9571

STILL BIRTH.

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 156
Co. Register No. 534
Local Registrar's No.

PLACE OF BIRTH
County of Gila
District of
Town of
or
City of Miami

(No. St; Ward)

FULL NAME OF CHILD Hernandez
If child is not named, make Supplemental Report on blank obtainable from local registrar.

Born Alive: YES / NO

Sex of Child: Female | Twin, Triplet or other | and | Number in order of birth | Legitimate? | Date of Birth Sept. 20 1919 (Month) (Day) (Yr.)

FATHER		MOTHER	
Full Name	Jose Hernandez.	Full Maiden Name	Felice Gererro
Residence	Miami	Residence	Miami
Color or Race	Mexican	Color or Race	Mexican
Age at last Birthday	35 (Years)	Age at last Birthday	24 (Years)
Birthplace	Mexico	Birthplace	Mexico
Occupation	Brakeman in mine	Occupation	House wife

Number of child of this mother 3 | Number of Children, of this mother, now living 0 | Were precautions taken against Ophthalmia neonatorum? —

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child; and that it occurred on Sept. 20 1919, at 5 P.M.

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

(Signature) [signature] M.D.
(Attending physician, midwife, householder.*)

Address Miami, Ariz.

Given or Christian name added from a supplemental report 191

Filed Nov 5 1919. [signature] LOCAL REGISTRAR.

A True Copy

089-920-676
COUNTY REGISTRAR.

Filed Nov 7 1919. [signature] COUNTY REGISTRAR.

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