

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

1. County of Yuma
District of _____
Town of _____

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 181
Co. Registrar No. 396
Local Registrar No. _____

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

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

3. Sex of child M } To be answered ONLY in event of plural births. 4. Twin, triplet or other. 3rd 5. No., in order of birth. 3rd 6. Legitimate? yes 7. Date of birth 8-27-22 (Month, day, year)

8. FATHER
Full name Jose Felix

14. MOTHER
Full maiden name Angela Villarreal

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

15. Residence (Usual place of abode) If nonresident, give place and State Miami, Ariz

10. Color or race Mex 11. Age at last birthday 28 (Years)

16. Color or race Mex 17. Age at last birthday 19 (Years)

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

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

13. Occupation miner
Nature of Industry _____

19. Occupation H. W.
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 3 (b) Born alive but now dead 1 (c) Stillborn _____

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was _____ at _____ m. on the date above stated. (Born alive or stillborn) 4. J. Valenzuela, M.D.

*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 _____ (Physician or midwife)
Address Miami, Ariz

Given name added from a supplemental report. (Month, day, year) 367-827-153 Registrar.
Filed 8/24, 1922 B. M. H. S. Local Registrar.
Filed 8/27, 1922 B. S. Dix County 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.