MARGIN RESERVED FOR BINDING

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD

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.

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 112

Registered No. 129

1. PLACE OF BIRTH

County Gila State Arizona

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

City Globe No. ..... St. ..... Ward

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

2. Full name of child Celia Ruiz (If child is not yet named, make supplemental report, as directed)

3. Sex of Child Female | 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 July 13, 1931 (Month Day Year)

8. FATHER

Full name Joe Ruiz

9. Residence (Usual place of abode) Globe, Arizona

If non-resident, give place and state.

10. Color or race Mexican | 11. Age at last birthday 38 (Years)

12. Birthplace (city or place) Globe, Arizona (State or country)

13. Occupation Nature of industry Laborer

14. MOTHER

Full maiden name Anna Trujilla

15. Residence (Usual place of abode) Globe, Arizona

If non-resident, give place and state.

16. Color or race Mexican | 17. Age at last birthday 32 (Years)

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

19. Occupation Nature of industry Housewife

20. Number of children of this mother Eight (Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living Seven
(b) Born alive but now dead One
(c) Stillborn none

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 4:20 A.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 T. C. Harper

Physician (Physician or midwife).

Given name added from a supplemental report 397-713-131 (Month, day, year)

Address Globe, Arizona

Registrar

Filed 8/7, 1931 L. E. Wightman Jr. Registrar