ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 649
Registered No. 82

1. PLACE OF BIRTH

County Gila State ARIZONA

District or Township ..... or Village .....

City MIAMI No. 1111 Sullivan St., ... Ward
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Salvador Gonzales — 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 Mar 29 1931 (Month Day Year)

8. FATHER
Full name Francisco 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 33 (Years)

12. Birthplace (city or place) .....
(State or country) Mexico

13. Occupation Miner
Nature of Industry Copper

14. MOTHER
Full maiden name Josefina Herrera

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) .....
(State or country) Mexico

19. Occupation
Nature of Industry Housewife

20. Number of children of this mother 9 (Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living 6
(b) Born alive but now dead 3
(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 alive (Born alive ~~or stillborn~~) at 8 15 p 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 F. P. Miller
272-329-181
F. P. MILLER, M.D.
(Physician or midwife.)

Given name added from a supplemental report ..... Month, day, year
Address MIAMI, ARIZONA

..... Registrar.

Filed Apr 2, 1931 C. E. [illegible] Registrar.