

MARGIN RESERVED FOR BINDING

This supplemental report is to be pasted over RECORD
 beneath the original one for each, and the number of each in
 order of birth.

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No.

34^a

Registered No.

1. PLACE OF BIRTH

County

Cochise

NAME ADDED BY SUPPLEMENTAL STATE

District or Township

or Village

City

Douglas

No.

641-6th

St.

Ward

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child

Carlota Ruiz

If child is not yet named, make supplemental report, as directed.

3. Sex of Child

To be answered ONLY
in event of plural
births.

4. Twin, triplet or other

6. Legitimate?

7. Date

of birth

Month Day Year

Female

5. No., in order of birth

22

May 9-1927

8.

FATHER

Full name

Bruno Ruiz

9. Residence

(Usual place of abode)

Douglas

If non-resident, give place and state.

10. Color or race

Mex

11. Age at last birthday

30 (Years)

12. Birthplace (city or place)

Mex

(State or country)

13. Occupation

Nature of Industry

Chaffeur

14.

MOTHER

Full maiden name

Carlotta Meckel

15. Residence

(Usual place of abode)

Douglas

If non-resident, give place and state.

16. Color or race

Mex

17. Age at last birthday

17 (Years)

18. Birthplace (city or place)

(State or country)

Mex

19. Occupation

Nature of Industry

Housewife

20. Number of children of this mother

1

(Taken as of time of birth of child herein
certified and including this child.)

(a) Born alive and now living

1

(b) Born alive but now dead

0

(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

Born at 8:20 P.M. on the date above stated
(Born alive or stillborn.)

Signature

[Signature]

(Physician or midwife).

Given name added from
a supplemental report.

Month, day, year

399-507-343

Registrar

Address

Filed

11-1

1927

[Signature]

Registrar

WR

N. B.—In case of more than one child, this certificate should be filed for each child.