

850

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

ARIZONA STATE BOARD OF HEALTH
 BUREAU OF VITAL STATISTICS

State Index No. 123
 Co. Registrar's No. 625
 Local Registrar's No. _____

ORIGINAL CERTIFICATE OF BIRTH

FULL NAME OF CHILD Germania Arvola Born YES
 If child is not named, make Supplemental Report on blank obtainable from local registrar. Alive NO

Sex of Child Female Twin, Triplet or other _____ and Number in order of birth 3 Legitimate? yes Date of Birth Dec 22 1921
 Month Day Yr.

FATHER
 Full Name Pedro Arvola
 Residence Mammoth
 Color or Race Mexican Age at last Birthday 27 Years
 Birthplace Sonora Mexico
 Occupation miner

MOTHER
 Full Maiden Name Josephina Gonzalez
 Residence Mammoth Arizona
 Color or Race Mexican Age at last Birthday 23 Years
 Birthplace Sonora Mex.
 Occupation housewife

Number of child of this Mother 3 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 Dec 22 1921, at 2AM.
 { *When there is no attending physician or midwife, then the householder should make this return. }

Signature Lucile M. Cronin
 Attending physician, midwife, householder.*

Given or Christian name added from a supplemental report _____ 191__

Address Mammoth Arizona
B. M. Baird
 LOCAL REGISTRAR.

711-1222-179
 COUNTY REGISTRAR.

Filed Dec 30 1921

Filed Jan 6 1922 A True Copy

B. G. F. G.
 COUNTY REGISTRAR.

OR FILED WITH EACH LOCAL REGISTRAR WITHIN 5 DAYS AFTER BIRTH.