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. 128

Co. Registrar No. 415

Local Registrar's No.

(No. 1232 Loomis St. Ward)

FULL NAME OF CHILD Raul Rodriguez

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

Born Alive YES

Sex of Child	Twin, Triplet or other	and	Number in order of birth	Legitimate?	Date of Birth
male				yes	Aug. 6. 1921 (Month) (Day) (Yr.)

FATHER		MOTHER	
Full Name	Cruz Rodriguez	Full Maiden Name	Anna Baron
Residence	Miami, Ariz	Residence	Miami, Ariz
Color or Race	Mexican	Color or Race	Mexico
Age at last Birthday (Years)	27	Age at last Birthday (Years)	25
Birthplace	Mexico	Birthplace	Mexico
Occupation	Miner	Occupation	Housewife

Number of Child of this mother	Number of children of this mother now living	Were precautions taken against Ophthalmia neonatorum?
1	1	yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of the above child, and that it occurred on Aug. 6 1921, at 1:55 P. M.

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

(Signature) W. F. Miller

(Attending physician, ~~midwife, householder.~~*)

Address Miami, Ariz

Given or Christian name added from a supplemental report 192 Filed Aug 20 1921 B. M. Hardy M.D.

LOCAL REGISTRAR.

999-806-125

COUNTY REGISTRAR.

Filed SEP 5 192 A True Copy B. G. Fox

COUNTY REGISTRAR.