DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

STANDARD CERTIFICATE OF BIRTH

State File No. 103

Registered No.

1. PLACE OF BIRTH—

County: Gila — State: Arizona

Township: On reservation — 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: Martha Meade (If child is not yet named, make supplemental report, as directed)

3. Sex: Female — 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. 27, 1932, 19 (Month, day, year)

FATHER	MOTHER
9. Full name: Zeno Meade	18. Full maiden name: Sarah Taylor Dia
10. Residence (usual place of abode) (If nonresident, give place and State): San Carlos, Arizona	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: 33 (years)	20. Color or race: 1/4 Apache — 21. Age at last birthday: 24 (years)
13. Birthplace (city or place) (State or country): San Carlos, Arizona	22. 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.: 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~~ report the birth of this child, who was born alive (Born alive or stillborn) at 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.

Given name added from a supplemental report 445-1127-241 (Date of)

(Signed) J. C. Hancock, M. D.

or ..., Midwife

Address San Carlos, Arizona

Filed Nov. 30, 1932 — J. C. Hancock, Registrar.

Registrar.

c11—7117

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD

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