PLACE OF BIRTH

County of Gila

District of

Town of
or
City of Miami

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 182

Co. Register No. 41

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD Baby Irsiniega

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

Born Alive NO

Sex of Child	Twin, ~~Triplet or other~~	and	Number in order of birth	Legitimate?	Date of Birth
Male	Yes		1st	Yes	Jan (Month) 19 (Day) 1920 (Yr.)

FATHER	MOTHER
Full Name: Reyes Irsiniega	Full Maiden Name: Estefena Hidalgo
Residence: Miami	Residence: Miami
Color or Race: Mexican — Age at last Birthday 36 (Years)	Color or Race: Mexican — Age at last Birthday 30 (Years)
Birthplace: Santa Rosalia Mexico	Birthplace: Santa Rosalia Mexico
Occupation: Laborer	Occupation: House wife

Number of child of this mother 8 | Number of children, of this mother, now living 6 | 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 Jan 19 1920, at 3:45 A.M.

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

(Signature) C Sotel M.D
(Attending physician, ~~midwife, householder.*~~)

Address Miami Ariz

Given or christian name added from a supplemental report 191

Filed 1/30/ 1920 T H Slaughter
LOCAL REGISTRAR.

011-119-586
COUNTY REGISTRAR.

Filed Feb 1 1920

A True Copy B. G. Fox
COUNTY REGISTRAR.