

PLACE OF BIRTH

1. County Pima
 District of _____
 Town of _____
 or _____
 City of Mission

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 185
 County Registrar No. 547
 Local Registrar No. _____

No. 506 Cinta Street Ward _____
 (If birth occurred in a hospital or institution, give its NAME instead of street and number)
 2. Full name of child Eduardo Rodriguez If child is not yet named, make supplemental report, as directed.

3. Sex of Child Male To be answered ONLY in event of plural births.
 4. Twin, triplet or other. _____
 5. No. in order of birth. 1st
 6. Legitimate? yes
 7. Date of birth Nov 26 1929
 Month day year

8. FATHER
 Full name Encarnacion Rodriguez
 9. Residence (Usual place of abode) Mission
 If nonresident, give place and state _____

14. MOTHER
 Full maiden name Matilda Manuel
 15. Residence (Usual place of abode) Mission
 If nonresident, give place and state _____

10. Color or race Mexican
 11. Age at last birthday 28 (Years)

16. Color or race Mexican
 17. Age at last birthday 23 (Years)

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

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

13. Occupation
 Nature of industry Miner

19. Occupation
 Nature of industry Housewife

20. Number of children of this mother (a) Born alive and now living 3
 (Taken as of time of birth of child herein certified and including this child.) (b) Born alive but now dead 0
 (c) Stillborn 0

21. Were precautions taken against opthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was _____ at _____ 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 evidences of life after birth.
 Given name added from supplemental report _____

Signature Nelson D. Braxton (Physician or wife)

Address Mission

Filed Dec 10 1929 Registrar.

Registrar.

Filed

19

County Registrar.

599-1126-443