

WRITE MAINLY 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

ARIZONA STATE BOARD OF HEALTH

1. County of Pima
 District of _____
 Town of Miami
 or _____
 City of _____

BUREAU OF VITAL STATISTICS
 ORIGINAL CERTIFICATE OF BIRTH

State Index No. 171
 County Registrar No. 54
 Local Registrar No. 10

2. Full name of child Josefa
Josepha Sauchey St. _____ Ward _____
(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 Female To be answered ONLY in event of plural }
 4. Twin, triplet or other _____ }
 5. No., in order of birth _____ }
 6. Legitimate? Yes }
 7. Date of birth Jan 9 1925
 Month Day Year

8. FATHER
 Full name Daniel Sauchey

14. MOTHER
 Full name Carmen Posada

9. Residence (Usual place of abode) Miami
 If non-resident, give place and state.

15. Residence (Usual place of abode) Miami
 If non-resident, give place and state.

10. Color or race Spaniard
 11. Age at last birthday 25 (Years)

16. Color or race Spaniard
 17. Age at last birthday 21 (Years)

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

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

13. Occupation Miner
 Nature of industry

19. Occupation HW
 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 _____
 (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 Born alive at 9:20 P.M. on the date above stated
 (Born alive or stillborn.)

Signature Nelson D. Bryntson (Physician or midwife).

Address Miami

Given name added from a supplemental report. Filed Jan 10 1925 Nelson D. Bryntson Local Registrar.

Month, day, year. Filed 2 19 1925 G. E. Wylburn County Registrar.

Registrar

129-109-379