DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

STANDARD CERTIFICATE OF BIRTH

State File No. 68a
Registered No.

1. PLACE OF BIRTH—
County Gila State Arizona
Township On reservation without medical care or Village San Carlos,
City No. No hospital. St. Ward
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Tex Clark (If child is not yet named, make supplemental report, as directed)

3. Sex M | If plural births: 4. Twin, triplet, or other 5. Number, in order of birth | 6. Premature Full term | 7. Legitimate? | 8. Date of birth Nov. 3, 1932 (Month, day, year), 19

FATHER

9. Full name Frank Clark
10. Residence (usual place of abode) (If nonresident, give place and State) San Carlos, Arizona
11. Color or race 4/4 Apache 12. Age at last birthday 27 (years)
13. Birthplace (city or place) (State or country) San Carlos, Arizona

OCCUPATION
14. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Night watchman (school.)
15. Industry or business in which work was done, as silk mill, sawmill, bank, etc.
16. Date (month and year) last engaged in this work, 19
17. Total time (years) spent in this work

MOTHER

18. Full maiden name Mary Norton
19. Residence (usual place of abode) (If nonresident, give place and State) San Carlos, Ariz.
20. Color or race 4/4 Apache 21. Age at last birthday 22 (years)
22. Birthplace (city or place) (State or country) San Carlos, Arizona

OCCUPATION
23. Trade, profession, or particular kind of work done, as housekeeper, typist, nurse, clerk, etc. Housewife.
24. Industry or business in which work was done, as own home, lawyer's office, silk mill, etc.
25. Date (month and year) last engaged in this work, 19
26. Total time (years) spent in this work

27. Number of children of this mother (At time of this birth and including this child) (a) Born alive and now living 1 (b) Born alive but now dead 0 (c) Stillborn 0

28. If stillborn, period of gestation months or weeks | 29. Cause of stillbirth Before labor During labor

report 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 5 a.m. m. on the date above stated.

When there was no attending physician or midwife, then the father, householder, etc., should make this return.

Given name added from a supplemental report 332-1103-455 (Date of)

(Signed) J. C. Hancock, M. D.
or , Midwife
Address San Carlos, Arizona
Filed Dec. 31, 1932 J. C. Hancock Registrar.

Registrar.

c11—7117

N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, in order of birth, stated, and the number