2316

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 142

Co. Registrar's No. 538

Local Registrar's No. .....

PLACE OF BIRTH

County of Gila

District of Globe

Town of or City of Globe

(No. ..... St. ..... Ward)

FULL NAME OF CHILD ..... Born Alive YES

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

Sex of Child	Twin, Triplet or other	and	Number in order of birth	Legitimate?	Date of Birth (Month / Day / Yr.)
F	Other		1	Yes	Oct 5 1919

FATHER		MOTHER	
Full Name	Ignacio Huerta	Full Maiden Name	Edubigen Lopez
Residence	Globe	Residence	Globe
Color or Race	Mex	Color or Race	Mex
Age at last Birthday	24 Years	Age at last Birthday	17 Years
Birthplace	Mexico	Birthplace	Globe
Occupation	Laborer (woodchopper)	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 Oct 5 1919, at 1 P M.

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

Signature W. W. Horst M.D.

Attending physician, midwife, householder.*

Address Globe Ariz

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

Filed Oct 10 1919

B. G. Fox

LOCAL REGISTRAR.

081-1005-539

COUNTY REGISTRAR.

A True Copy

Filed Nov 5 1919

B. G. Fox

COUNTY REGISTRAR.

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