

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

State File No. 167
Registered No. 199

1. PLACE OF BIRTH

County Isila State Ariz.

District or Township Eslobe or Village _____
City _____ No. _____ St. _____ Ward _____

2. Full name of child Luzia Piñon (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 Oct. 26, 1929
Month Day Year

8. FATHER
Full name Jaribia Piñon

14. MOTHER
Full maiden name Josefina Magdalena

9. Residence (Usual place of abode) Eslobe, Ariz.
If non-resident, give place and state.

15. Residence (Usual place of abode) Eslobe, Ariz.
If non-resident, give place and state.

10. Color or race Mex. 11. Age at last birthday 42 (Years)

16. Color or race Mex. 17. Age at last birthday 30 (Years)

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

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

13. Occupation miner
Nature of industry

19. Occupation N.W.
Nature of industry

20. Number of children of this mother 3
(Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living 3
(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 born alive at 10:10 P. 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 T. S. Harper
physician
(Physician or midwife.)

Given name added from _____ Address Eslobe, Arizona

Month, day, year _____ Filed Nov 9 1929 G. E. Wightman
Registrar Registrar

375-1026-141