MARGIN RES[illegible] FOR BINDING

WRITE PLAINLY WITH UNFADING [illegible] THIS IS A PERMANENT [illegible]

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 [illegible] made for each, and the

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 165
County Registrar No. 52
Local Registrar No. 8

PLACE OF BIRTH
1. County of Gila
District of
Town of Miami
or
[illegible] of ..... No. ..... St. ..... Ward
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

Full name of child Luciano Guzeman (If child is not yet named, make supplemental report, as directed.)

Sex of Child: Male
To be answered ONLY in event of plural births.
4. ~~Twin, triplet or other~~
5. No., in order of birth 1
6. Legitimate? yes
7. Date of birth Jan. 7 - 1925. (Month Day Year)

FATHER
Full name Crecencio Guzeman
9. Residence (Usual place of abode) Miami
If non-resident, give place and state. Ariz.
10. Color or race Mex.
11. Age at last birthday 33 (Years)
12. Birthplace (city or place) Mexico City
(State or country) Mex.
13. Occupation
Nature of industry Miner

MOTHER
14. Full maiden name Guadaloupe Huerta
15 Residence (Usual place of abode) Miami
If non-resident, give place and state. Arizona
16 Color or race Mex.
17. Age at last birthday 20 (Years)
18. Birthplace (city or place) Mexico City
(State or country) Mex
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 1
(b) Born alive but now dead
(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 (Born alive ~~or stillborn~~) at 11 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 evidence of life after birth.

Signature Cyril M. Crow M.D. (Physician ~~or midwife~~).
Address Miami, Ariz.

Given name added from a supplemental report ..... Month, day, year
Filed Jan 8, 1925 Nelson D Brayton Local Registrar.
Registrar
Filed 2/9, 1925 L. E. Wightman County Registrar.

375-107-781