ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 140
Registered No. 30

1. PLACE OF BIRTH

County: Gila — State: ARIZONA
Township: — or Village:
City: Hayden — No. — St. — Ward
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

. Full name of child: Janita Gonzales (If child is not yet named, make supplemental report, as directed)

Sex	If plural births		6. Premature / Full term	7. Is mother married?	8. Date of birth
Female		Twin, triplets, or other / Number, in order of birth		Yes	Apr. 11, 19 29 (Month, day, year)

FATHER

. Full name: Eugenio Gonzales
Residence (usual place of abode) (If non-resident, give place and State): Hayden,
Color or race: White — 12. Age at last birthday: 30 (Years)
Birthplace (city or place): Safford,
(State or Country): Arizona

MOTHER

18. Full maiden name: Angelita Garcia
19. Residence (usual place of abode) (If non-resident, give place and State): Hayden
20. Color or race: White — 21. Age at last birthday: 23 (Years)
22. Birthplace (city or place): Gila Bend,
(State or Country): Arizona

OCCUPATION

14. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc.: Laborer
15. Industry or business in which work was done, as silk mill, sawmill, bank, etc.: Copper Smelter
16. Date (mo. and yr.) last engaged in this work: , 19
17. Total time (years) spent in this work:

24. Particular kind of work done, as housekeeper, typist, nurse, clerk, etc.: Housewife
25. Industry or business in which work was done, as own home, lawyer's office, silk mill, etc.:
Date (mo. and yr.) last engaged in this work: , 19
26. Total time (years) spent in this work:

27. Number of children of this mother (At time of this birth and including this child) (a) Born alive and now living: 4 (b) Born alive but now dead: (c) Stillborn:

28. If stillborn, period of gestation: months or weeks
29. Cause of stillbirth: Before labor: During labor:

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was Born alive (Born alive or stillborn) at 8:00 A. m. on the date above stated

When there was no attending physician or midwife, then the father, householder, etc., should make this return.

(Signed) , M. D.
or Eufemia Romero, Midwife
Address Hayden, Ariz.
Filed Apr. 15, 19 29 W. B. Nash, Registrar

Given name added from a supplemental report (Date of)
Registrar.

10M 9-1-38 Sulphite

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