ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 137

Registered No. 1459

1. PLACE OF BIRTH

County Gila State Arizona

District or Township Lower Miami or Village

City Miami No. St. Ward

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

2. Full name of child Apolinar Tiopelo Garcia { 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 Jan 8 1926 (Month Day Year)

8. FATHER	14. MOTHER
Full name Cleofas Garcia	Full maiden name Juana Gonzales
9. Residence (Usual place of abode) Miami Arizona If non-resident, give place and state.	15 Residence (Usual place of abode) Miami Arizona If non-resident, give place and state.
10. Color or race Mexican 11. Age at last birthday 24 (Years)	16 Color or race Mexican 17. Age at last birthday 19 (Years)
12. Birthplace (city or place) Mexico (State or country)	18. Birthplace (city or place) Mexico (State or country)
13. Occupation Mucker Nature of industry Copper mine	19. Occupation Housewife Nature of industry

20. Number of children of this mother 5 (Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living 2
(b) Born alive but now dead 1
(c) Stillborn 2

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 (Born alive ~~or stillborn~~.) at 2:15 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 J. F. Miller MD (Physician ~~or midwife~~).

Address Miami Ariz.

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

Registrar

Filed Jan 12, 1926 C. E. Irwin Registrar

171-106-172

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.