DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

STANDARD CERTIFICATE OF BIRTH

State File No. 7011

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: Juliette Pilger (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: Jan. 2. 1933, 19 (Month, day, year)

FATHER	MOTHER
9. Full name: Edward Pilger	18. Full maiden name: Julia Moline
10. Residence (usual place of abode) (If nonresident, give place and State): SanCarlos, Arizona	19. Residence (usual place of abode) (If nonresident, give place and State): San Carlos, Arizon
11. Color or race: 4/4 Mohave — 12. Age at last birthday: ? (years)	20. Color or race: 4/4 Apache — 21. Age at last birthday: 15 (years)
13. Birthplace (city or place) (State or country): SanCarlos, 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: 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 — 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. Yancock, M. D.

or — , Midwife

Address: SanCarlos, Arizona

Given name added from a supplemental report — (Date of)

179-102-1933

Filed Jan. 31, 1933 — J. C. Yancock M.D. Registrar.

c11—7117 Registrar.

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.

WAYNE F. ACKLEY, CHIEF, BUREAU OF THE CENSUS

IMPORTANT—Send the number of each child at a birth, in order of birth, stated.