

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

State File No. 1244
 Registered No. 373

1. PLACE OF BIRTH

County Yila State Arizona
 District or Township _____ or Village _____ St. _____ Ward _____
 City Miami No. _____ (If birth occurred in a hospital or institution, give its NAME instead of street and number)
 (If child is not yet named, make supplemental report, as directed.)

2. Full name of child Lidia Gonzales
 3. Sex of Child Female 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 August 3 1927
 Month Day Year

FATHER
 8. Full name Jesus Gonzales
 9. Residence (Usual place of abode) Miami, Arizona
 If non-resident, give place and state.
 10. Color or race Mexican
 11. Age at last birthday 39 (Years)
 12. Birthplace (city or place) Mexico
 (State or country)
 13. Occupation Miner
 Nature of industry Copper
 14. Number of children of this mother 6

MOTHER
 14. Full maiden name Maria Durazo
 15. Residence (Usual place of abode) Miami, Arizona
 If non-resident, give place and state.
 16. Color or race Mexican
 17. Age at last birthday 28 (Years)
 18. Birthplace (city or place) Mexico
 (State or country)
 19. Occupation Housewife
 Nature of industry _____
 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 3:20 P. m. on the date above stated
 (Born alive or stillborn.)

Signature J. J. Truller
 (Physician or midwife)

Address Miami, Arizona

Filed Aug 11, 1927 J. E. D. Smith Registrar

Given name added from _____
 a supplemental report _____ Month, day, year _____
 Registrar _____

372-803-446