

2476

or midwife with each local Registrar within 5 days after birth.

PLACE OF BIRTH
 County of Pima
 District of _____
 Town of _____
 or _____
 City of Hayden (No. Corona St. _____ Ward)

ARIZONA STATE BOARD OF HEALTH
 BUREAU OF VITAL STATISTICS

State Index No. 149
 Co. Registrar's No. 360
 Local Registrar's No. _____

ORIGINAL CERTIFICATE OF BIRTH

FULL NAME OF CHILD Eva Corona 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 1 Legitimate? yes Date of Birth June 25 1919
 Month June Day 25 Yr. 1919

FATHER
 Full Name Pablo Ortiz Corona
 Residence San Pedro
 Color or Race Mex Age at last Birthday 27 Years
 Birthplace Tucson, Ariz
 Occupation Store Keeper

MOTHER
 Full Maiden Name Martha Shaeuf
 Residence San Pedro
 Color or Race Am. Age at last Birthday 20 Years
 Birthplace Yuma, Ariz
 Occupation Housewife

Number of child of this Mother 1 Number of Children, of this mother, now living 1 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 June 25 1919, at 10:4 M.

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

Signature Louise Wood
 Attending physician, midwife, householder.*

Given or Christian name added from a supplemental report _____ 1919

Address Winkelman, Ariz
W.B. Dask
 LOCAL REGISTRAR.

531-625-427
 COUNTY REGISTRAR.

Filed June 26 1919
 Filed JUL 7 1919

A True Copy
B.G. Fox
 COUNTY REGISTRAR.