

2324

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

ARIZONA STATE BOARD OF HEALTH
 BUREAU OF VITAL STATISTICS

State Index No. 15
 Co. Register No. 56
 Local Registrar's No. 3

ORIGINAL CERTIFICATE OF BIRTH

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

Sex of Child girl } Twin, Triplet or other } and } Number in order of birth } Legitimate? } Date of Birth Feb 17 1922
 (Month) (Day) (Yr.)

FATHER
 Full Name Jose Garcia
 Residence _____
 Color or Race Mex Age at last Birthday 23 (Years)
 Birthplace Sahaguna Orix
 Occupation _____

MOTHER
 Full Maiden Name Guaciquina Sanchez Garcia
 Residence Hayden Orix
 Color or Race Mex Age at last Birthday 19 (Years)
 Birthplace San Angelo Texas
 Occupation house wife

Number of child of this mother 3 Number of Children, of this mother, now living 3 Were precautions taken against Ophthalmia neonatorum?

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child; and that it occurred on Feb 17 1922, at 4 P.M.

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

(Signature) _____ (Attending physician, midwife, householder.)*

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

Address: Juanana Jimenez

Filed Mar 2 1922

W. B. Nash
 LOCAL REGISTRAR.

271-217-871
 COUNTY REGISTRAR.

Filed Mar 2 1922 A True Copy

B. L. Jay
 COUNTY REGISTRAR.