

2303

616

ARIZONA STATE BOARD OF HEALTH

PLACE OF BIRTH
 County of Graham
 District of _____
 Town of Holmanville
 or _____
 City of _____ (No. _____ St. _____ Ward _____)

BUREAU OF VITAL STATISTICS 150 State Index No. _____
ORIGINAL CERTIFICATE OF BIRTH Co. Register No. 42
 Local Registrar's No. 27

FULL NAME OF CHILD Edmond Figueroa
 If child is not named, make Supplemental Report on blank obtainable from local registrar.

Sex of Child Male Twin, Triplet or other Single and Number in order of birth _____ Legitimate? _____ Date of Birth Feb. 13 1917
 (Month) (Day) (Yr.)
 Born Alive Yes No

FATHER
 Full Name Joaquin Figueroa
 Residence Holmanville Ariz.
 Color or Race White Age at last Birthday 55 (Years)
 Birthplace Honora Mex.
 Occupation Carpenter

MOTHER
 Full Maiden Name Luz M. Mengua
 Residence Holmanville Ariz.
 Color or Race White Age at last Birthday 40 (Years)
 Birthplace Holmanville Ariz.
 Occupation Housewife

Number of child of this mother 11 Number of children, of this mother, now living 9 Were precautions taken against Ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of above child; and that it occurred on 2/13 - 1917, at 89 A.M.

(Signature) _____ (Attending physician, midwife, householder.)
 Address Guadalupe Juarez
W. V. V. Lopez
 LOCAL REGISTRAR.
 A True Copy J. M. Theobald
 COUNTY REGISTRAR.
 Given or christian name added from a supplemental report _____ 191____
 Filed 3/5 1917
 Filed 3/5 1917
561-213-341
 COUNTY REGISTRAR.

This certificate must be given to the attending physician, midwife, or householder, within 6 days after birth, and filed with each local Registrar within 6 days after birth.

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

County of Maricopa
 City of Phoenix
 Town of Phoenix
 State of Arizona

PLACED IN THIS SPACE BY THE REGISTRAR

NAME OF CHILD Colin Andrew
 SEX Male
 DATE OF BIRTH 11/13/1917
 TIME OF BIRTH 11:30 AM
 PLACE OF BIRTH Phoenix, Arizona

Color of Hair	Color of Eyes	Color of Skin	Color of Complexion	Color of Hair	Color of Eyes	Color of Skin	Color of Complexion
<u>Blue</u>	<u>Blue</u>	<u>Fair</u>	<u>Fair</u>	<u>Blue</u>	<u>Blue</u>	<u>Fair</u>	<u>Fair</u>

NAME OF FATHER John Andrew
 NAME OF MOTHER Elizabeth
 OCCUPATION OF FATHER Engineer
 OCCUPATION OF MOTHER Homemaker

DEPARTMENT OF ATTENDING PHYSICIAN OR MIDWIFE
 NAME Dr. J. H. ...
 ADDRESS ...

FILED 11/13/17 COUNTY REGISTRAR
 FILED 11/13/17 COUNTY REGISTRAR

Search Results Provided By

The No. 1 Source for Family History Online

**Database: California Death Index, 1940-1997**August 25, 2004
2:34 PM**Personal Information****What to do next?**

Name: **FIGUEROA, EDMUND**
Social Security #: **562140448**
Sex: **MALE**
Birth Date: **15 Nov 1901**
Birthplace: **ARIZONA**
Death Date: **18 Mar 1970**
Death Place: **LOS ANGELES**
Mother's Maiden
Name:
Father's Surname:

Source Information:

Ancestry.com. *California Death Index, 1940-1997*. [database online] Provo, UT:
Ancestry.com, 2000. Original electronic data: State of California. *California Death Index, 1940-1997*. Sacramento, CA: State of California Department of Health Services, Center for Health Statistics, 19--.

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