ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

121

State File No.

Registered No. 238

1. PLACE OF BIRTH

County: Gila State: ARIZONA

District or Township: or Village:

City: MIAMI No. Miami Inspiration Hospital St. Ward

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

2. Full name of child: Marvin Stanley Dunagan (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: Aug 12 1931 (Month Day Year)

8. FATHER

Full name: Ila Douglas Dunagan

9. Residence (Usual place of abode): MIAMI, ARIZONA

If non-resident, give place and state.

10. Color or race: White

11. Age at last birthday: 29 (Years)

12. Birthplace (city or place):

(State or country): Arkansas

13. Occupation: Miner

Nature of Industry: Copper

14. MOTHER

Full maiden name: Esther Evelyn Callander

15. Residence (Usual place of abode): MIAMI, ARIZONA

If non-resident, give place and state.

16. Color or race: White

17. Age at last birthday: 28 (Years)

18. Birthplace (city or place): French Lake

(State or country): Minnesota

19. Occupation: Housewife

Nature of Industry:

20. Number of children of this mother: 1

(Taken as of time of birth of child hereto 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 alive (Born alive or stillborn.) at 5:25 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: F. F. Miller

F. F. MILLER, M. D.

(Physician or midwife).

Given name added from a supplemental report NHS 812539 (Month, day, year)

Address: MIAMI, ARIZONA

Registrar

Filed Sep 3, 1931 L. E. Davis Registrar

N. B.—In case of twins, triplets, etc., use separate return for each child. Write on margin of each order of birth stated.

IN RESERVED FOR BINDING

FADING INK—THIS IS A PERMANENT RECORD

SEPARATE RETURN must