WRITE PLAINLY 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.

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 102

County Registrar No. 154

Local Registrar No. 1 38

PLACE OF BIRTH

1. County of Gila,

District of Globe,

Town of

or

City of Globe, No. St. Ward

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

2. Full name of child Manuel Cordova, (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 2 (Month) 2 (Day) 1925 (Year)

FATHER

8. Full name: Manuel Cordove,

9. Residence (Usual place of abode): Globe,

If non-resident, give place and state.

10. Color or race: White

11. Age at last birthday 32 (Years)

12. Birthplace (city or place) Los Cruses,

(State or country) New Mexico,

13. Occupation: Laborer

Nature of industry

MOTHER

14. Full maiden name: Martina Alire,

15. Residence (Usual place of abode): Globe,

If non-resident, give place and state.

16. Color or race: White

17. Age at last birthday 23 (Years)

18. Birthplace (city or place)

(State or country) Mexico,

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 3

(b) Born alive but now dead

(c) Stillborn

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 Alive (Born alive or stillborn) at 6 P. 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 Manuel Cordova Father (Physician or midwife).

Address Globe, Ariz.

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

Filed Mar. 5, 1925 G. E. Weyhlmire Local Registrar.

Registrar

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

431-202-415