

MAKING RESERVED FOR BINDING

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
STANDARD CERTIFICATE OF BIRTH

State File No. 102
Registered No. 262

1. PLACE OF BIRTH

County Yuma State _____
District or Township Miami or Village _____
City _____ No. _____ St. _____ Ward _____

2. Full name of child

Esperanza Castenada (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 births. 4. Twin, triplet or other _____ 5. No., in order of birth _____ 6. Legitimate? Yes 7. Date of birth Sept 10, 1914
Month Day Year

8. FATHER

Full name Jose P. Castenada

9. Residence

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

10. Color or race

Mex 11. Age at last birthday 24 (Years)

12. Birthplace (city or place)

Palacio Durango, Mex. Co.
(State or country)

13. Occupation

Nature of Industry Mines Coffee Trade

14. MOTHER

Full maiden name Solidad Caneles

15. Residence

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

16. Color or race

Mex 17. Age at last birthday 22 (Years)

18. Birthplace (city or place)

Tlaxco Durango, Mexico
(State or country)

19. Occupation

Nature of Industry Housewife

20. Number of children of this mother 2

(Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living 2
(b) Born alive but now dead 0
(c) Stillborn 0

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 120 on the date above stated
(Born alive or stillborn.)

Signature Charles E. Dini

* 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.

Given name added from a supplemental report _____

Address Miami Arizona (Physician or midwife)

Month, day, year 5 31 - 9 10 - 23 16
Registrar

Filed Sept 15, 1914 C. E. Dini
Registrar