

PLACE OF BIRTH ~~MISSOURI~~ ~~MISSOURI~~

ARIZONA STATE BOARD OF HEALTH

1. County of Mila
District of _____
Town of Miami
or _____

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 158
Co. Registrar No. 580
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 Eva Mesa If child is not yet named, make supplemental report, as directed

3. Sex of child Female To be answered ONLY in event of plural births. 4. Twin, triplet or other 5. No., in order of birth 6 6. Legitimate? yes 7. Date of birth Nov. 28-1922 (Month, day, year)

8. FATHER Full name Cecilia Mesa

14. MOTHER Full maiden name Serefina Reygo

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 42 (Years)

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

12. Birthplace (city or place) (State or country) Jalisco, Mex

18. Birthplace (city or place) (State or country) Jalisco, Mex

13. Occupation Nature of Industry Miner

19. Occupation Nature of Industry Housewife

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 6 (b) Born alive but now dead _____ (c) Stillborn _____

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born at 11:30 p.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 E. M. Cron M.D. (Physician or midwife)

Address Miami, Arizona

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

Filed 11/30/22, 19 B. D. Hardy by E. E. Drown Local Registrar.

541-1128-291 Registrar.

Filed 12/8/22, 19 B. D. Hardy County Registrar.

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