

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

State File No. 113
 Registered No. 21

PLACE OF BIRTH

County Gila State Arizona
 District or Township _____
 City Miami No. _____ St. _____ Ward _____

2. Full name of child Nicanora Hernandez (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 Jan 10 1928
 Month Day Year

8. FATHER
 Full name Ramon Hernandez
 9. Residence (Usual place of abode) terkey shoot
 If non-resident, give place and state. Canyon

14. MOTHER
 Full maiden name Maria Casillas
 15. Residence (Usual place of abode) terkey shoot
 If non-resident, give place and state. Canyon

10. Color or race Mexican
 11. Age at last birthday 38 (Years)

16. Color or race Mexican
 17. Age at last birthday 33 (Years)

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

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

13. Occupation
 Nature of Industry Miner

19. Occupation
 Nature of Industry Domestic

20. Number of children of this mother 4 (a) Born alive and now living 4 (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 born alive at 6 am 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 Guana Martinez
Blaupool Arizona
 (Physician or midwife)

Given name added from a supplemental report _____
 Month, day, year 589-110-432
 Registrar

Address _____
 Filed Jan 20, 1928 L. E. Dinn
 Registrar