

1231

In order of birth stated.

PLACE OF BIRTH

1. County of Yuma
District of Maricopa
Town of _____
or
City of _____

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 1714
County Registrar No. 174
Local Registrar No. _____

2. Full name of child Indalecio Lopez
(If birth occurred in a hospital or institution, give its NAME instead of street and number)
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 _____
5. No., in order of birth _____
6. Legitimate? Yes
7. Date of birth Feb-24-1924
Month day year

8. FATHER
Full name Diego Lopez
9. Residence (Usual place of abode) Wheat fields
If nonresident, give place and state _____

14. MOTHER
Full maiden name Isabel Socida
15. Residence (Usual place of abode) Wheat fields
If nonresident, give place and state _____

10. Color or race White
11. Age at last birthday 39 (Years)

16. Color or race White
17. Age at last birthday 37 (Years)

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

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

13. Occupation Farmer
Nature of industry

19. Occupation House wife
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 3
(b) Born alive but now dead 3
(c) Stillborn None
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 ~~conscientiously~~) at 10 P. on the date above stated.

*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.
Given name added from a supplemental report _____
Signature D. J. Sotelo M.D.
Address Maricopa Ariz
(Physician or midwife)

Filed Feb 29 1924 P. E. Irvine Local Registrar.
Filed 3-5 1924 B. G. Fox County Registrar.

Registrar. 939-224-921