ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 00127

Registered No. 34

1. PLACE OF BIRTH

County: Gila State: Ariz

District or Township: or Village:

City: Globe No.: Gila County Hosp. Ward

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

2. Full name of child: Robert A. Dorsey [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: Feb 20 1931 (Month Day Year)

8. FATHER

Full name: Amory Dorsey

9. Residence (Usual place of abode): Miami

If non-resident, give place and state.

10. Color or race: White | 11. Age at last birthday: 25 (Years)

12. Birthplace (city or place): New Mexico

(State or country)

13. Occupation / Nature of industry: Miner

14. MOTHER

Full maiden name: Alice Taylor

15. Residence (Usual place of abode): Miami

If non-resident, give place and state.

16. Color or race: White | 17. Age at last birthday: 21 (Years)

18. Birthplace (city or place): California

(State or country)

19. Occupation / Nature of industry: Housewife

20. Number of children of this mother: 3

(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 (Born alive or stillborn.) at 3 3/4 a. 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: R. D. Kennedy (Physician or Midwife)

Address: Globe

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

Registrar

Filed 3/4, 1931 R. E. Wightman M.D. Registrar

948-220-139