

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

State File No. 236  
 Registered No. 4 D F

1. PLACE OF BIRTH

County Pima State ARIZONA  
 Township \_\_\_\_\_ or Village \_\_\_\_\_  
 City Tucson No. \_\_\_\_\_ St. \_\_\_\_\_ Ward \_\_\_\_\_  
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child grenda Euselia Munguia If child is not yet named, make supplemental report, as directed

3. Sex Female If plural births 4. Twin, triplets, or other \_\_\_\_\_ 5. Number, in order of birth \_\_\_\_\_  
 6. Premature \_\_\_\_\_ Full term X 7. Is mother married? YES 8. Date of birth August 14, 1905  
(Month, day, year)

9. Full name FATHER  
Ramon Munguia  
 10. Residence (usual place of abode) Tucson, Arizona  
(If non-resident, give place and State)  
 11. Color or race MEX. 12. Age at last birthday 34 (Years)  
 13. Birthplace (city or place) Tucson,  
(State or Country) ARIZONA  
 14. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Saloon-keeper  
 15. Industry or business in which work was done, as silk mill, sawmill, bank, etc. \_\_\_\_\_  
 16. Date (month and year) last engaged in this work \_\_\_\_\_ 17. Total time (years) spent in this work \_\_\_\_\_

18. Full maiden name MOTHER  
Maria Casanova  
 19. Residence (usual place of abode) Tucson, Arizona  
(If non-resident, give place and State)  
 20. Color or race MEX. 21. Age at last birthday 22 (Years)  
 22. Birthplace (city or place) Tucson,  
(State or Country) ARIZONA  
 23. Trade, profession, or particular kind of work done, as housekeeper, typist, nurse, clerk, etc. housekeeper  
 24. Industry or business in which work was done, as own home, lawyer's office, silk mill, etc. \_\_\_\_\_  
 25. Date (month and year) last engaged in this work \_\_\_\_\_ 26. Total time (years) spent in this work \_\_\_\_\_

27. Number of children of this mother (At time of this birth and including this child) (a) Born alive and now living 3 (b) Born alive but now dead 0 (c) Stillborn 0

28. If stillborn, period of gestation \_\_\_\_\_ months or weeks 29. Cause of stillbirth \_\_\_\_\_  
Before labor \_\_\_\_\_ During labor \_\_\_\_\_

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE**

I hereby certify that I attended the birth of this child, who was born alive at \_\_\_\_\_ m. on the date above stated  
(Born alive or stillborn)

When there was no attending physician - midwife, then the father, householder, should make this return.  
 (Signed) Maria Casanova (Mother) M. D.  
 or D. G. Chalmers, Jr. Midwife

Address 1-22-38 Lebia N. Howard  
 Filed \_\_\_\_\_ 1905 Registrar.





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## California Death Records

9,366,786 records from 1940 thru 1997



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Last Name	First Name	Middle	Birth Date	Mother Maiden	Father Last	Sex	Birth Place	Death Place	Residence	Death Date	SSN	Age	Post-ems	Order Record
AMADRIL	BRENDA	EUSELIA	08/14/1905	CASANOVA	MUNGUIA	F	ARIZONA	<a href="#">LOS ANGELES (19)</a>		05/12/1989	<a href="#">547-42-2386</a>	83 yrs	<a href="#">Add</a>	

Surname <input type="text" value="AMADRIL"/> <input type="button" value="Exact"/>	Birth Year <input type="text"/>
Given Name <input type="text" value="BRENDA"/>	Birth Place <input type="text" value="All"/>
Mother Maiden <input type="text"/>	Death Year <input type="text"/>
Father Last <input type="text"/>	Death Place <input type="text" value="All"/>
Sex <input type="button" value="Female"/>	
<input type="button" value="Search"/> <input type="button" value="Reset"/>	

Source: The California Department of Health Services Office of Health Information and Research vital Statistics Section

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