

2352

Midwife with each local Registrar within 5 days after birth.

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

County of Sila  
District of Michelson  
Town of Winkelman  
or  
City of \_\_\_\_\_ (No. \_\_\_\_\_ St; \_\_\_\_\_ Ward)

BUREAU OF VITAL STATISTICS  
ORIGINAL CERTIFICATE OF BIRTH  
State Index No. 70  
Co. Register No. 339  
Local Registrar's No. \_\_\_\_\_

FULL NAME OF CHILD Elara Marquez } Born } YES  
If child is not named, make Supplemental Report on blank obtainable from local registrar. } Alive } ~~NO~~

Sex of Child Female } Twin, Triplet or other } Single } and } Number in order of birth } Legitimate? } Yes } Date of Birth Oct 25 1919  
(Month) (Day) (Yr.)

FATHER  
Full Name Frank Marquez  
Residence Winkelman Ariz  
Color or Race Mexican Age at last Birthday 33 (Years)  
Birthplace Mexico  
Occupation Proprietor of pool room

MOTHER  
Full Maiden Name Rosalio Chaney  
Residence Winkelman Ariz  
Color or Race Mexican Age at last Birthday 32 (Years)  
Birthplace Mexico  
Occupation House wife

Number of child of this mother..... Number of children, of this mother, now living..... Were precautions taken against Ophthalmia neonatorum?.....

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

I hereby certify that I attended the birth of above child; and that it occurred on Oct 25 1919, at 109 M.  
{ \*When there is no attending physician or midwife, then the householder should make this return. (Signature) L. M. Thompson  
(Attending physician, midwife, householder.)\*

Given or christian name added from a supplemental report.....191..... Address Winkelman Ariz

649-1025-939  
COUNTY REGISTRAR.

Filed Nov 21 1919 LOCAL REGISTRAR. H. Roberts  
A True Copy Filed Nov 21 1919 B. G. Fox  
COUNTY REGISTRAR.