

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

1. County of Gila  
District of \_\_\_\_\_  
Town of \_\_\_\_\_

BUREAU OF VITAL STATISTICS  
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 106  
Co. Registrar No. 297  
Local Registrar No. \_\_\_\_\_

or  
City of Globe No. \_\_\_\_\_ St. \_\_\_\_\_ Ward) \_\_\_\_\_  
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Mary Ayala } If child is not yet named, make supplemental report, as directed

3. Sex of child F To be answered ONLY in event of plural births. 4. Twin, triplet or other 1 5. No., in order of birth \_\_\_\_\_ 6. Legitimate? yes 7. Date of birth July 7-22 (Month, day, year)

8. Full name Candido Ayala FATHER

14. Full maiden name Pola Belasquez MOTHER

9. Residence Globe, Ariz. (Usual place of abode) If nonresident, give place and State

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10. Color or race Mex 11. Age at last birthday 35 (Years)

16. Color or race Mex 17. Age at last birthday 24 (Years)

12. Birthplace (city or place) Mexico (State or country)

18. Birthplace (city or place) Mexico (State or country)

13. Occupation Laborer Nature of Industry

19. Occupation Housewife Nature of Industry

20. Number of children of this mother (Taken as of time of birth of child here-in certified and including this child.) (a) Born alive and now living 4 (b) Born alive but now dead 4 (c) Stillborn 0

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was alive at 11:45A on the date above stated. (Born alive or stillborn)

\*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature C. W. Adams (Physician or midwife)

Address Globe, Ariz.

Given name added from a supplemental report \_\_\_\_\_ (Month, day, year)

Filed 7-10, 1922 W. G. Fox Local Registrar.

Filed 7-5, 1922 W. G. Fox County Registrar.

411-707-722 Registrar.

N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each, in order of birth, stated.