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ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 168

Co. Register No. 495

Local Registrar's No. 60

PLACE OF BIRTH

County of Gila

District of

Town of

or City of Hayden

(No. St; Ward)

FULL NAME OF CHILD Maria Valencia

Born / Alive: YES / ~~NO~~

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

Sex of Child Female | ~~Twin, Triplet~~ or other 1 | and | Number in order of birth 1 | Legitimate? Yes | Date of Birth August (Month) 10th (Day) 1920 (Yr.)

FATHER		MOTHER	
Full Name	Avelardo Valencia	Full Maiden Name	Eliza Ward
Residence	Winkleman Arizona	Residence	Winkleman
Color or Race	Spanish	Color or Race	Mexican
Age at last Birthday	29 (Years)	Age at last Birthday	25 (Years)
Birthplace	Mexico	Birthplace	Mexico
Occupation	Laborer	Occupation	Housewife

Number of child of this mother 1 | Number of children, of this mother, now living 1 | Were precautions taken against Ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of above child; and that it occurred on Aug. 10th 1920, at 9:00 A.M.

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

(Signature) E. Shields (Attending physician, ~~midwife, householder~~.*)

Given or christian name added from a supplemental report 191

Address Hayden Arizona

Filed Aug 14 1920

W. B. Nash LOCAL REGISTRAR.

451-810-564 COUNTY REGISTRAR.

Filed Sept 9 1920

A True Copy B. G. Lax COUNTY REGISTRAR.

Midwife with each local Registrar within 5 days after birth.