M. ... RESERVED FOR BINDING

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD

N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 111

Registered No. 350

1. PLACE OF BIRTH

County Gila State Ariz

District or Township ..... or Village .....

City Miami No. ..... St., ... Ward

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

2. Full name of child Elisa Bustamante {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 4 | 6. Legitimate? yes | 7. Date of birth Aug. 7 1928 (Month Day Year)

8. FATHER

Full name Alberto Bustamante

9. Residence (Usual place of abode)

If non-resident, give place and state. 1130 Granite Spgs.

10. Color or race White

11. Age at last birthday 32 (Years)

12. Birthplace (city or place) San Andres

(State or country) Chih. Mex

13. Occupation

Nature of industry Miner

14. MOTHER

Full maiden name Maria Bustamante

15. Residence (Usual place of abode)

If non-resident, give place and state. 1130 Granite Spgs.

16. Color or race White

17. Age at last birthday 26 (Years)

18. Birthplace (city or place) Metcalf

(State or country) Arizona

19. Occupation

Nature of industry Housewife

20. Number of children of this mother 4

(Taken as of time of birth of child herein certified and including this child).

(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 1:30 A.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 Rosa Cortez

(~~Physician~~ or midwife).

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

Address Sullivan 806

Filed Aug 14, 1928 C. E. Irvin

Registrar. Registrar.

525-807-425