

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

1. County of Gila

District of _____

Town of Miami

or _____

City of _____

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTHState Index No. 161County Registrar No. 116Local Registrar No. 71No. 3205 Turkey Shoof 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.

2. Full name of child Salvador Barron2. Sex of Child Male To be answered ONLY in event of plural births. 4. Twin, triplet or other _____ 6. Legitimate? yes 7. Date of birth Feb 20-1925 Month day year5. No. in order of birth 48. FATHER
Full name Eulocio Barron14. MOTHER
Full maiden name Teresa Gamboa9. Residence (Usual place of abode) Miami Ariz
If nonresident, give place and state15. Residence (Usual place of abode) Miami Ariz
If nonresident, give place and state10. Color or race Mex. 11. Age at last birthday 32 (Years)16. Color or race Mex. 17. Age at last birthday 37 (Years)12. Birthplace (city or place) Jalisco Mex.
(State or country)18. Birthplace (city or place) Zacatecas Mex
(State or country)13. Occupation
Nature of industry Machinist19. Occupation
Nature of industry Housewife20. 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 1 (c) Stillborn _____21. Were precautions taken against opthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born at 2:40 a.m. on the date above stated. (Born alive or stillborn.)Signature Cyril M. Brown, M.D. (Physician or midwife)
Address Miami ArizGiven name added from a supplemental report _____
Month, day, year. Filed Feb 28, 1925 Arresto Brynton Local Registrar.Filed 3/9, 1925 A. E. Wyllie County Registrar.

Registrar.

225-220-371

WHILE PLACED WITH UNFADING INK - THIS IS 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.