1636

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 162

Co. Registrar's No. 553

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 Becente Salez

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

Born Alive YES ~~NO~~

Sex of Child Male | ~~Twin, Triplet~~ or other | and | Number in order of birth 2 | Legitimate? yes | Date of Birth Oct. 27 1921 (Month Day Yr.)

FATHER		MOTHER	
Full Name	Manuel Salez	Full Maiden Name	Antonia Gonzalez
Residence	Miami, Arizona	Residence	Miami, Arizona
Color or Race	Mex.	Color or Race	Mex
Age at last Birthday	30 Years	Age at last Birthday	17 Years
Birthplace	Zacetecas, Mex.	Birthplace	Clifton, Arizona
Occupation	Miner	Occupation	Housewife

Number of child of this Mother 2 | Number of Children, of this mother, now living 2 | 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. 27, 1921, at 6:50 P.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 28 1921

B. W. Hardy

LOCAL REGISTRAR.

229-1027-179

COUNTY REGISTRAR.

Filed 11-7 1921

A True Copy

B. G. Fox

COUNTY REGISTRAR.

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