PLACE OF BIRTH

1. County of Gila

District of

Town of

or

City of Miami

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 167

County Registrar No.

Local Registrar No. 417

No. Clark Addition St. Ward

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

2. Full name of child Ricardo Arsenio Encinas { If child is not yet named, make supplemental report, as directed.

3. Sex of Child: Male

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 Sept 25-1927 (Month Day Year)

FATHER

8. Full name Jose Encinas

9. Residence (Usual place of abode) Miami

If non-resident, give place and state. Arizona

10. Color or race Mexican

11. Age at last birthday 33 (Years)

12. Birthplace (city or place) Concentration

(State or country) Sonora Mexico

13. Occupation Miner

Nature of industry Copper

MOTHER

14. Full maiden name Dolores Medina

15. Residence (Usual place of abode) Miami

If non-resident, give place and state. Arizona

16. Color or race Mexican

17. Age at last birthday 24 (Years)

18. Birthplace (city or place) Cananea

(State or country) Sonora Mexico

19. Occupation Housewife

Nature of industry

20. Number of children of this mother (Taken as of time of birth of child herein certified and including this child.)

(a) Born alive and now living 5

(b) Born alive but now dead 1

(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 alive (Born alive or stillborn) at 11 AM m. on the date above stated

* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature Charles E. Zinn M.D. (Physician or midwife).

Address Miami Arizona

Given name added from supplemental report Month, day, year

Filed Sept 30, 1927 Chas E. Zinn Local Registrar.

Registrar

Filed, 19

County Registrar.

952-925-441