF BIRTH

County of Gila

District of Globe

Town of

or

City of Globe

ARIZONA TERRITORIAL BOARD OF HEALTH

BUREAU OF VITAL STATISTICS.

ORIGINAL CERTIFICATE OF BIRTH.

Ter. Index No. 83

Co. Register No. 65

Local Registrar's No. 54

(No. ..... St; ..... Ward)

FULL NAME OF CHILD Ynes Castenada

Born / Alive YES / ~~NO~~

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

Sex of Child Female | Twin, Triplet or other plural ✓ | and | Number; in order of birth ✓ | Legitimate? Yes | Date of Birth April (Month) 7 (Day) 1912 (Yr.)

FATHER		MOTHER	
Full Name	Jose Castenada	Full Maiden Name	Enobedia Granado
Residence	Euclid Ave.	Residence	Same
Color or Race	Mexican	Color or Race	Mexican
Age at last Birthday (Years)	20	Age at last Birthday (Years)	23
Birthplace	Mexica	Birthplace	Mexica
Occupation	Miner	Occupation	Housewife

Number of child of this mother 3 | Number of children, of this mother, now living 3 | 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, April 7 *1912, at* 2 P.M

(Signature) C. J. Sturgeon
(Attending physician, midwife, householder.)*

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

Given or christian name added from a supplemental report ..... *191*.....

Address .....

Filed Apr 10" 1912 — B. G. Fox, LOCAL REGISTRAR.

831-407-174 — COUNTY REGISTRAR.

Filed May 1 1912 — B. G. Fox MD, COUNTY REGISTRAR.