

## PLACE OF BIRTH

## ARIZONA STATE BOARD OF HEALTH

1. County of Gila  
 District of \_\_\_\_\_  
 Town of Hayden  
 or \_\_\_\_\_  
 City of \_\_\_\_\_ No. \_\_\_\_\_ St. \_\_\_\_\_

BUREAU OF VITAL STATISTICS  
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 122  
 County Registrar No. \_\_\_\_\_  
 Local Registrar No. 2

2. Full name of child Eugenio Verdun (If birth occurred in a hospital or institution, give its NAME instead of street)  
 { If child is not yet supplemental report

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 Jan 13 Month Day

8. FATHER  
 Full name Geodoro Verdun

14. MOTHER  
 Full maiden name Bernardino Romero

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

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

10. Color or race Mexican 11. Age at last birthday 24 (Years)

16. Color or race Mexican 17. Age at last birthday 1

12. Birthplace (city or place) Del Rio de San Antonio  
 (State or country) Jalisco, Mex.

18. Birthplace (city or place) Del Rio de San Antonio  
 (State or country) Jalisco, Mex.

13. Occupation Laborer  
 Nature of industry Copper Smelter

19. Occupation Housewife  
 Nature of industry Housewife

20. Number of children of this mother } (a) Born alive and now living 2  
 (Taken as of time of birth of child herein } (b) Born alive but now dead 0  
 certified and including this child.) } (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 \_\_\_\_\_ at 8:00 A m. on the date \_\_\_\_\_

(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 Eufemia Romero (Physician or midwife)Address Hayden Ariz Mex

Given name added from a supplemental report

Month, day, year

555-113-296

Registrar

Filed Jan 18, 1928 WTJ Local

Filed \_\_\_\_\_, 19\_\_\_\_ Count \_\_\_\_\_