MARGIN TE ... ING
RITE PLAINLY WITH UNFADING INK ... RMANE 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.

DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

STANDARD CERTIFICATE OF BIRTH

State File No. 7870
Registered No.

1. PLACE OF BIRTH—
County Gila State Arizona
Township On reservation or Village San Carlos
City No. No hospital St. Wa
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Still-born baby boy....not named. (If child is not yet named, ma supplemental report, as direc

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 Feb. 12, 1933 (Month, day, year), 19

FATHER	MOTHER
9. Full name Manuel Whitehead.	18. Full maiden name Agnes Reppert
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) SanCarlos, Arizona
11. Color or race 4/4 Apache	20. Color or race 4/4 Apache
12. Age at last birthday 31 (years)	21. Age at last birthday 20 (ye
13. Birthplace (city or place) (State or country) SanCarlos, 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	25. Date (month and year) last engaged in this work, 19
17. Total time (years) spent in this work	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 2 (b) Born alive but now dead 0 (c) Stillborn 1

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 report attended the birth of this child, who was born alive (Born alive or stillborn) at 9 pm. m. on the date above state

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

(Signed) J.C. Hancock, M.
or Midw
Address San Carlos, Arizona
Filed Feb. 28, 1933 J.C. Hancock MD Registrar

Given name added from a supplemental report (Date of)
064-212-193
Registrar.

c11—7117