[redacted]

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.

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 129

County Registrar No. 286

Local Registrar No. .....

PLACE OF BIRTH

1. County of Gila

District of .....

Town of Globe

or

City of ..... No. ..... St. ..... Ward

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Jesus Ruiz } If child is not yet named, make supplemental report, as directed.

3. Sex of Child: male

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 April 9, 1924 (Month day, year)

FATHER

8. Full name Ignacio Ruiz

9. Residence (Usual place of abode) Copper Hill, Ariz.

If nonresident, give place and state

10. Color or race Mexican

11. Age at last birthday 38 (Years)

12. Birthplace (city or place) Sonora, Mexico

(State or country)

13. Occupation

Nature of industry mine

MOTHER

14. Full maiden name Hilaria Apodoca

15. Residence (Usual place of abode) Copper Hill, Ariz.

If nonresident, give place and state

16. Color or race Mexican

17. Age at last birthday 24 (Years)

18. Birthplace (city or place) San Luis

(State or country) Arizona

19. Occupation

Nature of industry Housewife

20. Number of children of this mother (Taken as of time of birth of child herein certified and including this child.)

(a) Born alive and now living 3

(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 born alive (Born alive or stillborn.) at 10:40 p.m. on the date above stated.

*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 evidences of life after birth.

Signature T. C. Harper, M. D. (Physician or midwife)

Address Globe, Arizona

Given name added from a supplemental report ..... Month, day, year.

Filed 4-12, 1924 B. G. Fiat Local Registrar.

..... Registrar.

Filed 5-5, 1924 B. G. Fiat County Registrar.

199-409-811