

1184

MARGIN RESERVED FOR INDEXING
WRITE PLAINLY WITH 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.

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

PLACE OF BIRTH

1. County of Gila
District of 19
Town of Mcname
or
City of _____ No. _____ (If birth occurred in a hospital or institution, give its NAME instead of street and number) St. _____ Ward _____

State Index No. 167
County Registrar No. 693
Local Registrar No. _____

2. Full name of child Lucia Gutierrez (If child is not yet named, make supplemental report, as directed.)
3. Sex of Child girl 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 August 24 1924 Month August day 24 year 1924

8. FATHER		14. MOTHER	
Full name <u>Estanislo Gutierrez</u>		Full maiden name <u>Maria Gonzales</u>	
9. Residence (Usual place of abode) <u>Gerover</u> If nonresident, give place and state		15. Residence (Usual place of abode) <u>Gerover</u> If nonresident, give place and state	
10. Color or race <u>Mexican</u>	11. Age at last birthday <u>33</u> (Years)	16. Color or race <u>Mexican</u>	17. Age at last birthday <u>31</u> (Years)
12. Birthplace (city or place) <u>Tepatitlan Jalisco</u> (State or country)		18. Birthplace (city or place) <u>Tepatitlan Jalisco</u> (State or country)	
13. Occupation <u>Miner</u> Nature of industry		19. Occupation _____ Nature of industry	

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 4 (b) Born alive but now dead 2 (c) Stillborn _____

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 at 7 P 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 evidences of life after birth.

Signature Juana de Martinez Address Clay Pool Arizona
Given name added from supplemental report August 24, 1924 Filed 10-6-24
Month, day, year. Filed 10-6-24 County Registrar. B. G. Joy

372-824-472