

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 146
 Registered No. 354

1. PLACE OF BIRTH

County Gila State Arizona
 District or Township _____ or Village _____
 City Miami No. _____ St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Norman C. Uptain
{ If child is not yet named, make supplemental report, as directed.

3. Sex of Child <u>Male</u>	To be answered ONLY in event of plural births.	4. Twin, triplet or other _____	5. No., in order of birth _____	6. Legitimate? <u>yes</u>	7. Date of birth <u>Nov. 6, 1925</u> Month Day Year
--------------------------------	--	------------------------------------	------------------------------------	------------------------------	--

8. **FATHER**
 Full name Parley Joseph Uptain
 9. Residence (Usual place of abode) Miami, Arizona
 If non-resident, give place and state.
 10. Color or race Cauc.
 11. Age at last birthday 23 (Years)
 12. Birthplace (city or place) Safford, Arizona
 (State or country)
 13. Occupation
 Nature of industry Mechanic

14. **MOTHER**
 Full maiden name Jay Nina Crum
 15. Residence (Usual place of abode) Miami, Arizona
 If non-resident, give place and state.
 16. Color or race Cauc.
 17. Age at last birthday 20 (Years)
 18. Birthplace (city or place) Miami, Arizona
 (State or country)
 19. Occupation
 Nature of industry Housewife

20. Number of children of this mother (Taken as of time of birth of child herein certified and including this child.)	(a) Born alive and now living <u>3</u>	21. Were precautions taken against ophthalmia neonatorum? <u>yes</u>
	(b) Born alive but now dead _____	
	(c) Stillborn _____	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was born at 9:45 P.m. on the date above stated
(Born alive or stillborn)

Signature Cyril M. Brown, M.D.

 Physician
(Physician or midwife)

Given name added from a supplemental report _____
 Address Miami, Arizona

Filed Nov 21, 1925

 Registrar

ALLIE 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 order of birth stated.

SHS - 1106-634