

1. PLACE OF BIRTH  
STATE OF TEXAS

TEXAS DEPARTMENT OF HEALTH  
BUREAU OF VITAL STATISTICS  
STANDARD CERTIFICATE OF BIRTH

1137

COUNTY OF Bexar

CITY OR PRECINCT NO. San Antonio, Texas

Santa Rosa Hospital

GIVE STREET AND NUMBER OR NAME OF INSTITUTION

2. FULL NAME OF CHILD Suzane Trevino

RESIDENCE OF THE MOTHER } STREET AND NO. 502 Nathan CITY San Antonio, COUNTY Bexar, STATE Tex

3. SEX Fem FOR PLURAL BIRTHS ONLY: 4. TWIN, TRIPLET, OTHER; 5. NUMBER IN ORDER OF BIRTH; 6. LEGITIMATE? Yes; 7. DATE OF BIRTH January 22, 1946 1946

8. FULL NAME Alonzo U. Trevino  
FATHER

14. FULL MAIDEN NAME Fausta Puente  
MOTHER

SOCIAL SECURITY NUMBER

SOCIAL SECURITY NUMBER

9. POSTOFFICE ADDRESS 502 Nathan

15. POSTOFFICE ADDRESS 502 Nathan

10. COLOR OR RACE White 11. AGE AT LAST BIRTHDAY 36 (YEARS)

16. COLOR OR RACE White 17. AGE AT LAST BIRTHDAY 27 (YEARS)

12. BIRTHPLACE (STATE OR COUNTRY) Texas

18. BIRTHPLACE (STATE OR COUNTRY) Texas

13A. TRADE, PROFESSION OR KIND OF WORK DONE Filling Sta. Attendant

19A. TRADE, PROFESSION OR KIND OF WORK DONE Housewife

13B. INDUSTRY OR BUSINESS IN WHICH ENGAGED

19B. INDUSTRY OR BUSINESS IN WHICH ENGAGED

20. NUMBER OF CHILDREN BORN TO THIS MOTHER INCLUDING THIS BIRTH Five

21. NUMBER OF CHILDREN BORN TO THIS MOTHER AND NOW LIVING Four

SIGNATURE OF INFORMANT

ADDRESS OF INFORMANT



22. CERTIFICATION I HEREBY CERTIFY TO THE BIRTH OF THIS CHILD BORN ALIVE 11:52 AM AT San Antonio M. ON THE ABOVE DATE.

AND THE PROPHYLACTIC USED TO PREVENT OPHTHALMIA NEONATORUM WAS AgNO<sub>3</sub> 1%

DATE 1-24-1946 SIGNATURE [Signature] M. D. REGISTRAR San Antonio, TEXAS

23. FILE NUMBER 677 FILE DATE JAN 28 1946 SIGNATURE OF LOCAL REGISTRAR [Signature] POSTOFFICE ADDRESS SAN ANTONIO TEXAS

AMENDMENT TO CERTIFICATE OF BIRTH