

2163

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD. 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

ARIZONA STATE BOARD OF HEALTH

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

BUREAU OF VITAL STATISTICS ORIGINAL CERTIFICATE OF BIRTH

State Index No. 141 County Registrar No. 215 Local Registrar No. 1

2. Full name of child Enrique Quintana 3. Sex of Child Male 4. Twin, triplet or other _____ 5. Legitimate? yes 6. Date of birth March 10 1924 (If child is not yet named, make supplemental report, as directed.)

5. FATHER Full name Miguel Miguel Quintana 9. Residence (Usual place of abode) Weikelman If nonresident, give place and state

14. MOTHER Full maiden name Maria Baldenegro 15. Residence (Usual place of abode) Weikelman If nonresident, give place and state

10. Color or race Mexican 11. Age at last birthday 26 (Years)

16. Color or race Mex 17. Age at last birthday 20 (Years)

12. Birthplace (city or place) Guaymas (State or country) Mexico 13. Occupation Am. Smith & Refining Co. Nature of industry _____

18. Birthplace (city or place) Blountville (State or country) Arizona 19. Occupation Housewife 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 1:30 p.m. on the date above stated. (Born alive or stillborn.)

Signature Felix R. Morales (Physician or midwife) Address _____ Filed March 12 1924 Local Registrar. Filed 4-6 1924 County Registrar.

501-310-426