

SUPPLEMENT ATTACHED

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

State File No. 137
Registered No. 11

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

Full name of child Antonio Bernal (If child is not yet named, make supplemental report, as directed.)

Sex of Child Male To be answered ONLY in event of plural births. 4. Twin, triplet or other Yes 6. Legitimate? Yes 7. Date of birth Jan. 20, 1928
Month Day Year

FATHER
Full name Frederico Bernal
Residence (Usual place of abode) Globe
If non-resident, give place and state. Arizona
1. Color or race Mexican
11. Age at last birthday 33 (Years)
2. Birthplace (city or place) Mexico
(State or country)
3. Occupation miner
Nature of industry

MOTHER
Full maiden name Dolores Noriega
15 Residence (Usual place of abode) Globe
If non-resident, give place and state. Ariz.
16 Color or race Mexican
17. Age at last birthday 26 (Years)
18. Birthplace (city or place) Mexico
(State or country)
19. Occupation Housewife
Nature of industry

10. Number of children of this mother 5 taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living 5
(b) Born alive but now dead 0
(c) Stillborn 0
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 1:30 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 evidence of life after birth.
Signature T. E. Harper
(Physician or midwife)

Given name added from supplemental report _____ Address Globe Arizona

Month, day, year 123-120-451 Registrar
Filed 2/6 1928 E. E. Wightman Registrar