1245

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 177
County Registrar No. 346
Local Registrar No.

PLACE OF BIRTH
1. County of Gila
District of
Town of Miami Arizona
or
City of ..... No. ..... St. ..... Ward
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Dolores Acosta — If child is not yet named, make supplemental report, as directed.

3. Sex of Child F — 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. 26 1924 (Month day year)

8. FATHER	14. MOTHER
Full name Francisco Acosta	Full maiden name Bernave Sanchez
9. Residence (Usual place of abode) Miami 136	15. Residence (Usual place of abode) 136 Miami
If nonresident, give place and state Mexican Cay.	If nonresident, give place and state Mexican Cay.
10. Color or race Mexican	16. Color or race Mexican
11. Age at last birthday 40 (Years)	17. Age at last birthday 36 (Years)
12. Birthplace (city or place) Santa Maria De	18. Birthplace (city or place) Santa Maria De
(State or country) El Oro St Durango	(State or country) El Oro St. Durango
13. Occupation Nature of industry Miner	19. Occupation Nature of industry — —

20. Number of children of this mother 4 (Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living yes
(b) Born alive but now dead
(c) Stillborn yes

21. Were precautions taken against ophthalmia neonatorum?

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was Born (Born alive or stillborn.) at 7 a.m. 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.

Signature Rosa Cortez (Physician or midwife)
Address Mexican Cayon 136

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

Filed Apr 30, 1924 C. E. Irwin Local Registrar.

Filed 5-8- 1924 B. G. Fia County Registrar.

Registrar.

411-226-229

In order of birth stated. ... be made for each, and the number of each.