

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.

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

1. County of Pima
District of _____
Town of Miami
or _____
City of _____ No. _____ St. _____ Ward _____

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 176
Co. Registrar No. 296
Local Registrar No. _____

2. Full name of child Jose Acosta } 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 1 6. Legitimate? yes 7. Date of birth April 30-1923 (Month, day, year)

8. FATHER Full name Jose Maria Acosta

14. MOTHER Full maiden name Laura Sanchez

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 Mex 11. Age at last birthday 30 (Years)

16. Color or race Mex 17. Age at last birthday 22 (Years)

12. Birthplace (city or place) Wunango (State or country) Mex

18. Birthplace (city or place) Wunango (State or country) Mex

13. Occupation Pool Hall man 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.) 1 (a) Born alive and now living 1 (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 7:00 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 C. M. Cron M.D. (Physician or midwife) Address Miami, Ariz.

Given name added from a supplemental report _____ (Month, day, year) Filed May 4, 1923 C. E. Davis Local Registrar. Filed 6/4, 1923 B. G. Gray County Registrar.

111-430-329 Registrar.