2586

PLACE OF BIRTH

County of Gila

District of Arizona

Town of Miami

or

City of _____ (No._____ St._____ Ward)

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS 140 State Index No. 911

ORIGINAL CERTIFICATE OF BIRTH

Co. Register No. Hotel 64

Local Registrar's No._____

FULL NAME OF CHILD Benjamin Ramirez

If child is not named, make Supplemental Report on blank obtainable from local registrar.

Born Alive: YES ~~NO~~

Sex of Child	~~Twin~~, ~~Triplet~~ or other	and	Number in order of birth	Legitimate?	Date of Birth (Month) (Day) (Yr.)
Male			3rd	yes	June 20 1916

FATHER		MOTHER	
Full Name	Jose Ramirez	Full Maiden Name	Berta Trevino
Residence	Miami, Arizona	Residence	Miami, Arizona.
Color or Race	Mexican	Color or Race	Mexican
Age at last Birthday (Years)	21	Age at last Birthday (Years)	23
Birthplace	Jalisco, Mexico	Birthplace	Samita, Mexico
Occupation	Miner	Occupation	Housewife

Number of child of this mother 3 | Number of Children, of this mother, now living 2 | Were precautions taken against Ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child; and that it occurred on June 20, 1916, at 5:30 AM.

*When there is no attending physician or midwife, then the householder should make this return.

(Signature) Cyril M. Crow M.D.
(Attending physician, midwife, householder.*)

Address Box 29 Miami, Arizona

Given or Christian name added from a supplemental report_____191__.

Filed June 30 1916.

John H Lacey
LOCAL REGISTRAR.

299-620-236

Filed July 5 1916.

A True Copy

COUNTY REGISTRAR.

COUNTY REGISTRAR.