

N. B.—In case of more than one child at birth, a SEPARATE RETURN must be made for each, and the number of each, in order of birth, stated. This certificate must be filed by the attending Physician or midwife with each local Registrar within 5 days.

ARIZONA STATE BOARD OF HEALTH  
BUREAU OF VITAL STATISTICS

PLACE OF BIRTH  
County of DeLa State Index No. 109  
District of \_\_\_\_\_ ORIGINAL CERTIFICATE OF BIRTH Co. Registrar's No. 301  
Town of Miami Local Registrar's No. \_\_\_\_\_  
City of \_\_\_\_\_ (No. \_\_\_\_\_ St. \_\_\_\_\_ Ward)

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

Sex of Child Male Twin, Triplet or other \_\_\_\_\_ and Number in order of birth 4 Legitimate?  Date of Birth July 8 1922  
Month Day Yr.

FATHER  
Full Name Jacinto Madero  
Residence Miami, Arizona  
Color or Race Mex. Age at last Birthday 39 Years  
Birthplace Tepic, Mexico  
Occupation Carpenter

MOTHER  
Full Maiden Name Mercedes Wana  
Residence Miami, Arizona  
Color or Race Mex Age at last Birthday 26 Years  
Birthplace Yuma, Arizona  
Occupation Housewife

Number of child of this Mother 4 Number of Children, of this mother, now living 3 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 July 8, 1922 at 4 A.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.\*

Given or Christian name added from a supplemental report \_\_\_\_\_ 191

Address Miami, Arizona

146-708-441  
COUNTY REGISTRAR.

Filed July 13 1922 LOCAL REGISTRAR.  
A True Copy  
Filed July 8 1922 B. S. Fox  
COUNTY REGISTRAR.