202

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. 148

Co. Register No. 670

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD Isabel Christi

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

Born Alive: Yes ~~No~~

Sex of Child	Twin, Triplet or other	and	Number in order of birth	Legitimate?	Date of Birth (Month) (Day) (Yr.)
Male				yes	Nov. 14, 1920

FATHER		MOTHER	
Full Name	Manuel Christi	Full Maiden Name	Caralina Munate
Residence	Miami, Ariz.	Residence	Miami Ariz.
Color or Race	Mexican	Color or Race	Mexican
Age at last Birthday (Years)	25	Age at last Birthday (Years)	23
Birthplace	Mexico	Birthplace	Mexico
Occupation	Machinist helper	Occupation	Housewife

Number of child of this mother 4 | Number of children, of this mother, now living 4 | 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. 14, 1920, at 9:30 P.M.

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

(Signature) H. F. Miller
(Attending physician, ~~midwife, householder~~*)

Address Miami, Ariz.

Given or Christian name added from a supplemental report 192

Filed 11/15 1920 T H Slaughter LOCAL REGISTRAR.

939-1114-345 COUNTY REGISTRAR.

Filed 11/27 1920. A True Copy R. E. Fox COUNTY REGISTRAR.