

173

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS

PLACE OF BIRTH
County of Gila State Index No. 120
District of Globe ORIGINAL CERTIFICATE OF BIRTH Co. Register No. 659
Town of _____ Local Registrar's No. _____
or _____
City of _____ (No. _____ St. _____ Ward)

FULL NAME OF CHILD _____ } Born } YES
If child is not named, make Supplemental Report on blank obtainable from local registrar. } Alive }

Sex of Child M Twin, Triplet or other _____ } and } Number in order of birth 1 Legiti- mate? Yes Date of Birth Nov 2 1920
(Month) (Day) (Yr.)

FATHER
Full Name Camillo Navarro
Residence Pioneer Road - near Globe
Color or Race Mex Age at last Birthday 57 (Years)
Birthplace Mexico
Occupation Wood chopper

MOTHER
Full Maiden Name Rita Cuineros
Residence Pioneer Road - near Globe
Color or Race Mex Age at last Birthday 37 (Years)
Birthplace Mexico
Occupation Housewife

Number of child of this mother 6 Number of Children, of this mother, now living 4 Were precautions taken against Ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

hereby certify that I attended the birth of the above child; and that it occurred on Nov 2 1920, at 9 A M.

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

(Signature) W. W. Hunt, M. D.
(Attending physician, midwife, householder.*)

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

Address Globe Ariz
B. G. Sisk
LOCAL REGISTRAR.

056-1102-932
COUNTY REGISTRAR.

Filed 11-16 1920
A True Copy
Filed 12/6 1920

B. G. Sisk
COUNTY REGISTRAR.