1165

Midwife with each local Registrar within 5 days after birth.

**PLACE OF BIRTH**

County of Gila

District of Arizona

Town of Winkleman

or

City of

# ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS.

ORIGINAL CERTIFICATE OF BIRTH.

State Index No. 105 ~~688~~

Co. Register No. 268

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD

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 | and | Number in order of birth | Legitimate? | Date of Birth |
|---|---|---|---|---|---|
| Male | L | | | Yes | Sept. (Month) 7 (Day) 1913 (yr.) |

| FATHER | | MOTHER | |
|---|---|---|---|
| Full Name | Jaun Barrios | Full Maiden Name | Luz Calles. |
| Residence | Winkleman, Ariz. | Residence | Winkleman, Ariz |
| Color or Race | Mexican. Age at last Birthday 28 (Years) | Color or Race | Mexican. Age at last Birthday 20 (Years) |
| Birthplace | Mexico. | Birthplace | Mexico |
| Occupation | Laborer | Occupation | House-wife. |

Number of child of this mother 1st | 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 Sept. 7 1913, at 2 A.M.

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

(Signature) M. G. Marden. M.D.
(Attending physician, midwife, householder.*)

Given or christian name added from a supplemental report 191

Address Winkleman, Arizona.

Filed Oct 1 1913. F. P. Norman
LOCAL REGISTRAR.

A True Copy

022-907-332
COUNTY REGISTRAR.

Filed Nov 15 1913

B. G. Fox
COUNTY REGISTRAR.