

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 172
494
Registered No.

1. PLACE OF BIRTH

County Gila State Arizona
District or Township Midland City or Village Little Acres
City Miami No. Ruiz Ranch St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Eugenio Gallegos { 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. _____ 6. Legitimate? Yes
5. No., in order of birth _____ 7. Date of birth Nov 15 1928
Month Day Year

8. FATHER
Full name Juan Gallegos

14. MOTHER
Full maiden name Juvenia Menchaca

9. Residence (Usual place of abode) Ruiz Ranch Miami, Ariz
If non-resident, give place and state.

15. Residence (Usual place of abode) Ruiz Ranch Miami, Ariz
If non-resident, give place and state.

10. Color or race Mexican
11. Age at last birthday 44 (Years)

16. Color or race Mexican
17. Age at last birthday 38 (Years)

12. Birthplace (city or place) Mexico
(State or country)

18. Birthplace (city or place) Mexico
(State or country)

13. Occupation Ranch laborer
Nature of industry

19. Occupation Housewife
Nature of industry

20. Number of children of this mother 7
(Taken as of time of birth of child herein certified and including this child).
(a) Born alive and now living 6
(b) Born alive but now dead 2
(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 alive at 12:10 P m. on the date above stated.
(Born alive or stillborn)

Signature J. J. Miller
(Physician or midwife)

Given name added from a supplemental report _____ Address Miami, Arizona

Month, day, year Dec 3 1928
Registrar H. E. Form

572-1115-141