

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

State File No. 163  
 Registered No. 450

**1. PLACE OF BIRTH**

County Gila State Arizona  
 District or Township \_\_\_\_\_ or Village \_\_\_\_\_  
 City Miami No. 408 Olive St. St. \_\_\_\_\_ Ward \_\_\_\_\_  
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Leonore Luera (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 Sept. 19 - 1929  
 Month Day Year

**8. FATHER**  
 Full name Ladislado Luera  
 9. Residence (Usual place of abode) Miami  
 If non-resident, give place and state. Arizona  
 10. Color or race Mex.  
 11. Age at last birthday 35 (Years)  
 12. Birthplace (city or place) Jalisco  
 (State or country) Mex.  
 13. Occupation  
 Nature of industry Miner  
 20. Number of children of this mother 6  
(Taken as of time of birth of child herein certified and including this child.)

**14. MOTHER**  
 Full maiden name Marcaria Huerta  
 15. Residence (Usual place of abode) Miami  
 If non-resident, give place and state. Arizona  
 16. Color or race Mex.  
 17. Age at last birthday 24 (Years)  
 18. Birthplace (city or place) Jalisco  
 (State or country) Mex.  
 19. Occupation  
 Nature of industry Housewife  
 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 2 A. m. on the date above stated.  
(Born alive or stillborn.)

Signature Louise M. Brown M.D.  
Physician  
(Physician or midwife.)

Given name added from a supplemental report \_\_\_\_\_  
 Month, day, year \_\_\_\_\_  
 Address Miami, Arizona  
 Filed Sept 25, 1929 R. E. Dwyer  
 Registrar Registrar

331-919-481

\* 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.