1538

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 127

Co. Registrar's No. 477

Local Registrar's No. .....

PLACE OF BIRTH

County of Gila

District of .....

Town of Hayden

or

City of ..... (No. ..... St: ..... Ward)

FULL NAME OF CHILD Lorenzo Rodriguez

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

Born Alive YES ~~NO~~

Sex of Child Male | ~~Twin, Triplet~~ or other 1 | and | Number in order of birth 1st | Legitimate? yes | Date of Birth Sep. Month 10 Day 1919 Yr.

FATHER		MOTHER	
Full Name	Refugio Rodriguez	Full Maiden Name	Felysa Mendez
Residence	Hayden	Residence	Hayden
Color or Race	Mexican	Color or Race	Mexico
Age at last Birthday	33 Years	Age at last Birthday	23 Years
Birthplace	Mexico	Birthplace	Chihuahua, Mexico
Occupation	Laborer	Occupation	Housewife

Number of child of this Mother 5 | Number of Children, of this mother, now living 5 | 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. 10th 1919, at 2 A.M.

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

Signature George E. Shields M.D.

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

Address Hayden

Given or Christian name added from a supplemental report ..... 191..

Filed Sept 11 1919

W. B. Nash

LOCAL REGISTRAR.

399-910-349

COUNTY REGISTRAR.

Filed Oct 6 1919

A True Copy

B. G. Fox

COUNTY REGISTRAR.

No. Begin case of mother, ... This certificate must be filed by the attending Physician the number of each, in order of birth, stated, or midwife with each local Registrar within 5 days after birth.