

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

State File No. 174
 Registered No. 102

1. PLACE OF BIRTH

County Gila State Ariz.
 District or Township _____ or Village _____
 City Slobe No. _____ St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Juan Gonzalez { 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 May 16, 1930
 Month Day Year

8. FATHER
 Full name Joe Gonzalez
 9. Residence (Usual place of abode) Slobe Ariz.
 If non-resident, give place and state.
 10. Color or race Mex.
 11. Age at last birthday 34 (Years)
 12. Birthplace (city or place) Yuma Ariz.
 (State or country)
 13. Occupation Butcher
 Nature of industry

14. MOTHER
 Full maiden name Josephina Hidalgo
 15. Residence (Usual place of abode) Slobe Ariz.
 If non-resident, give place and state.
 16. Color or race Mex.
 17. Age at last birthday 34 (Years)
 18. Birthplace (city or place) Los Vegas New Mex.
 (State or country)
 19. Occupation Housewife
 Nature of industry

20. Number of children of this mother. 5 (Taken as of time of birth of child herein certified and including this child.)
 (a) Born alive and now living 4
 (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 at 3:30 P.M. on the date above stated.
(Born alive or stillborn.)

* 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 T. E. Harper

 Physician _____ (Physician or Midwife)

Given name added from a supplemental report _____
 Address Slobe Arizona
 Filed June 1, 1930 J. E. Wightman Registrar
 _____ Registrar

172-516-186