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ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 137-2
Registered No. 72

1. PLACE OF BIRTH
County Gila State Arizona
District or Township _____ or Village _____
City Hayden No. _____ St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Juana Fernandez
If child is not yet named, make supplemental report, as directed.

3. Sex of Child Female To be answered ONLY in event of plural births. 4. Twin, triplet or other. _____ 5. No., in order of birth. _____ 6. Legitimate? yes 7. Date of birth Jan 2 1921
Month Day Year

8. FATHER
Full name Rafael Fernandez

14. MOTHER
Full maiden name Antonia Martinez

9. Residence (Usual place of abode) Hayden, Arizona
If non-resident, give place and state.

15. Residence (Usual place of abode) Hayden, Arizona
If non-resident, give place and state.

10. Color or race Mexican

11. Age at last birthday 30 (Years)

16. Color or race Mexican

17. Age at last birthday 27 (Years)

12. Birthplace (city or place) Rajon,
(State or country) Sonora, Mexico

18. Birthplace (city or place) Lower California
(State or country) Mexico

13. Occupation Laborer
Nature of Industry Copper Smelter

19. Occupation _____
Nature of Industry Housewife

20. Number of children of this mother 2
(Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living 2
(b) Born alive but now dead 0
(c) Stillborn 0

21. Were precautions taken against ophthalmia neonatorum? NO

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE
I hereby certify that I attended the birth of this child, who was born alive at 7:30 A.m. on the date above stated.
(Born alive or stillborn)

Signature Rafael Fernandez
Father
Hayden, Arizona

Given name added from _____ Address _____
Month, day, year 169-102-149 Filed 9-6 1930
Registrar. Registrar.

MARGIN RESERVED FOR BINDING
WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD
N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.