

2526

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

1. County of Dela
District of Adobe Hill
Town of _____

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 132
Co. Registrar No. 476
Local Registrar No. _____

or
City of miami No. 1123 Adobe Hill St. _____ Ward) _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child marco macias } 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. 5. No., in order of birth. 6. Legitimate? yes 7. Date of birth Oct. 7, 1922 (Month, day, year)

8. FATHER Full name Leipe macias

14. MOTHER Full maiden name maria gonzalez

9. Residence (Usual place of abode) miami, ariz. If nonresident, give place and State

15. Residence (Usual place of abode) miami, ariz. If nonresident, give place and State

10. Color or race mexican 11. Age at last birthday 23 (Years)

16. Color or race mexican 17. Age at last birthday 25 (Years)

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

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

13. Occupation murder in copper mine 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 1 (c) Stillborn 0

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was alive at 7 A. m. on the date above stated. (Born alive or stillborn)

Signature J. J. Miller (Physician or midwife)
Address miami, arizona

Given name added from a supplemental report (Month, day, year) 442-1007-1119 Registrar.
Filed Oct 8, 1922 B. N. Hardy Local Registrar.
Filed 11/6, 1922 B. G. Dix County Registrar.

the number of each, in order of birth, stated.