ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 98

Registered No. 104

1. PLACE OF BIRTH

County: Gila State: Arizona

District or Township: or Village: P.O. Box 252 - Miami, Ariz

City: Miami No. 832 Smith St. St. Ward

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

2. Full name of child: John Tony Kumparak (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: Apr. 1 - 1931 (Month Day Year)

8. FATHER

Full name: Matt Kumparak

9. Residence (Usual place of abode): Miami, Arizona

If non-resident, give place and state.

10. Color or race: Cauc.

11. Age at last birthday: 25 (Years)

12. Birthplace (city or place) (State or country): Jugo Slavia

13. Occupation: Miner

Nature of Industry:

14. MOTHER

Full maiden name: Eva Maria Kraljevic

15. Residence (Usual place of abode): Miami, Arizona

If non-resident, give place and state.

16. Color or race: Cauc.

17. Age at last birthday: 25 (Years)

18. Birthplace (city or place) (State or country): Youngstown Ohio

19. Occupation: Housewife

Nature of Industry:

20. Number of children of this mother (Taken as of time of birth of child herein certified and including this child.): 1

(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 11 A. m. on the date above stated.

Signature: Cyril M. Crow M.D. (Physician or midwife)

Address: Miami, Arizona

Filed: Apr 12, 1931

Registrar

* 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.

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

Registrar

122-101-533