4301

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 189

Co. Registrar's No. 394

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 Dora Pajon

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 2 | Legitimate? yes | Date of Birth June 28 1920 (Month Day Yr.)

FATHER		MOTHER	
Full Name	Anton Pumar Pajon	Full Maiden Name	Helen Giacoma
Residence	Miami, Ariz. Box 1322	Residence	Miami, Arizona
Color or Race	Spanish	Color or Race	Swiss
Age at last Birthday	26 Years	Age at last Birthday	24 Years
Birthplace	Aspensante, Spain	Birthplace	New Chatelle, Switzerland
Occupation	Tailor	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 28, 1920 at 7 A.M.

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

Signature Cyril M. Crow M.D.
Attending physician, midwife, householder*

Address Miami, Arizona

Given or Christian name added from a supplemental report 191

Filed 7/15/1920

T. H. Slaughter
LOCAL REGISTRAR.

475-628-871
COUNTY REGISTRAR.

A True Copy

Filed 7-20 1920

B. G. Fox
COUNTY REGISTRAR.

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