

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

1. County of DeLa

District of _____

Town of Miami

or

City of _____

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTHState Index No. 157County Registrar No. 114Local Registrar No. 69No. Mackey Hill St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)2. Full name of child Simona Aguirre

If child is not yet named, make supplemental report, as directed.

3. Sex of Child

To be answered ONLY
in event of plural
births.4. Single triplet or other6. Legitimate? yes no

7. Date

of birth Feb-18-1925
Month day year

5. FATHER

Full name

Proculo Aguirre9. Residence
(Usual place of abode)Miami
Ariz.

If nonresident, give place and state

10. Color or race

Mex.11. Age at last birthday 26 (Years)

12. Birthplace (city or place)

Durango
Mex

(State or country)

13. Occupation

Nature of industry

Miner

14. MOTHER

Full maiden name

Celerina Barron15. Residence
(Usual place of abode)Miami
Ariz.

If nonresident, give place and state

16. Color or race

Mex.17. Age at last birthday 26 (Years)

18. Birthplace (city or place)

Chihuahua
Mex.

(State or country)

19. Occupation

Nature of industry

Housewife

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 1(c) Stillborn 021. Were precautions taken against
thelasma neonatorum?yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was born at 8 P. m. on the date above stated.
(Born alive or stillborn)*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

Byril M. Brown, M.D.

(Physician or midwife)

Address

Miami, Ariz.

Given name added from

a supplemental report

Month, day, year.

Filed Feb 28, 1925 Neel D. Branton

Local Registrar.

Filed 3/1, 1925 G. E. Wylton

County Registrar.

Registrar.

215-218-325

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.