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. 91

Registered No.

1. PLACE OF BIRTH

County Cuba State

District or Township or Village

City Winkelman, Arizona No. St., Ward

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

2. Full name of child George Austin Buzan (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 Nov. 5th 1931 (Month Day Year)

8. FATHER

Full name Austin Buzan

9. Residence (Usual place of abode) Rauch, Pinal Co. Arizona

If non-resident, give place and state Winkelman, Ariz. P.O.

10. Color or race ½ White, ½ Mex.

11. Age at last birthday 37 (Years)

12. Birthplace (city or place) On Rauch, Pinal Co, Ariz.

(State or country) Mammoth, Ariz. P.O.

13. Occupation

Nature of industry Farmer

14. MOTHER

Full maiden name Mary Castro

15. Residence (Usual place of abode) On Rauch, Pinal Co.

If non-resident, give place and state Ariz.

16. Color or race Mexican

17. Age at last birthday 27 (Years)

18. Birthplace (city or state) Florence, Arizona

(State or country)

19. Occupation

Nature of industry Housewife

20. Number of children of this mother 5 (Taken as of time of birth of child herein certified and including this child). 2

(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 did not attended the birth of this child, who was born alive at 11 55 a. 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 Mrs. Frank Buzan - Midwife

by P. M. Butler, M.D.

Called in later - (Physician or midwife).

Given name added from a supplemental report

Month, day, year

Address Winkelman, Arizona

Filed Nov 12, 1931 P. L. Hutton

Registrar. Registrar.

725-1105-436