ARIZONA STATE BOARD OF HEALTH 422

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. ~~423~~

County Registrar No.

Local Registrar No. 85

PLACE OF BIRTH

1. County of Maricopa

District of Indian School

Town of

or

City of Phoenix No. Indian School Hospital St., Ward

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

2. Full name of child Richard Delbert Upshaw (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 March 12 1930 (Month Day Year)

FATHER

8. Full name Harry Upshaw

9. Residence (Usual place of abode) Stewart Mountain Dam

If non-resident, give place and state. Mesa Arizona

10. Color or race Navajo Indian 4/4

11. Age at last birthday 22 (Years)

12. Birthplace (city or place) Gallup

(State or country) New Mexico

13. Occupation Laborer

Nature of Industry

MOTHER

14. Full maiden name Eva Dickens

15. Residence (Usual place of abode) Stewart Mountain Dam

If non-resident, give place and state. Mesa Arizona

16. Color or race Mohave-Apache Indian 4/4

17. Age at last birthday 17 (Years)

18. Birthplace (city or place) Ft. McDowell

(State or country) Arizona

19. Occupation Housewife

Nature of Industry

). 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 0

(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 Born Alive (Born alive or stillborn.) at 6:10 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 [illegible] M.D. (Physician or midwife).

Address Indian School Phoenix Arizona

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

Filed 3/28, 1930 A J Wheeler Local Registrar.

Registrar

Filed, 19 County Registrar.

946-312-542