

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

1. County of Yuma  
 District of \_\_\_\_\_  
 Town of Miami  
 or  
 City of Miami No. \_\_\_\_\_ St. \_\_\_\_\_ Ward \_\_\_\_\_

BUREAU OF VITAL STATISTICS  
 ORIGINAL CERTIFICATE OF BIRTH

State Index No. 135  
 Co. Registrar No. 161  
 Local Registrar No. \_\_\_\_\_

2. Full name of child Isabel Carpio } 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 34 5. No., in order of birth 34 6. Legitimate? Yes 7. Date of birth 3-7-23 (Month, day, year)

8. FATHER Full name Maximo Carpio

14. MOTHER Full maiden name Ramona Herrera

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

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

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

16. Color or race Mex 17. Age at last birthday 23 (Years)

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

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

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 Two (b) Born alive but now dead One (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.

\*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 G. J. Mateyuela (Physician or midwife)

Address Miami Ariz

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

Filed Mar 31, 1923 C. E. Davis Local Registrar.

Filed 4-5, 1923 B. J. Day County Registrar.

Registrar. 936-307-981