4269

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 164

Co. Registrar's No. 343

Local Registrar's No. .....

PLACE OF BIRTH

County of Gila

District of .....

Town of Miami

or

City of .....

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

FULL NAME OF CHILD Jubentino Trujillo

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

Born Alive YES ~~NO~~

Sex of Child Male | ~~Twin, Triplet~~ or other | and | Number in order of birth 2 | Legitimate? yes | Date of Birth June 17 1920. Month Day Yr.

FATHER		MOTHER	
Full Name	Alexandro Trujillo	Full Maiden Name	Luz Aguilar
Residence	Miami - Arizona	Residence	Miami, Arizona
Color or Race	Mex	Color or Race	Mex
Age at last Birthday	32 Years	Age at last Birthday	17 Years
Birthplace	Zacetacas - Mex	Birthplace	Zacetacas - Mex
Occupation	Miner	Occupation	Housewife

Number of child of this Mother 2 | Number of Children, of this mother, now living 2 | 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 June 17, 1920 at 11 30 A.M.

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

Signature Cyril M. Cron M.D.

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

Address Miami, Arizona

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

Filed 2/30 1920

T. H. Slaughter

LOCAL REGISTRAR.

136-617-319

COUNTY REGISTRAR.

Filed 7-2 1920

A True Copy

B. G. Fox

COUNTY REGISTRAR.

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