127 V

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 127

Registered No. 311

1. PLACE OF BIRTH

County: Gila State: Arizona

District or Township: Barrier Siding or Village:

City: Miami No. 402 Barrier Canyon St. Ward

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

2. Full name of child: Manuela Partilla [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: 6. Legitimate? Yes 7. Date of birth: July 6 1929 (Month Day Year)

8. FATHER

Full name: Ignacio Partilla

9. Residence (Usual place of abode): Miami Arizona

If non-resident, give place and state.

10. Color or race: Mexican 11. Age at last birthday: 41 (Years)

12. Birthplace (city or place): (State or country): Mexico

13. Occupation: Surface laborer

Nature of industry: Copper mine

14. MOTHER

Full maiden name: Juana Echiveste

15. Residence (Usual place of abode): Miami, Arizona

If non-resident, give place and state.

16. Color or race: Mexican 17. Age at last birthday: 29 (Years)

18. Birthplace (city or place): (State or country): Mexico

19. Occupation: Housewife

Nature of industry:

20. Number of children of this mother: 6 (Taken as of time of birth of child herein certified and including this child.)

(a) Born alive and now living: 6

(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 alive (Born alive ~~or stillborn~~) at 3:30 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 evidence of life after birth.

Signature: J. F. Miller

MD (Physician or midwife)

Address: Miami Arizona

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

Registrar

Filed July 15 1929 C. E. Dorn Registrar