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R. A. WATKINS PRINTING CO., PHOENIX

PLACE OF BIRTH
 County of Dela
 District of Miami
 City of Miami

ARIZONA STATE BOARD OF HEALTH
 BUREAU OF VITAL STATISTICS

State Index No. 100
 Co. Register No. 128
 Local Registrar's No. _____

ORIGINAL CERTIFICATE OF BIRTH
 (No. _____ St. _____ Ward _____)

LEGAL NAME OF CHILD Munoo
 Child is not named, make Supplemental Report on blank obtainable from local registrar. } Born NO
 Alive YES

Sex of child <u>Female</u>	Twin, Triplet or other <u>None</u>	and	Number in order of birth <u>1</u>	Legitimate? <u>Yes</u>	Date of Birth <u>Feb 19 1919</u> (Month) (Day) (Yr.)
FATHER			MOTHER		
Name <u>Devito Munoo</u>			Full Maiden Name <u>Tersea Campos</u>		
Residence <u>Missouri Ave</u>			Residence <u>Miami Ave</u>		
Color or Race <u>Mexican</u>			Color or Race <u>Mex.</u>		
Age at last Birthday <u>25</u> (Years)			Age at last Birthday <u>20</u> (Years)		
Birthplace <u>Mexico</u>			Birthplace <u>Mexico</u>		
Occupation <u>Miner</u>			Occupation <u>Str.</u>		

Number of child this mother 3 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 Feb 19 1919 at 7 AM.

(Signature) Rebecca Brayton
 (Attending physician, midwife, householder.)

Supplemental report _____ 191____ Address 200 Brayton
 Filed Feb 20 1919 LOCAL REGISTRAR.

042-319-332
 COUNTY REGISTRAR.

A True Copy
 Filed Apr 5 1919

R. S. J. W.
 COUNTY REGISTRAR.