

1238

STATE OF ARIZONA
DEPARTMENT OF HEALTH - DIVISION OF HEALTH RECORDS AND STATISTICS
CERTIFICATE OF LIVE BIRTH

BIRTH NO.
SB 102- 20-000192

IDENTIFICATION OF CHILD AND PLACE OF BIRTH	1. NAME OF CHILD A. FIRST MIKE		B. MIDDLE HERNANDEZ		C. LAST PENALVER	
	2. SEX MALE	3. TYPE OF BIRTH SINGLE, TWIN, TRIPLET, ETC. SINGLE	4. IF MULTIPLE BIRTH SPECIFY: BORN FIRST, SECOND, ETC.		5. DATE OF BIRTH DATE OF MONTH DAY YEAR SEPTEMBER 29, 1920	6. HOUR 6:00
PARENTS	7. FATHER'S NAME A. FIRST GEORGE		B. MIDDLE PENALVER		C. LAST PENALVER	
	8. MOTHER'S MAIDEN NAME A. FIRST THOMASA		B. MIDDLE HERNANDEZ		C. LAST HERNANDEZ	
RESIDENCE OF MOTHER	9. MOTHER'S USUAL RESIDENCE A. STATE ARIZONA		B. COUNTY GILA		C. TOWN OR CITY MIAMI	
	10. STREET ADDRESS OR R.F.D.		11. IN CITY LIMITS? 12F. YES <input type="checkbox"/> NO <input type="checkbox"/>		13. HOW LONG LIVED IN ARIZONA AT PRESENT ADDRESS 13A. 13B.	
CERTIFICATIONS:	15. THE INFORMATION LISTED IN ITEMS 1-14 IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.		16. PARENT OR INFORMANT 16A. GEORGE PENALVER		17. RELATIONSHIP TO CHILD FATHER	
	18. I ATTENDED THE BIRTH OF THIS CHILD WHO WAS BORN ALIVE AT THE PLACE, TIME AND DATE ENTERED ABOVE.		19. ATTENDANT 19A. CYRIL M. CROW		20. DATE SIGNED 9-29-20	
FOR STATE REGISTRAR USE ONLY	21. DATE REGISTERED 10-10-20		22. REG. FILE NO. 576		23. REGISTRAR B.G. TAX	
	24. SUPPLEMENTARY ENTRIES		25. PREVIOUS STATE OF RESIDENCE MEXICO		26. DATE RCVD. IN STATE OFFICE SEPTEMBER 1, 1920	
STATE REGISTRAR'S AUTHENTICATION	27. THIS SUPPLEMENTARY BIRTH CERTIFICATE HAS BEEN ESTABLISHED IN ACCORDANCE WITH THE LAWS OF THIS STATE AND THE REGULATIONS OF THE STATE DEPARTMENT OF HEALTH. THE DATA SHOWN HEREON ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.					
	28. DATE ESTABLISHED 9-17-76		29. SUP. CERT. NO. S76-2071		30. REGISTRAR'S SIGNATURE <i>Alfonso Brant</i>	
STATISTICAL AND ADMINISTRATIVE DATA	31. THIS SECTION FOR STATISTICAL AND ADMINISTRATIVE USE ONLY					
	32. TYPE OF ACTION <input type="checkbox"/> ADOPTION <input type="checkbox"/> LEGITIMATION <input type="checkbox"/> PATERNITY <input checked="" type="checkbox"/> OTHER		33. IF ADOPTION: NUMBER OF CHILDREN		34. COURT WHERE GRANTED	
35. DATE ORDER WAS GRANTED		36. ORDER NO.		37. COUNTY		
38. DATE REGISTERED		39. SEaled FILE NO.		40. STATE		
41. REMARKS		42. CERT. AMENDED BY: L. McCort		43.		
44. Affidavit to Correct Vital Record 9-17-76 Certificate of Baptism, Guardian ANGEL Church, El Paso, Texas 2-27-21 Parent's Marriage License El Paso, Texas 2-17-15						