2243

PLACE OF BIRTH

County of Gila

District of

Town of Miami
or
City of

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 191

Co. Registrar's No. 657

Local Registrar's No.

(No. St; Ward)

FULL NAME OF CHILD Jose Saliz

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			2	yes	Oct.	31	1920

	FATHER	MOTHER
Full Name	Antonio Saliz	Francisca Acuna
Residence	Miami, Arizona	Miami, Arizona
Color or Race	Mex	Mex
Age at last Birthday	26 Years	23 Years
Birthplace	Mexico	Nogales, Sonora, Mex.
Occupation	Miner	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 Oct. 31, 1920 at 7:50 P.M.

*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 Miami, Arizona.

Given or Christian name added from a supplemental report ..... 191..

Filed 11/2/ 1920 T H Slaughter
LOCAL REGISTRAR.

179-1031-611
COUNTY REGISTRAR.

Filed 11/27 1920 A True Copy B. G. Sias
COUNTY REGISTRAR.

the number of each, in order of birth, stated. This certificate must be filed by the attending Physician or midwife with each local Registrar within 5 days after birth.