ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 175

Registered No.

1. PLACE OF BIRTH

County: Gila State: Arizona

District or Township: Rice or Village:

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: Neal Dillon (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: 6 / 20 / 28. (Month Day Year)

8. FATHER

Full name: Paul Dillon

9. Residence (Usual place of abode): Rice,

If non-resident, give place and state: Ariz.

10. Color or race: 4/4 Indian

11. Age at last birthday: 33 (Years)

12. Birthplace (city or place): San Carlos

(State or country): Ariz.

13. Occupation

Nature of industry: Govt. cow man

14. MOTHER

Full maiden name: Alice Goode

15. Residence (Usual place of abode): Rice,

If non-resident, give place and state: Ariz.

16. Color or race: 4/4 Indian

17. Age at last birthday: 23 (Years)

18. Birthplace (city or state): Rice,

(State or country): Ariz.

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: I

(b) Born alive but now dead: 0

(c) Stillborn: 0

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 (Born alive or stillborn) at 10 A. m. on the date above stated.

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

Signature: C H Sawyer MD (Physician or midwife).

Given name added from a supplemental report (Month, day, year)

Address: San Carlos, Ariz.

Registrar.

Filed, 19

C.H.Sawyer Registrar.

545-620-175

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.