ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 108

Registered No. 109

1. PLACE OF BIRTH

County: Gila State: Arizona

District or Township: or Village: P. O. Box 504 - Claypool, Ariz.

City: Miami No.: Claypool St.: Ward:

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

2. Full name of child: Gilberto Perez { 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: Apr. 8 - 1931. (Month, Day, Year)

8. FATHER	14. MOTHER
Full name: Jose Perez	Full maiden name: Adelena Dominguez
9. Residence (Usual place of abode): Asuza, Calif.	15. Residence (Usual place of abode): Miami,
If non-resident, give place and state:	If non-resident, give place and state: Arizona.
10. Color or race: Mex.	16. Color or race: Mex.
11. Age at last birthday: 24 (Years)	17. Age at last birthday: 22 (Years)
12. Birthplace (city or place): Chihuahua	18. Birthplace (city or place): Chihuahua
(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.): (a) Born alive and now living: 1 (b) Born alive but now dead: 0 (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 3:17 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: Cyril M. Crow M.D. (Physician or midwife)

Address: Miami, Arizona.

Given name added from a supplemental report: Month, day, year

Registrar

Filed: Apr 15, 1931 C. E. [illegible] Registrar

779-108-109

N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD