the number of each, in order of birth, stated. This certificate must be filed by the attending Physician or midwife with each local Registrar within 5 days after birth.

PLACE OF BIRTH

County of Gila.

District of Globe.

Town of

or

City of Globe.

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 166

Co. Registrar's No. 233

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD Agnes Guerra.

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? yes | Date of Birth 4 (Month) 25 (Day) 1920 (Yr.)

FATHER		MOTHER	
Full Name	Casimiro Guerra,	Full Maiden Name	Casimira Aguilar,
Residence	Globe,	Residence	Globe.
Color or Race	Mex.	Color or Race	Mex.
Age at last Birthday	48 Years	Age at last Birthday	24 Years
Birthplace	Mexico	Birthplace	Mexico.
Occupation	Miner	Occupation	Housewife

Number of child of this Mother 3 | Number of Children, of this mother, now living 3 | 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 4-25, 1920, at 8P. M.

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

Signature L. E. Wightman

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

Address Globe, Ariz.

Given or Christian name added from a supplemental report 191

Filed Apr 27 1920 B. G. Fox LOCAL REGISTRAR.

171-425-319 COUNTY REGISTRAR.

A True Copy

Filed May 5 1920 B. G. Fox COUNTY REGISTRAR.