

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD  
N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each, in order of birth stated.

PLACE OF BIRTH  
 1. 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. 151  
 County Registrar No. 447  
 Local Registrar No. \_\_\_\_\_

No. E-58 Davis Canyon St. \_\_\_\_\_ Ward \_\_\_\_\_  
 (If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Benecosta Guerra (If child is not yet named, make supplemental report, as directed.)

3. Sex of Child female To be answered ONLY in event of plural births. 4. Twin, triplet or other. \_\_\_\_\_ 5. No., in order of birth. \_\_\_\_\_ 6. Legitimate? yes 7. Date of birth July 8, 1923  
 Month Day Year

8. FATHER Full name Vicente Guerra 14. MOTHER Full maiden name Francisca Valencia

9. Residence (Usual place of abode) Miami, Arizona 15. Residence (Usual place of abode) Miami, Arizona  
 If nonresident, give place and state If nonresident, give place and state

10. Color or race Mexican 11. Age at last birthday 40 (Years) 16. Color or race Mexican 17. Age at last birthday 38 (Years)

12. Birthplace (city or place) New Mexico 18. Birthplace (city or place) Marenci, Arizona  
 (State or country) (State or country)

13. Occupation "Puncher", copper smelter 19. Occupation Housewife  
 Nature of industry Nature of industry

20. Number of children of this mother (a) Born alive and now living 5 (b) Born alive but now dead 1 (c) Stillborn 0 21. Were precautions taken against ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*  
 I hereby certify that I attended the birth of this child, who was alive at 1:30 a. m. on the date above stated.  
 (Born alive or stillborn.)

\*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.  
 Signature J. J. Mueller (Physician or midwife)  
 Address Miami, Arizona

Given name added from a supplemental report \_\_\_\_\_ Month, day, year. Filed July 31, 1923 C. E. Davis Local Registrar.  
 Filed Aug 3, 1923 B. J. Fox County Registrar.  
 Registrar.

771-704-1051