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ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. _____

Registered No. 29

1. PLACE OF BIRTH

County Gila State Arizona

District or Township Globe or Village Globe

City Globe No. 165 Martin Hill St., Ward

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

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

3. Sex of Child F — To be answered ONLY in event of plural births.

4. Twin, triplet or other X

5. No., in order of birth X

6. Legitimate? yes

7. Date of birth 3 (Month) 29 (Day) 33 (Year)

8. FATHER

Full name Jesus Ruiz

9. Residence (Usual place of abode) 165 Martin Hill Globe Ariz

If non-resident, give place and state.

10. Color or race Mexican

11. Age at last birthday 33 (Years)

12. Birthplace (city or place) Nogales (State or country) Sonora Mex

13. Occupation Miner

Nature of industry

14. MOTHER

Full maiden name Mercedes Madrid

15. Residence (Usual place of abode) 165 Martin Hill Globe

If non-resident, give place and state.

16. Color or race Mexican

17. Age at last birthday 27 (Years)

18. Birthplace (city or place) Magdalena (State or country) Sonora Mex

19. Occupation Housewife

Nature of industry

20. Number of children of this mother 7 (Taken as of time of birth of child herein certified and including this child.)

(a) Born alive and now living 7

(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 or stillborn) at 5A 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 Clarence Gunter M.D. (Physician or Midwife).

Address Globe, Ariz

Given name added from a supplemental report 799-329-44 (Month, day, year)

Registrar

Filed 4/7, 1933 L. E. Wightman M.D. Registrar

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