

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

State File No. 5114
 Registered No. 1B1

1. PLACE OF BIRTH

County Gila State Arizona
 District or Township _____ or Village _____
 City Globe No. _____ St. _____ Ward _____
 (If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Lydia Barela (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 1 6. Legitimate? yes 7. Date of birth June 29, 1926
 Month Day Year

8. FATHER
 Full name Martin Barela

14. MOTHER
 Full maiden name Rose Chavez

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

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

10. Color or race Mexican 11. Age at last birthday 21 (Years)

16. Color or race Mexican 17. Age at last birthday 18 (Years)

12. Birthplace (city or place) El Paso Texas
 (State or country)

18. Birthplace (city or place) Pima Arizona
 (State or country)

13. Occupation Miner in mine
 Nature of industry

19. Occupation Housewife
 Nature of industry

20. Number of children of this mother Two (Taken as of time of birth of child herein certified and including this child.) (a) Born alive and now living Two (b) Born alive but now dead none (c) Stillborn none 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 (Born alive or stillborn.) at 1:20 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 T.C. Harper (Physician or midwife.)
Physician

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

Filed 6/31, 1926 W. W. Horst
 Registrar Registrar

321-629-939

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD
 N. D.—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.