

1181

PLACE OF BIRTH

County of Yuma
District of Yuma
Town of _____
or _____
City of Yuma

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

State Index No. 2572

ORIGINAL CERTIFICATE OF BIRTH

Co. Register No. 152

Local Registrar's No. _____

(No. _____ St. _____ Ward)

FULL NAME OF CHILD Francisco Leal { 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 X and { Number in order of birth 2 Legitimate? Yes Date of Birth Mar 19 1920
(Month) (Day) (Yr.)

FATHER
Full Name Barbista Leal
Residence Yuma
Color or Race Mex Age at last Birthday 72 (Years)
Birthplace Mex
Occupation Mixer

MOTHER
Full Maiden Name Regina Hancock
Residence Yuma
Color or Race Mex Age at last Birthday 29 (Years)
Birthplace Mex
Occupation Housewife

Number of child of this mother 7 Number of children, of this mother, now living 5 Were precautions taken against Ophthalmia neonatorum? ?

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child; and that it occurred on Mar 19 1920, at 11 P M.

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

(Signature) Barbista Leal
(Attending physician, midwife, householder.)* Leal

Given or Christian name added from a supplemental report.....192.....

Address Yuma
B. J. Leal
LOCAL REGISTRAR.

COUNTY REGISTRAR.

Filed Mar 21 192.....
A True Copy
Filed Mar 5 192.....

B. J. Leal
COUNTY REGISTRAR.

133-319-915