

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

County of Yuma  
District of Yuma  
Town of \_\_\_\_\_  
or Yuma  
City of \_\_\_\_\_

State Index No. \_\_\_\_\_  
Co. Register No. 10  
Local Registrar's No. \_\_\_\_\_

ORIGINAL CERTIFICATE OF BIRTH

FULL NAME OF CHILD Jesus Lopez { Born } YES  
If child is not named, make Supplemental Report on blank obtainable from local registrar. { Alive } ~~NO~~

Sex of Child Male Twin, Triplet or other \_\_\_\_\_ and \_\_\_\_\_ Number in order of birth \_\_\_\_\_ Legitimate? yes Date of Birth Feb. 5 1921  
(Month) (Day) (Yr.)

FATHER  
Full Name Mmanuel Lopez  
Residence Globe, Arizona  
Color or Race Mexican Age at last Birthday 40 (Years)  
Birthplace Mexico  
Occupation Laborer

MOTHER  
Full Maiden Name Cecilia Trojilla  
Residence Globe, Ariz.  
Color or Race Mexican Age at last Birthday 37 (Years)  
Birthplace Succan Arizona  
Occupation Housewife

Number of child of this mother 9 Number of Children, of this mother, now living 9 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 Feb. 5 1921, at 8:20 P. M.

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

(Signature) Alvin Kirmse M.D.  
(Attending physician, midwife, householder.\*)

Given or Christian name added from a supplemental report \_\_\_\_\_ 191\_\_\_\_\_

Address Globe, Arizona

Filed 2/19 1921

B. J. [Signature]  
LOCAL REGISTRAR.

139-205-331  
COUNTY REGISTRAR.

Filed 3/5 1921

A True Copy  
B. J. [Signature]  
COUNTY REGISTRAR.