

MARGIN KEPT CLEAR FOR BINDING
WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD
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.

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

PLACE OF BIRTH Gila

1. County of Gila State Index No. 119
 District of _____ County Registrar No. 392
 Town of _____ Local Registrar No. 19

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

2. Full name of child Bernabé Lucas Almanza 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. Legitimate? Yes 6. Date of birth June 11 1923
 Month day year

3. FATHER Full name Guillermo García Almanza 14. MOTHER Full maiden name Teodora Lucas

9. Residence (Usual place of abode) Hayden 15. Residence (Usual place of abode) Hayden
 If nonresident, give place and state

10. Color or race Mex. 11. Age at last birthday 27 (Years) 16. Color or race Mex. 17. Age at last birthday 35 (Years)

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

13. Occupation Laborer Nature of industry 19. Occupation H.M. Nature of industry

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 2 (b) Born alive but now dead 0 (c) Stillborn 0 21. Were precautions taken against ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE:
 I hereby certify that I attended the birth of this child, who was Born alive at 8:30 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 evidences of life after birth.
 Signature A. P. Winslow
 Address Hayden, Ariz.
 Filed June 12 1923 7573 D. J. Fox Local Registrar.
 Filed 7-9 1923 B. J. Fox County Registrar.

211-611-332