DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

STANDARD CERTIFICATE OF BIRTH

State File No. 99a
Registered No.

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

2. Full name of child: Ernest Dillon (If child is not yet named, ma supplemental report, as direct)

3. Sex: Male
If plural births: 4. Twin, triplet, or other: — 5. Number, in order of birth:
6. Premature: — Full term: X
7. Legitimate? Yes.
8. Date of birth: Nov. 22, 1932 (Month, day, year) 10.

FATHER	MOTHER
9. Full name: Fred Dillon	18. Full maiden name: Mary Dulpin
10. Residence (usual place of abode) (If nonresident, give place and State): San Carlos, Ariz.	19. Residence (usual place of abode) (If nonresident, give place and State): San Carlos, Ariz.
11. Color or race: 1/4 Apache — 12. Age at last birthday: 26 (years)	20. Color or race: 4/4 Apache — 21. Age at last birthday: ? (years)
13. Birthplace (city or place) (State or country): San Carlos, arizona	22. Birthplace (city or place) (State or country): SanCarlos, Arizona
OCCUPATION: 14. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc.: Day laborer.	OCCUPATION: 23. Trade, profession, or particular kind of work done, as housekeeper, typist, nurse, clerk, etc.: Housewife.
15. Industry or business in which work was done, as silk mill, sawmill, bank, etc.:	24. Industry or business in which work was done, as own home, lawyer's office, silk mill, etc.:
16. Date (month and year) last engaged in this work: ..., 19 — 17. Total time (years) spent in this work:	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: 4 (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

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. on the date above stated

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

(Signed) J. C. Hancock, M. D.
or ..., Midwife
Address: San Carlos, Arizona
Filed Jan. 31, 1933 J. C. Hancock, Registrar

Given name added from supplemental report 545-124-445 (Date of)

Registrar