

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

State File No. 173
 Local Registrar's No. 55

1. PLACE OF BIRTH

County Gila State _____
 District or Township _____ or Village _____
 City Hayden No. _____ St. _____ Ward _____

2. Full name of child Denorena Lopez
(If birth occurred in a hospital or institution, give its NAME instead of street and number. 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 _____ 6. Legitimate? Yes
 5. No., in order of birth _____ 7. Date of Birth Apr 22 1929
 Month Day Year

8. FATHER
 Full name Baldemero Lopez
 9. Residence (Usual place of abode) Hayden
 If non-resident, give place and state.

14. MOTHER
 Full name Patrona Marquez
 15. Residence (Usual place of abode) Hayden
 If non-resident, give place and state.

10. Color or race Mex
 11. Age at last birthday 30 (Years)

16. Color or race Mex
 17. Age at last birthday 32 (Years)

12. Birthplace (city or place) State of Michoacan Mexico
 (State or country)

18. Birthplace (city or place) State of Michoacan Mexico
 (State or country)

13. Occupation laborer
 Nature of industry

19. Occupation house wife
 Nature of industry

20. Number of children of this mother _____ (a) Born alive and now living 4
 (Taken as of time of birth of child herein certified and including this child.) (b) Born alive but now dead 3
 (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 or stillborn) at 5:30 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 evidence of life after birth.

Signature Charles M. Burdick
 (Physician or midwife)

Given name added from a supplemental report _____ Address Hayden Ariz
 Month, day, year

Filed Apr 27 1929 Registrar W. B. Dool

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WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD
 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.