1743

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 127

Co. Registrar's No. 515

Local Registrar's No. .....

PLACE OF BIRTH

County of Gila

District of .....

Town of Miami
or
City of .....

(No. ..... St; ..... Ward)

FULL NAME OF CHILD Antonia Basquez — Born Alive: YES ~~NO~~

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

Sex of Child Female — ~~Twin~~ ~~Triplet~~ or other — and — Number in order of birth 5 — Legitimate? yes — Date of Birth Oct. 8 1921 (Month Day Yr.)

FATHER		MOTHER	
Full Name	Pilar Basquez	Full Maiden Name	Dorethea Navarro
Residence	Miami, Arizona	Residence	Miami, Ariz
Color or Race	Mex — Age at last Birthday 27 Years	Color or Race	Mex — Age at last Birthday 28 Years
Birthplace	Jalisco, Mex	Birthplace	Jalisco, Mex
Occupation	Laborer	Occupation	Housewife

Number of child of this Mother 5 — 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 Oct. 8, 1921, at 9:30 A.M.

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

Signature C. M. Crow M.D.
Attending physician, midwife, householder.*

Address Miami, Arizona

Given or Christian name added from a supplemental report ..... 191..

Filed Oct 10 1921 — B. Ward — LOCAL REGISTRAR.

129-1008-456 — COUNTY REGISTRAR.

Filed 11-7 1921 — A True Copy — B. G. Fox — COUNTY REGISTRAR.

the number of each, in order of birth, stated. This certificate must be filed by the attending Physician or midwife with each local Registrar within 5 days after birth.