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

State File No. 586
Registered No. 586

1. PLACE OF BIRTH

County Giila State Arizona
District or Township _____ or Village _____
City Miami No. 1000 Sullivan St St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Irene Madril { 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 7. Date of birth Oct. 20-1929
Month Day Year

8. FATHER
Full name Edmundo Madril
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 29 (Years)
12. Birthplace (city or place) Clifton
(State or country) Arizona
13. Occupation
Nature of Industry Miner

14. MOTHER
Full maiden name Solidad Contreras
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) Juarez, Chih.
(State or country) Mex.
19. Occupation
Nature of Industry Housewife

0. Number of children of this mother 5 } (a) Born alive and now living 5
Taken as of time of birth of child herein } (b) Born alive but now dead 0
certified and including this child. } (c) Stillborn 0 21. Were precautions taken against ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

hereby certify that I attended the birth of this child, who was born alive at 4 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 Cyril M. Peterson, M.D.
Physician
(Physician or midwife)

Even name added from supplemental report _____ Address Miami, Arizona

Month, day, year _____ Filed Jan 2, 1930 W. E. Jones
Registrar Registrar

943-1020-232