

4399

ARIZONA STATE BOARD OF HEALTH  
BUREAU OF VITAL STATISTICS  
STANDARD CERTIFICATE OF BIRTH

State File No. 114-A  
Registered No. 10

1. PLACE OF BIRTH  
County Gila State Arizona  
District or Township \_\_\_\_\_ or Village \_\_\_\_\_  
City Hayden No. \_\_\_\_\_ St. \_\_\_\_\_ Ward \_\_\_\_\_  
(If birth occurred in a hospital or institution, give its NAME instead of street and number)  
2. Full name of child Enrique Portillo } If child is not yet named, make supplemental report, as directed.

3. Sex of Child Male To be answered ONLY in event of plural births. } 4. Twin, triplet or other. \_\_\_\_\_ } 6. Legitimate? yes } 7. Date of birth April 13 1916  
5. No. in order of birth. \_\_\_\_\_ } Month Day Year

8. FATHER  
Full name Lucio Portillo  
9. Residence (Usual place of abode) Hayden, Ariz.  
If non-resident, give place and state. \_\_\_\_\_  
10. Color or race Mexican  
11. Age at last birthday 26 (Years)  
12. Birthplace (city or place) Casa Grande  
(State or country) Chihuahua, Mexico  
13. Occupation Barker  
Nature of Industry \_\_\_\_\_

14. MOTHER  
Full maiden name Elisa Mendoza  
15. Residence (Usual place of abode) Hayden, Ariz.  
If non-resident, give place and state. \_\_\_\_\_  
16. Color or race Mexican  
17. Age at last birthday 25 (Years)  
18. Birthplace (city or place) El Triunfo  
(State or country) Lower California Mex  
19. Occupation Housewife  
Nature of Industry \_\_\_\_\_

20. Number of children of this mother... } (a) Born alive and now living... 4  
(Taken as of time of birth of child herein } (b) Born alive but now dead... 0  
certified and including this child.) } (c) Stillborn \_\_\_\_\_ } 21. Were precautions taken against ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE \*  
I hereby certify that I attended the birth of this child, who was \_\_\_\_\_ at 4:00 A. m. on the date above stated.  
(Born alive or stillborn)  
\*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.  
Signature Lucio Portillo Father  
(Physician or midwife.)  
Given name added from a supplemental report \_\_\_\_\_ Address Hayden Arizona  
Month, day, year 5/13/20 Filed 2/24/20 W.D. Paul  
Registrar. Registrar.

MARGIN RESERVED FOR BINDING  
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.