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ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 94

Co. Registrar's No. 134

Local Registrar's No.

PLACE OF BIRTH

County of Gila

District of

Town of Miami

or

City of (No. St; Ward)

FULL NAME OF CHILD Garrardo Gutierrez

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

Born Alive YES ~~NO~~

Sex of Child Male | ~~Twin, Triplet or other~~ and Number in order of birth 2 | Legitimate? yes | Date of Birth April 6 1922 (Month Day Yr.)

FATHER		MOTHER	
Full Name	Domingo Gutierrez	Full Maiden Name	Filomana Saurez
Residence	Miami, Arizona	Residence	Miami, Arizona
Color or Race	Spainard	Color or Race	Spainard
Age at last Birthday	29 Years	Age at last Birthday	32 Years
Birthplace	Santander, Spain	Birthplace	Austurias, Spain
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 April 6, 1922 at 9 A.M.

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

Signature C. M. Crow M.D.
Attending physician, midwife, householder.*

Given or Christian name added from a supplemental report 191

Address Miami, Ariz.

Filed Apr 10 1922 B. M. Hardy LOCAL REGISTRAR.

779-406-629
COUNTY REGISTRAR.

A True Copy

Filed 5/6 1922 B. G. Fox COUNTY REGISTRAR.

N. B.—In case of more than one child at birth, a SEPARATE RETURN must be made for each, and 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.