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

ARIZONA STATE BOARD OF HEALTH
 BUREAU OF VITAL STATISTICS 176 State Index No. 705
 ORIGINAL CERTIFICATE OF BIRTH Co. Register No. 73

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

Sex of Child Female Twin, Triplet or other } and } Number in order of birth } Legitimate? Yes Date of Birth Aug 26 1917
 (Month) (Day) (Yr.)

FATHER
 Full Name Jorgonio Londeros
 Residence Globe, Ariz.
 Color or Race Mexican Age at last Birthday 29 (Years)
 Birthplace Halisco, Mexico
 Occupation Miner

MOTHER
 Full Maiden Name Julia Armandis
 Residence Globe, Ariz.
 Color or Race Mexican Age at last Birthday 28 (Years)
 Birthplace Halisco, Mexico
 Occupation Housewife

Number of child of this mother 3 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 26 1917, at 9 P. M.
 *When there is no attending physician or midwife, then the householder should make this return. (Signature) Alvin Formae M.D.
 (Attending physician, midwife, householder.)

Given or Christian name added from a Supplemental report _____ 191____
 Filed Sept 1 1917 Address _____
332-826-812 Filed Sept 5 1917 A True Copy
 COUNTY REGISTRAR. COUNTY REGISTRAR.