CERTIFICATE AMENDED SEE NOTATION

Child's Name Amended As per min Baptismal certificate and Affidavit 7-9-76

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

County of Gila

District of

Town of Miami
or
City of

State Index No. 49

Co. Register No. 178

Local Registrar's No.

(No. Mexican Canyon St; Ward)

FULL NAME OF CHILD ~~Juan~~ JOSE JUAN Teran

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				yes	March 15 1920

FATHER		MOTHER	
Full Name	Antonio Teran	Full Maiden Name	Rita Morales
Residence	Miami	Residence	Miami
Color or Race	Mexican	Color or Race	Mexican
Age at last Birthday	28 (Years)	Age at last Birthday	24 (Years)
Birthplace	Mexico	Birthplace	Mexico
Occupation	Miner	Occupation	Housewife

Number of child of this mother 2 | 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 March 15 1920, at 10:50 P. M.

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

(Signature) J. F. Miller M.D.
(Attending physician, midwife, householder.*)

Address Miami, Ariz.

Given or Christian name added from a supplemental report 191

Filed 3/20/1920 T. H. Slaughter
LOCAL REGISTRAR.

135-315-940
COUNTY REGISTRAR.

Filed 4/5 1920 A True Copy B. G. Day
COUNTY REGISTRAR.