ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 135
Registered No. 367

1. PLACE OF BIRTH
County Graham State Arizona
Township Safford or Village
City Pima No. St. Ward
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Dan La Virgil Hudson (If child is not yet named, make supplemental report, as directed)

3. Sex Male | If plural births: 4. Twin, triplet or other 5. Number, in order of birth | 6. Premature Full term yes | 7. Legitimate? yes | 8. Date of birth Nov 3, 1938 (Month, day, year)

FATHER

9. Full name Louis Hudson
10. Residence (usual place of abode) (If nonresident, give place and State) Pima Ariz
11. Color or race White 12. Age at last birthday 36 (Years)
13. Birthplace (city or place) Hiwadey (State or country) Arkansas
OCCUPATION
14. Trade, profession or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Farmer
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 Ruth May Cooper
19. Residence (usual place of abode) (If nonresident, give place and State) Pima Ariz
20. Color or race White 21. Age at last birthday 23 (Years)
22. Birthplace (city or place) (State or country) Texas
OCCUPATION
23. Trade, profession, or particular kind of work done, as housekeeper, typist, nurse, clerk, etc. wife
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 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 the birth of this child, who was born alive (Born alive or stillborn) at N. A. on the date above stated

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

(Signed) O. H. Brandon, M. D. or, Midwife
Address Pima Arizona
Filed Dec 9, 1938 J. W. Whatley Registrar

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

Hy O. H. Lipp

H85 — 1102 — 9-39

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.