

# Damaged Document(s)

PERMANENT RECORD  
 RN must be made for each, and  
 filed.

WRITE PLAINLY WITH UNFED  
 N. B.—In case of more than one child at a time  
 the number of

PLACE OF BIRTH		ARIZONA STATE BOARD OF HEALTH	
1. County of <u>Gila</u>		BUREAU OF VITAL STATISTICS	
District of _____		ORIGINAL CERTIFICATE OF BIRTH	
Town of <u>Globe</u>		State Index No. <u>120</u>	
or _____		Co. Registrar No. <u>288</u>	
City of _____ No. _____ St. _____ Ward _____		Local Registrar No. _____	
(If birth occurred in a hospital or institution, give its NAME instead of street and number)			
2. Full name of child <u>Julian Hernandez</u> } If child is not yet named, make supplemental report, as directed			
3. Sex of child <u>male</u>	To be answered ONLY in event of plural births	4. Twin, triplet or other... <u>L</u>	5. No., in order of birth _____
6. Legitimate? <u>yes</u>	7. Date of birth <u>5/4/23</u> (Month, day, year)		
8. FATHER Full name <u>Tremor Hernandez</u>		14. MOTHER Full maiden name <u>Powla Samora</u>	
9. Residence (Usual place of abode) <u>Globe, ariz.</u> If nonresident, give place and State		15. Residence (Usual place of abode) <u>Globe, ariz.</u> If nonresident, give place and State	
10. Color or race <u>Mexican</u>	11. Age at last birthday <u>37</u> (Years)	16. Color or race <u>Mexican</u>	17. Age at last birthday <u>27</u> (Years)
12. Birthplace (city or place) (State or country) <u>Mexico</u>		18. Birthplace (city or place) (State or country) <u>Mexico</u>	
13. Occupation Nature of industry <u>miner</u>		19. Occupation Nature of industry <u>Housewife</u>	
20. Number of children of this mother (Taken as of time of birth of child herein certified and including this child.) (a) Born alive and now living... <u>3</u> (b) Born alive but now dead... <u>2</u> (c) Stillborn... <u>0</u>			

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE**

I hereby certify that I attended the birth of this child, who was Born alive at 12:15 pm 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 T. C. Harper, M.D.  
(Physician or midwife)

Address Globe, Arizona

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

Filed 5/7, 1923

Filed 6/5, 1923

Registrar. 189-504-721

Local Registrar  
B. S. Gray  
Registrar.