

970

PLACE OF BIRTH Globe
 County of Globe
 City of Globe
 State of Arizona
 Ward

ARIZONA STATE BOARD OF HEALTH
 BUREAU OF VITAL STATISTICS **140** State Index No. 676
ORIGINAL CERTIFICATE OF BIRTH Co. Register No. 257
 Local Registrar's No. _____
 St; _____

Full Name of Child _____ { Born } YES
 { Alive } NO
 If child is not named, make Supplemental Report on blank obtainable from local registrar.

Sex of child <u>Male</u>	Twin, Triplet or other <u>Other</u>	and	Number in order of birth <u>1st</u>	Legitimate <u>Yes</u>	Date of Birth <u>Aug 3</u> 191 <u>7</u> (Month) (Day) (Yr.)
FATHER			MOTHER		
Name <u>Alex. Mancias</u>			Name <u>Victoria Guerrero</u>		
Residence <u>Globe Ariz</u>			Residence <u>Globe Ariz</u>		
Color or Race <u>Half white</u>		Age at last Birthday <u>35</u> (Years)	Color or Race <u>Mex.</u>		Age at last Birthday <u>35</u> (Years)
Birthplace <u>Tucson Ariz</u>			Birthplace <u>Silver City New Mex</u>		
Occupation <u>Butcher</u>			Occupation <u>Housewife</u>		

Number of child of this mother 11 | 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 the above child; and that it occurred on Aug 3 1917, at 6:30 A.M.

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

(Signature) W. W. Horst, M.D.
 (Attending physician, midwife, householder.)

Address Globe Ariz

Given or Christian name added from a Supplemental report _____ 191...

Filed Aug 4 1917

R. S. Sator
 LOCAL REGISTRAR.

046-803-571
 COUNTY REGISTRAR.

Filed Sept 5 1917 A True Copy

R. G. Seal
 COUNTY REGISTRAR.