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PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

County of Gila

BUREAU OF VITAL STATISTICS

State Index No. 102

District of Globe

ORIGINAL CERTIFICATE OF BIRTH

Co. Registrar No. 548

Town of _____

Local Registrar's No. _____

City of Globe

(No. _____ St. _____ Ward)

FULL NAME OF CHILD Margarito Lemon (Born YES / Alive NO)
If child is not named, make Supplemental Report on blank obtainable from local registrar.

Sex of child Male Twin, Triplet or other _____ and _____ Number in order of birth _____ Legitimate? yes Date of Birth Oct 17 1921 (Month) (Day) (Yr.)

FATHER
Full Name Ragino Lemon
Residence Globe, Arizona
Color or Race Mexican Age at last Birthday 31 (Years)
Birthplace Mexico
Occupation Railway laborer

MOTHER
Full Maiden Name Carmen Palasco
Residence Globe Arizona
Color or Race Mexican Age at last Birthday 31 (Years)
Birthplace Mexico
Occupation Housewife

Number of Child of this mother 7 Number of children of this mother now living 5 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. 17 1921, at 2:15 P.M.

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

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

Given or Christian name added from a Supplemental report _____ 192_____

Address Globe, Arizona
B. B. Stat
LOCAL REGISTRAR.

435-1077-356
COUNTY REGISTRAR.

Filed Nov 1921 A True Copy
B. B. Stat
COUNTY REGISTRAR.