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PLEASE PRINT 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

State Index No. 121
County Registrar No. 657
Local Registrar No. _____

PLACE OF BIRTH
1. County of Yuma
District of _____
Town of Miami
or _____
City of _____

2. Full name of child Francisco Romero (If birth occurred in a hospital or institution, give its NAME instead of street and number)
No. _____ St. _____ Ward _____
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 _____ 6. Legitimate? Yes
5. No., in order of birth _____ 7. Date of birth Oct 4 1923
Month Day Year

8. FATHER
Full name Prudenciano Romero

14. MOTHER
Full maiden name Josefa Flores

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

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

10. Color or race Mex
11. Age at last birthday 41 (Years)

16. Color or race Mex
17. Age at last birthday 41 (Years)

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

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

13. Occupation
Nature of industry Laborer

19. Occupation
Nature of industry Housewife

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 12
(b) Born alive but now dead 6
(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 3 P m. on the date above stated.

Signature Charles E. Davis M.D.
Address Miami, Florida
(Physician or midwife)

Given name added from a supplemental report _____
Month, day, year. _____
Registrar. _____
Filed Oct 31 23 19____
Filed 11-6 1923 19____
Local Registrar. P. E. Davis
County Registrar. _____

696-1004-189