1819

PLACE OF BIRTH

1. County of Gila

District of

Town of Miami

or

City of ..... No. ..... St. ..... Ward

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 122

County Registrar No. 737

Local Registrar No.

2. Full name of child Sarah Campos } 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 ..... 5. No., in order of birth 7 | 6. Legitimate? yes | 7. Date of birth Nov. 3 - 1923. (Month day year)

8. FATHER	14. MOTHER
Full name Jose Campos	Full maiden name Mercedes Hernandez
9. Residence (Usual place of abode) Miami. If nonresident, give place and state Ariz.	15. Residence (Usual place of abode) Miami. If nonresident, give place and state Ariz.
10. Color or race Mex	16. Color or race Mex
11. Age at last birthday 35 (Years)	17. Age at last birthday 30 (Years)
12. Birthplace (city or place) Jalisco. (State or country) Mex.	18. Birthplace (city or place) Jalisco (State or country) Mex
13. Occupation Nature of industry Smelterman	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 6 (b) Born alive but now dead 1 (c) Stillborn

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 at 2 45 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 evidences of life after birth.

Signature C. M. Crow M.D. (Physician or midwife)

Address Miami Arizona

Given name added from a supplemental report ..... Month, day, year.

Filed Nov 31, 1923 C. E. Irwin Local Registrar.

Filed 12/5, 1923 B. G. Fox County Registrar.

Registrar.

232-1103-489