

PLACE OF BIRTH
 County of Sala
 District of Globe
 Town of Globe
 or
 City of Globe (No. _____ St; _____ Ward)

ARIZONA STATE BOARD OF HEALTH
 BUREAU OF VITAL STATISTICS 126 State Index No. 627
 ORIGINAL CERTIFICATE OF BIRTH Co. Register No. 203
 Local Registrar's No. _____

FULL NAME OF CHILD Victoria Alvarado { Born } YES
 { Alive } ~~NO~~
 If child is not named, make Supplemental Report on blank obtainable from local registrar.

Sex of Child Female Twin, Triplet or other _____ } and } Number in order of birth _____ Legiti- mate? yes Date of Birth April 12 1917
 (Month) (Day) (Yr.)

FATHER
 Full Name Manuel Alvarado
 Residence Globe, Ariz.
 Color or Race Mexican Age at last Birth 35 (Years)
 Birthplace Mexico
 Occupation Miner

MOTHER
 Full Maiden Name Criscence Zapata
 Residence Globe, Ariz.
 Color or Race Mexican Age at last Birth 26 (Years)
 Birthplace Monterey, Mexico
 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 the above child; and that it occurred on April 12 1917, at 6:4:M.
 *When there is no attending physi- cian or midwife, then the householder should make this return. (Signature) Alvin Kernal M.D.
 (Attending physician, midwife, householder.)

Given or Christian name added from a supplemental report... 191...
 Address Globe, Ariz.
 Filed July 17 1917 LOCAL REGISTRAR. B. E. Fox
 Filed June 15 1917 A True Copy COUNTY REGISTRAR. B. E. Fox

of midwife when such local Registrar within 5 days after birth.

516-412-391
 COUNTY REGISTRAR.