ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 120
Registered No. 355

1. PLACE OF BIRTH

County Gila State ARIZONA

District or Township ____ or Village ____

City MIAMI No. 1142 Live Oak St. Ward
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Romana Sanchez (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 Nov 18 1931 (Month Day Year)

FATHER

8. Full name Juan Sanchez

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 32 (Years)

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

13. Occupation Miner
Nature of industry Copper

MOTHER

14. Full maiden name Maria Galvan

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 23 (Years)

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

19. Occupation Housewife
Nature of industry

20. Number of children of this mother 2
(Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living 2
(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 alive (Born alive or stillborn) at 10 31 A m. on the date above stated.

Signature F. F. Miller
F. F. MILLER, 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 929-118-475 (Month, day, year)

Filed Dec 2, 1931 Charles E. Orwin
Registrar

Registrar

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