

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

1. County of Pima

District of _____

Town of Marina

or

City of _____ No. _____ Ward _____
 (If birth occurred in hospital or institution, give its NAME instead of street and number)

BUREAU OF VITAL STATISTICS
 ORIGINAL CERTIFICATE OF BIRTH

State Index No. 145

County Registrar No. _____

Local Registrar No. 950

2. Full name of child Douney

3. Sex of Child Female To be answered ONLY in event of plural births. } 4. Twin, triplet or other. _____ 6. Legitimate? Yes
 5. No., in order of birth. _____ 7. Date of birth Dec 12 1926
 Month day year

3. FATHER
 Full name Risto Douney
 3. Residence (Usual place of abode) Marina
 If nonresident, give place and state

14. MOTHER
 Full maiden name Julia Gargas
 15. Residence (Usual place of abode) Marina
 If nonresident, give place and state

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

16. Color or race Mexican
 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 (Taken as of time of birth of child herein certified and including this child.)
 (a) Born alive and now living 1
 (b) Born alive but now dead _____
 (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 Dec 12 at 3 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 evidences of life after birth.
 Signature Wesley S. Brayton (Physician or midwife)
 Address Marina, Ariz.

Given name added from _____
 supplemental report _____
 Month, day, year. _____ Filed Dec 28 1926 Local Registrar.

Registered _____ Filed _____ 19 _____ County Registrar.

079-1212-172

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. WRITE SEPARATELY WITH UNFADING INK—THIS IS A PERMANENT RECORD in order of birth stated.