

14-30

V

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

1. County of Gila

District of Ree

Town of _____

or _____

City of _____

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 120

County Registrar No. 519

Local Registrar No. _____

No. _____ St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Ralph Belvado 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 6-5-24 Month day year

8. FATHER Full name George Belvado

9. Residence (Usual place of abode) Ree Ariz If nonresident, give place and state

10. Color or race 4/4 Indian 11. Age at last birthday 29 (Years)

12. Birthplace (city or place) Sau Carlos Ariz (State or country)

13. Occupation Laborer for Indian Trader Nature of industry

14. MOTHER Full maiden name Minnie Hinton

15. Residence (Usual place of abode) Ree Ariz If nonresident, give place and state

16. Color or race 4/4 Indian 17. Age at last birthday 20 (Years)

18. Birthplace (city or place) Ree Ariz (State or country)

19. Occupation Housewife Nature of industry

20. Number of children of this mother (a) Born alive and now living 1 (b) Born alive but now dead 0 (c) Stillborn 0 21. Were precautions taken against ophthalmia neonatorum? No

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE* I hereby certify that X attended the birth of this child, who was born alive at 6 A.M. on the date above stated. (Born alive or stillborn.)

Signature C. L. Woods M.D. (Physician or midwife)

Address Ree Ariz

Month, day, year. Filed _____, 1924 Registrar. Filed 1925 24 AGJ Local Registrar. Jay County Registrar.

926-605-485

PLEASE PLAINLY WRITE UNFADING INK—THIS IS A PERMANENT RECORD. 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.

*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. Given name added from supplemental report