

WRITE PLAIN 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

1. County of Gila  
 District of \_\_\_\_\_  
 Town of Miami  
 or \_\_\_\_\_  
 City of \_\_\_\_\_

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS  
 ORIGINAL CERTIFICATE OF BIRTH

State Index No. 165  
 County Registrar No. \_\_\_\_\_  
 Local Registrar No. 651

No. \_\_\_\_\_ (If birth occurred in a hospital or institution, give its NAME instead of street and number) St. \_\_\_\_\_ Ward \_\_\_\_\_

2. Full name of child Edita Reyes (If child is not yet named, make supplemental report, as directed)

3. Sex of Child Female To be answered ONLY in event of plural births. 4. Twin, triplet or other. \_\_\_\_\_ 5. No. in order of birth 6 6. Legitimate? yes 7. Date of birth May 5, 1925  
 Month Day Year

8. FATHER  
 Full name Alberto Reyes  
 9. Residence (Usual place of abode) Miami, Ariz.  
 If non-resident, give place and state.  
 10. Color or race Mex.  
 11. Age at last birthday 34 (Years)  
 12. Birthplace (city or place) Coahuila, Mex.  
 (State or country)  
 13. Occupation  
 Nature of industry Miner

14. MOTHER  
 Full maiden name Blasa Flores  
 15. Residence (Usual place of abode) Miami, Ariz.  
 If non-resident, give place and state.  
 16. Color or race Mex.  
 17. Age at last birthday 27 (Years)  
 18. Birthplace (city or place) Morenci, Arizona  
 (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 5  
 (b) Born alive but now dead 1  
 (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 born (Born alive or stillborn) at 8:30 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 Byril M. Brown, M.D. (Physician or midwife)  
 Address Miami, Ariz.

Given name added from a supplemental report Month, day, year \_\_\_\_\_ Filed May 23, 1925 C. E. Iron Local Registrar.

Registrar

Filed \_\_\_\_\_, 19\_\_\_\_

County Registrar.

592-505-260