

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

State File No. 310
Registered No. 310

PLACE OF BIRTH

County Maricopa State Arizona
District or Township _____ or Village _____
City Miami No. 1019 Alderman St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

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

Sex of Child <u>male</u>	To be answered ONLY in event of plural births.	4. Twin, triplet or other _____	6. Legitimate? <u>yes</u>	7. Date of birth <u>July 4 1929</u> Month Day Year
		5. No., in order of birth _____		

FATHER
Full name Pedro Gomez
Residence (Usual place of abode) Miami, Arizona
If non-resident, give place and state.

MOTHER
Full maiden name Paula Gomez
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 39 (Years)

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

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

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

13. Occupation Miner
Nature of industry Copper

19. Occupation Housewife
Nature of industry _____

20. Number of children of this mother 4
(Taken as of time of birth of child herein certified and including this child.)
(a) Born alive and now living 3
(b) Born alive but now dead 1
(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 3:30 a. 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 evidence of life after birth.

Signature J. J. Miller
M.D.
(Physician or midwife)

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

Address Miami, Arizona
Filed July 12 1929 R. E. Jones
Registrar

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