PLACE OF BIRTH

1. County of Gila

District of

Town of

or

City of Miami Ariz No. 603 B Gibson St. Ward

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 135

County Registrar No.

Local Registrar No. 205

2. Full name of child Ester Mendoza

If child is not yet named, make supplemental report, as directed.

3. Sex of Child: Girl

To be answered ONLY in event of plural births. 4. Twin, triplet or other 5. No., in order of birth

6. Legitimate?

7. Date of birth May 12 1928 (Month, day, year)

8. FATHER

Full name Concepcion Mendoza

9. Residence (Usual place of abode) 603 B Gibson st

If nonresident, give place and state

10. Color or race: Mexican

11. Age at last birthday 35 (Years)

12. Birthplace (city or place) Villa Hidalgo

(State or country) Jalisco Mexico

13. Occupation: Miner

Nature of industry

14. MOTHER

Full maiden name Juanita Esparza

15. Residence (Usual place of abode) 603 B Gibson st

If nonresident, give place and state

16. Color or race: Mexican

17. Age at last birthday 28 (Years)

18. Birthplace (city or place) Villa Hidalgo

(State or country) Jalisco, Mexico

19. Occupation: Housework

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 3

(b) Born alive but now dead 2

(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 alive (Born alive or stillborn.) at 12:40 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 evidences of life after birth.

Signature Rosa Cortez (Physician or midwife)

Address 806 Sullivan st

Given name added from a supplemental report

Month, day, year.

Filed May 20 1928 [illegible] Local Registrar.

Registrar.

Filed 19

County Registrar.

541-512-151