

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 173
 Registered No. 306

1. PLACE OF BIRTH

County Gila State _____
 District or Township _____ or Village _____
 City Globe No. _____ St. _____ Ward _____

2. Full name of child Aracelia Bernal (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 12-22-25
 Month Day Year

8. FATHER
 Full name Frederico Bernal

14. MOTHER
 Full maiden name Dolores Noriega

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

15. Residence (Usual place of abode) Globe
 If non-resident, give place and state. Ariz.

10. Color or race Mex. 11. Age at last birthday 31 (Years)

16. Color or race Mex. 17. Age at last birthday 24 (Years)

12. Birthplace (city or place) Mexico
 (State or country)

18. Birthplace (city or place) Mexico
 (State or country)

13. Occupation
 Nature of Industry Miner

19. Occupation
 Nature of Industry Housewife

20. Number of children of this mother 3
 (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 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 12:30 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 evidence of life after birth.

Signature C. W. Adams
Globe, Arizona
 (Physician or midwife)

Given name added from a supplemental report _____ Address _____
 Month, day, year _____

Filed 12-31 1925 N. Notont
 Registrar

N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of order of birth stated.

123-1222-451