MARGIN RESERVED FOR BINDING

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.

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 36

Local Registrar's No. 52

1. PLACE OF BIRTH

County Cochise State Arizona

District or Township or Village

City Benson No. Apache Emergency Hospital

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Alvin Neils Miller If child is not yet named, make supplemental report, as directed.

3. Sex of Child Male | To be answered ONLY in event of plural births. | 4. Twin, triplet or other | 5. No., in order of birth | 6. Legitimate? yes | 7. Date of birth Sept. 18, 1933. Month Day Year

8. FATHER

Full name Lloyd L. Miller

9. Residence (Usual place of abode) St David, Ariz.

If non-resident, give place and state.

10. Color or race White | 11. Age at last birthday 38 (Years)

12. Birthplace (city or place) Mesa

(State or country) Ariz. U.S.A.

13. Occupation Farmer and Rural Mail Carrier

Nature of industry

14. MOTHER

Full maiden name Della Judd

15. Residence (Usual place of abode) St David, Ariz.

If non-resident, give place and state.

16. Color or race White | 17. Age at last birthday 33 (Years)

18. Birthplace (city or place) Chihuahua, Old Mexico

(State or country)

19. Occupation Housewife

Nature of industry General housework

20. Number of children of this mother 9

(Taken as of time of birth of child herein certified and including this child.)

(a) Born alive and now living 8

(b) Born alive but now dead 1

(c) Stillborn None

21. Were precautions taken against ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was born alive at 9:15 a.m. on the date above stated.

(Born alive or stillborn.)

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature Robert C. Kirkwood M.W.

Physician

(Physician or midwife).

Given name added from a supplemental report

Month, day, year

Address Benson, Arizona

Filed 9-23- 1933 Richard E. Yellow

Registrar

Registrar

149-918-414