

153

PLACE OF BIRTH

County of Selma
District of Globe
Town of _____
or _____
City of Globe

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS **110** State Index No. **884**

ORIGINAL CERTIFICATE OF BIRTH

Co. Registrar No. 239

Local Registrar's No. _____

(No. _____ St; _____ Ward)

FULL NAME OF CHILD Guadalupe Garcia

If child is not named, make Supplemental Report on blank obtainable from local registrar. } Born } YES
Alive } NO

Sex of Child Female Twin, Triplet or other Other and { Number in order of birth 1 Legiti- mate? yes Date of Birth Sept. 1, 1915
(Month) (Day) (Yr.)

Full Name FATHER
V. Garcia
Residence Globe, Ariz.
Color or Race Mexican Age at last Birthday 19
(Years)
Birthplace Mexico
Occupation Smelterman

Full Maiden Name MOTHER
Ella Tewksbury
Residence B. Globe, Ariz.
Color or Race Mexican Age at last Birthday 17
(Years)
Birthplace Globe, Ariz.
Occupation Housewife

Number of child of this mother... 2 Number of children, of this mother, now living... 2 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. 1, 1915, at 8.30 P. M.
*When there is no attending physician or midwife, then the householder should make this return.

(Signature) [Signature]
(Attending physician, midwife, householder*)

Given or christian name added from a supplemental report _____ 191_____

Address _____

Filed Sept 10 1915 B. J. J. at
LOCAL REGISTRAR.

771-901-538
COUNTY REGISTRAR.

Filed Oct 1 1915 B. J. J. at
A True Copy
COUNTY REGISTRAR.