WRITE PLAINLY WITH UNFADING [illegible]—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.

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 162

County Registrar No. 81

Local Registrar No. 34

PLACE OF BIRTH

1. County of Gila

District of

Town of Miami

or

City of Miami Ariz No. 504 Mex. Cayon St., Ward

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

2. Full name of child Reymundo Castañeda (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 1 - 7 - 25 (Month Day Year)

8. FATHER

Full name Eduardo Castañeda

9. Residence (Usual place of abode) 504 Mex. Cayon

If non-resident, give place and state.

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

12. Birthplace (city or place) Sierra Mogada (State or country) Mexico

13. Occupation Nature of industry Miner

14. MOTHER

Full maiden name Eutimia Guerta

15 Residence (Usual place of abode) 504 Mex. Cayon

If non-resident, give place and state.

16 Color or race Mexican | 17. Age at last birthday 25 (Years)

18. Birthplace (city or place) House Wife (State or country)

19. Occupation Jimenez Mex. 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 4
(b) Born alive but now dead
(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 alive (Born alive or stillborn.) at 1: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 evidence of life after birth.

Signature Rosa Cortez (Physician or midwife).

Address 816 Sullivan St

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

Filed Feb 1, 1925 Nelson D Brayton Local Registrar.

Registrar

Filed 3/9, 1925 G. E. Wyllman County Registrar.

931-107-571