168

PLACE OF BIRTH

County of Gila

District of

Town of Miami

or

City of

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 123

Co. Register No. 401

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD Carmen Reina

If child is not named, make Supplemental Report on blank obtainable from local registrar.

Born / Alive: YES ~~NO~~

Sex of Child	Twin, Triplet or other	and	Number in order of birth	Legitimate	Date of Birth
Female				Yes	July 16 1919 (Month) (Day) (Yr.)

FATHER		MOTHER	
Full Name	Angel Reina	Full Maiden Name	Juana Espinosa
Residence	Miami, Ariz	Residence	Miami, Ariz
Color or Race	Mexican	Color or Race	Mexican
Age at last Birthday	25 (Years)	Age at last Birthday	24 (Years)
Birthplace	Mexico	Birthplace	Mexico
Occupation	Miner	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 July 16 1919, at 12:30 P.M.

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

(Signature) C R Swackhamer M D

(Attending physician, ~~midwife, householder~~.*)

Given or Christian name added from a supplemental report 191

Address Miami, Ariz.

Filed July 20 1919.

N D Brayton

LOCAL REGISTRAR.

391-716-151

COUNTY REGISTRAR.

Filed AUG 6 1919

A True Copy

B S Fox

COUNTY REGISTRAR.