V. S. No. 2

MARGIN RESERVED 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.

PLACE OF BIRTH

1. County of Gila

District of

Town of Miami

or

City of

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 155

County Registrar No. 66

Local Registrar No.

No. E-28 Davis Canon St. Ward

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

2. Full name of child Maria Berru — 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

6. Legitimate? yes

7. Date of birth January 19, 1924 (Month day year)

8. FATHER — Full name Clito Berru

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

10. Color or race: Mexican

11. Age at last birthday 50 (Years)

12. Birthplace (city or place) El Paso — (State or country) Texas

13. Occupation: Miner — Nature of industry: Copper

14. MOTHER — Full maiden name Angela Ochoa

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

16. Color or race: Mexican

17. Age at last birthday 21 (Years)

18. Birthplace (city or place) Clifton — (State or country) Arizona

19. Occupation — 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 1
(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 alive at 1 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 F. Frauller (Physician or midwife)

Address Miami, Arizona

Given name added from a supplemental report

Month, day, year.

Registrar.

Filed Jan 31, 1924 — P. E. Irvin, Local Registrar.

Filed 2/5, 1924 — B. G. Lea, County Registrar.

425-119-161