176

PLACE OF BIRTH

County of Gila

District of

Town of Miami
or
City of

# ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

## ORIGINAL CERTIFICATE OF BIRTH

State Index No. 123

Co. Registrar's No. 695

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD Leonore Zapata

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 1 | Legitimate? yes | Date of Birth Nov. 3. 1920 (Month Day Yr.)

| FATHER | | MOTHER | |
|---|---|---|---|
| Full Name | Miguel Zapata | Full Maiden Name | Rosa De La Torre |
| Residence | Claypool, Arizona | Residence | Claypool, Arizona |
| Color or Race | Mex | Color or Race | Mex |
| Age at last Birthday | 24 Years | Age at last Birthday | 22 Years |
| Birthplace | Chihuahua, Mexico | Birthplace | Aguas Caliente, Mexico |
| Occupation | Machine man | 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 the above child; and that it occurred on Nov. 3, 1920 at 2 45 P.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 12/24/1920 T H Slaughter
LOCAL REGISTRAR.

391-1103-945
COUNTY REGISTRAR.

A True Copy

Filed 12-27 1920 B. G. Lid
COUNTY REGISTRAR.

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