ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 110

Registered No. 292

1. PLACE OF BIRTH

County: Gila State: Arizona

District or Township: or Village:

City: Miami No. 810 Sullivan St., Ward

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

2. Full name of child: Marcial Atelano (If child is not yet named, make supplemental report, as directed.)

3. Sex of Child: Boy

To be answered ONLY in event of plural births.

4. Twin, triplet or other:

5. No., in order of birth:

6. Legitimate? Natural

7. Date of birth: July (Month) 3 (Day) 1928 (Year)

FATHER

8. Full name: Jose Atelano

9. Residence (Usual place of abode): 810 Sullivan St

If non-resident, give place and state.

10. Color or race: Mexican

11. Age at last birthday: 26 (Years)

12. Birthplace (city or place): San Juan de las Lagos

(State or country): Jalisco Mexico

13. Occupation: Miner

Nature of industry:

MOTHER

14. Full maiden name: Carmen Lomali

15. Residence (Usual place of abode): 810 Sullivan St

If non-resident, give place and state.

16. Color or race: Mexican

17. Age at last birthday: 23 (Years)

18. Birthplace (city or place): Tombstone Ariz

(State or country):

19. Occupation: Housewife

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:

(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 8.30 a.m. on the date above stated.

Signature: Rosa Leerty

(~~Physician or~~ midwife).

Address: 806 Sullivan St

Filed July 12, 1928

C. E. Tom

Registrar.

* 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.

Given name added from a supplemental report: Month, day, year

Registrar.

416-703-339

...ade for each, and the number of each is ...
...In case of more than one child at a birth, a SEPARATE RETURN must ...
order of birth stated.