

842

PLACE OF BIRTH
 County of Yuma
 District of _____
 Town of Hayden
 or _____
 City of _____ (No. _____ St. _____ Ward _____)

ARIZONA STATE BOARD OF HEALTH
 BUREAU OF VITAL STATISTICS

State Index No. 116
 Co. Register No. 624
 Local Registrar's No. 27

ORIGINAL CERTIFICATE OF BIRTH

FULL NAME OF CHILD Alfredo Aguirre { 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? <u>Yes</u>	Date of Birth	Dec 18 1921	(Month) (Day) (Yr.)
FATHER					MOTHER			
Full Name	<u>Cruz Aguirre</u>				Full Maiden Name	<u>Manuela Bravo</u>		
Residence	<u>Hayden, Ariz</u>				Residence	<u>Hayden, Arizona</u>		
Color or Race	<u>Mexican</u>	Age at last Birthday	<u>30</u>	(Years)	Color or Race	<u>Mexico</u>	Age at last Birthday	<u>32</u>
Birthplace	<u>Mexico</u>				Birthplace	<u>Mexico</u>		
Occupation	<u>Millman</u>				Occupation	<u>Housewife</u>		
Number of child of this mother	<u>4</u>	Number of Children, of this mother, now living	<u>2</u>		Were precautions taken against Ophthalmia neonatorum? <u>?</u>			

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child; and that it occurred on Dec 18 1921, at Y.A.M.

(Signature) Cruz Aguirre
 (Attending Physician, Midwife, Householder,*)

Address: Hayden Ariz
573 Wash

Supplemental report _____ 191_____
 Filed Dec 19 1921
W.B. Nash
 LOCAL REGISTRAR.

115-1218-426
 COUNTY REGISTRAR.

A True Copy
 Filed Jan 6 1922
B. E. S. a
 COUNTY REGISTRAR.