

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 107A

Registered No. _____

1. PLACE OF BIRTH

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

2. Full name of child Riley Nash { 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. _____ 6. Legitimate? yes 7. Date of birth 10/1-29
Month Day Year

8. FATHER Full name Percy Nash 14. MOTHER Full maiden name Nancy Edwards

9. Residence (Usual place of abode) Globe, Ariz. 15. Residence (Usual place of abode) Globe, Ariz.
If non-resident, give place and state. If non-resident, give place and state.

10. Color or race 4/4 apache ind. 11. Age at last birthday 29 (Years) 16. Color or race 4/4 apache ind. 17. Age at last birthday 23 (Years)

12. Birthplace (city or place) San Carlos 18. Birthplace (city or place) San Carlos
(State or country) Ariz. (State or country) Ariz.

13. Occupation Miner 19. Occupation Housewife
Nature of industry Nature of Industry

20. Number of children of this mother 3 (Taken as of time of birth of child herein certified and including this child.) (a) Born alive and now living 3 (b) Born alive but now dead 0 (c) Stillborn 0 21. Were precautions taken against ophthalmia neonatorum? no

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was alive at 2 P. m. on the date above stated.
(Born alive or stillborn.)

* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.
Signature [Signature] (Physician or Midwife)

Given name added from a supplemental report _____ Address San Carlos Agency, Rice, Ariz.

Month, day, year

Filed _____, 19____

Registrar

Registrar

958-1001-552