192

**PLACE OF BIRTH**

County of Gila

District of Globe

Town of Miami

or

City of

# ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS.

State Index No. 130

ORIGINAL CERTIFICATE OF BIRTH.

Co. Register No. 220

Local Registrar's No.

(No. Typhoid gulch Street # 16 St; Ward)

FULL NAME OF CHILD Emanuel Naranjo

Born Alive YES ~~NO~~

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

| Sex of Child | Twin, Triplet or other | Number in order of birth | Legitimate? | Date of Birth |
|---|---|---|---|---|
| male | | | yes | July 31, 1913 (Month) (Day) (yr.) |

| FATHER | MOTHER |
|---|---|
| Full Name: Emanuel Naranjo | Full Maiden Name: Inez Lopalida |
| Residence: Typhoid gulch | Residence: Typhoid gulch |
| Color or Race: Mexican | Color or Race: Mexican |
| Age at last Birthday: 40 (Years) | Age at last Birthday: 38 (Years) |
| Birthplace: New Mexico | Birthplace: New Mexico |
| Occupation: Miner | Occupation: Housewife |

Number of child of this mother 7 | 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 31, 1913, at 11 a. M.

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

(Signature) W. F. Mills

(Attending physician, midwife, ~~householder~~.*)

Given or christian name added from a supplemental report 191

Address (Box 100) Miami, Ariz.

Filed 9/15 1913 B. G. Jay

LOCAL REGISTRAR.

Filed 10/5 1913 A True Copy B. G. Jay M.D.

COUNTY REGISTRAR.

526-731-731

COUNTY REGISTRAR.

This certificate must be filed by the attending physician or midwife with each local Registrar within 5 days after birth.