DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

STANDARD CERTIFICATE OF BIRTH

State File No. 102

Registered No.

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

2. Full name of child: Randall, Marjorie
(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. 8th, 1933, 19 (Month, day, year)

FATHER

9. Full name: Randall, John
10. Residence (usual place of abode) (If nonresident, give place and State): San Carlos
11. Color or race: 4/4 Apache
12. Age at last birthday: 35 (years)
13. 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.: Laborer
15. Industry or business in which work was done, as silk mill, sawmill, bank, etc.:
16. Date (month and year) last engaged in this work: , 19
17. Total time (years) spent in this work:

MOTHER

18. Full maiden name: Astor, Zella
19. Residence (usual place of abode) (If nonresident, give place and State): San Carlos
20. Color or race: 4/4 Apache
21. Age at last birthday: 27 (years)
22. Birthplace (city or place) (State or country): San Carlos, Arizona

OCCUPATION
23. Trade, profession, or particular kind of work done, as housekeeper, typist, nurse, clerk, etc.: Housekeeper
24. Industry or business in which work was done, as own home, lawyer's office, silk mill, etc.:
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: 3 (b) Born alive but now dead: 1 (c) Stillborn:

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~~ Reported 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. Hancock, M. D.
or , Midwife
Address San Carlos, Arizona

Given name added from a supplemental report
(Date)

493-1164-919

Filed Dec. 31, 1933 J. C. Hancock
Registrar.

Registrar.

a11—7117

NOTE—PRINTED 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.