ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 144

Registered No. 94

1. PLACE OF BIRTH

County: Gila State: Arizona

District or Township: or Village: P. O. Box 705 Miami -

City: Miami No. 79 Red Springs Canons St. Ward

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

2. Full name of child: Jesus Arturo Guzman (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: Mch. 26 - 1931 (Month, Day, Year)

FATHER	MOTHER
8. Full name: Jesus Guzman	14. Full maiden name: Paula Divanes
9. Residence (Usual place of abode): Miami	15. Residence (Usual place of abode): Miami
If non-resident, give place and state: Arizona	If non-resident, give place and state: Arizona
10. Color or race: Mex.	16. Color or race: Mex.
11. Age at last birthday: 42 (Years)	17. Age at last birthday: 22 (Years)
12. Birthplace (city or place): Jalisco	18. Birthplace (city or place): Jalisco
(State or country): Mex.	(State or country): Mex.
13. Occupation / Nature of industry: Miner	19. Occupation / Nature of industry: Housewife

20. Number of children of this mother (Taken as of time of birth of child herein certified and including this child.): 3

(a) Born alive and now living: 2

(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 3 A. m. on the date above stated.

Signature: Cyril M. Crow M.D. (Physician or midwife)

Address: Miami, Arizona.

* 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.

Given name added from a supplemental report 175-326-742 (Month, day, year)

Registrar

Filed Apr 6, 19 31 C. E. [illegible] Registrar