

order of birth stated.

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

151
State File No. 579
Registered No. _____

1. PLACE OF BIRTH

County Gila State Arizona
District or Township _____ of Village _____
City Miami No. 1133 Sullivan St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child

Arturo Nevarez {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 _____ 6. Legitimate? yes 7. Date of birth Dec 15 1919
Month Day Year

8. FATHER
Full name Florencio Nevarez

14. MOTHER
Full maiden name Refugio Macias

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

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

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

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

12. Birthplace (city or place) Miami
(State or country) Arizona

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

13. Occupation miner
Nature of Industry _____

19. Occupation Housewife
Nature of Industry _____

20. Number of children of this mother 8 (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 2
(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 at 10:30 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 J. J. Drayton
(Physician or midwife)

Given name added from a supplemental report _____ Address Miami, Arizona

Month, day, year _____ Filed Dec 20 1919 Registrar C. E. Drayton

Registrar _____
159-1215-942