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PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

County of Gila
District of Arizona
Town of Miami
or
City of _____

BUREAU OF VITAL STATISTICS **125** State Index No. **906**

ORIGINAL CERTIFICATE OF BIRTH

Co. Register No. 338

Local Registrar's No. _____

FULL NAME OF CHILD Francisco Sanchez

Born } YES
Alive } ~~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 3rd } Legitimate? yes Date of Birth Dec. 3 - 1915
(Month) (Day) (Yr.)

FATHER
Full Name Gregorio Sanchez
Residence Chihuahua Hill
Color or Race Mex Age at last Birthday 25 (Years)
Birthplace Jalisco, Mexico
Occupation Mill

MOTHER
Full Maiden Name Anilida Navarette
Residence Chihuahua Hill
Color or Race Mex Age at last Birthday 23 (Years)
Birthplace Sinaloa, Mexico
Occupation Housewife

Number of child of this mother 3rd 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 Dec 3, 1915, at 10¹⁵ AM.

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

(Signature) C. M. Cronino
(Attending physician, midwife, householder. *)

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

Address Box 24 - Miami

Filed Dec 10 1915

John H. Tracy
LOCAL REGISTRAR

629-1203-155
COUNTY REGISTRAR.

Filed Jan 7 1916

A True Copy
B. E. Fox
COUNTY REGISTRAR.