

4744

PLACE OF BIRTH

1. County of Gila ARIZONA STATE BOARD OF HEALTH
 District of Claypool Miami BUREAU OF VITAL STATISTICS State Index No. 108
 Town of _____ ORIGINAL CERTIFICATE OF BIRTH Co. Registrar No. 421
 or _____ Local Registrar No. _____
 City of _____ No. _____ St. _____ Ward _____
 (If birth occurred in a hospital or institution, give its NAME instead of street and number)

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

3. Sex of child male To be answered ONLY in event of plural births. 4. Twin, triplet or other. _____ 5. No., in order of birth. _____ 6. Legitimate? yes 7. Date of birth Sept 7, 1922 (Month, day, year)

8. FATHER Full name Jack Lopez

14. MOTHER Full maiden name Rebecca Cetano

9. Residence (Usual place of abode) Claypool, Arizona If nonresident, give place and State

15. Residence (Usual place of abode) Claypool, Arizona If nonresident, give place and State

10. Color or race Mexican 11. Age at last birthday 29 (Years)

16. Color or race Mexican 17. Age at last birthday 28 (Years)

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

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

13. Occupation miner (copper) 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 2 (c) Stillborn 0

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was alive at 2:30 a.m. 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 [Signature] (Physician or midwife)

Address Miami, Arizona Filed 9/26, 1922 B. M. Hardy Local Registrar.

Given name added from a supplemental report (Month, day, year) 439-907-936 Filed Oct 6, 1922 B. E. S. J. O. A. County Registrar.

not present at birth [Signature]