ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

1. PLACE OF BIRTH

State File No. 127

Registered No.

County Gila State Arizona.

Township or Village

City Miami No. Hill St., Lower Miami Ward

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

2. Full name of child Dorothy Jean Thames (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 | 7. Legitimate Yes | 8. Date of birth Dec. 28, 1933 (Month, day, year)

FATHER	MOTHER
9. Full name Gordon Joseph Thames	18. Full maiden name Mildred M. Cunningham
10. Residence (usual place of abode) Miami, Arizona. (If nonresident, give place and State)	19. Residence (usual place of abode) Miami, Arizona. (If nonresident, give place and State)
11. Color or race Cauc. 12. Age at last birthday 31 (Years)	20. Color or race Cauc. 21. Age at last birthday 28 (Years)
13. Birthplace (city or place) Dallas, (State or country) Texas.	22. Birthplace (city or place) Alamagordo, (State or country) New Mexico.
OCCUPATION: 14. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. Miner	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 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 12 m. on the date above stated

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

(Signed) Cyril M. Crow, M. D.

or Midwife

Address Miami, Arizona.

Given name added from a supplemental report (Date of)

Filed Jan. 1, 1934. C. M. Crow Registrar.

432-1226-431 Registrar.

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.