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ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 91-1a

Registered No.

1. PLACE OF BIRTH

County Gila State Arizona

Township or Village

City Miami No. 1158 Sullivan St St. Ward

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

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

3. Sex Male | If plural births: 4. Twin, triplet, or other; 5. Number, in order of birth | 6. Premature No. Full term Yes | 7. Legitimate? Yes | 8. Date of birth March 30, 1933 (Month, day, year)

FATHER

9. Full name Ignacio Valedez

10. Residence (usual place of abode) (If nonresident, give place and State) Miami Arizona

11. Color or race Mex | 12. Age at last birthday 27 (Years)

13. Birthplace (city or place) Zacatecas Mex (State or country) Mexico

OCCUPATION

14. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Tailor

15. Industry or business in which work was done, as silk mill, sawmill, bank, etc. Tailor Shop

16. Date (month and year) last engaged in this work March 31, 1933

17. Total time (years) spent in this work 10 yrs

MOTHER

18. Full maiden name Erlinda Ruiz

19. Residence (usual place of abode) (If nonresident, give place and State) Miami Arizona

20. Color or race Mex | 21. Age at last birthday 26 (Years)

22. Birthplace (city or place) Durango Mex (State or country) Mexico

OCCUPATION

23. Trade, profession, or particular kind of work done, as housekeeper, typist, nurse, clerk, etc. Housewife

24. Industry or business in which work was done, as own home, lawyer's office, silk mill, etc.

25. Date (month and year) last engaged in this work, 19

26. Total time (years) spent in this work

27. Number of children of this mother (At time of this birth and including this child) (a) Born alive and now living 2 (b) Born alive but now dead 1 (c) Stillborn None

28. If stillborn, period of gestation months or weeks

29. Cause of stillbirth — Before labor — During labor

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 5 P.m. on the date above stated

When there was no attending physician or midwife, then the father, householder, etc., should make this return.

Given name added from a supplemental report 459-330-599 (Date of)

Registrar.

(Signed) Cyril M. Cron, M.D.

or Midwife

Address

Filed 6/1, 1933 C. T. Byfield Registrar.