ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

PLACE OF BIRTH
1. County of Gila
District of
Town of
or
City of Miami No. 139 Miami Ave St., Ward
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

State Index No. 143
County Registrar No.
Local Registrar No. 962

2. Full name of child Miguel Pastor { 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 Dec 12 - 1926 (Month Day Year)

8. FATHER	14. MOTHER
Full name Antonio Pastor	Full maiden name Isabel Heredia
9. Residence (Usual place of abode) Miami Ariz. If non-resident, give place and state.	15 Residence (Usual place of abode) Miami Ariz. If non-resident, give place and state.
10. Color or race White	16 Color or race Mexican
11. Age at last birthday 50 (Years)	17. Age at last birthday 42 (Years)
12. Birthplace (city or place) Spain (State or country)	18. Birthplace (city or place) Mexico (State or country)
13. Occupation Merchant Nature of industry	19. Occupation Housewife Nature of industry

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 7
(b) Born alive but now dead 3
(c) Stillborn 1

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 or [redacted]) at 9 a. 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 C. J. Hotel M.D. (Physician or midwife)
Address Miami Ariz

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

Filed Jan 6, 1926 C. E. Irvin Local Registrar.

Registrar

Filed, 19 County Registrar.

479-1212-981

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.