

WRITE PLAINLY WITH UNFADING INK.—THIS IS A 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.

# ARIZONA STATE BOARD OF HEALTH

## PLACE OF BIRTH

1. County of DeLa  
District of \_\_\_\_\_  
Town of Miami  
or \_\_\_\_\_  
City of Miami Ariz.

## BUREAU OF VITAL STATISTICS ORIGINAL CERTIFICATE OF BIRTH

State Index No. 214  
County Registrar No. \_\_\_\_\_  
Local Registrar No. 311

No. 717 St. Line Oak st. Ward \_\_\_\_\_  
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Roberto Enciso  
(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 Oct. 31-25  
Month Day Year

8. FATHER  
Full name Melipe Enciso  
9. Residence (Usual place of abode) Line Oak st #717  
If non-resident, give place and state. \_\_\_\_\_  
10. Color or race Mexican  
11. Age at last birthday 24 (Years)  
12. Birthplace (city or place) Bonita para  
(State or country) Mexico  
13. Occupation  
Nature of industry Musicians

14. MOTHER  
Full maiden name Paula Almeyda  
15. Residence (Usual place of abode) Line Oak st #717  
If non-resident, give place and state. \_\_\_\_\_  
16. Color or race Mexican  
17. Age at last birthday 23 (Years)  
18. Birthplace (city or place) Bonita para  
(State or country) Mexico  
19. Occupation  
Nature of industry House Wife

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 2 (b) Born alive but now dead 2 074 (c) Stillborn \_\_\_\_\_  
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 7:00 a.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 evidence of life after birth.  
Signature Rosa Cortez (Physician or midwife)  
Address Miami Temp

Given name added from a supplemental report. \_\_\_\_\_  
Month, day, year \_\_\_\_\_ Filed Nov 6 1925 C.E. Ford  
Local Registrar.

Registrar \_\_\_\_\_ Filed \_\_\_\_\_ 19 \_\_\_\_\_ County Registrar.

956-1031-719