

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

State File No. 124a
34
Registered No. _____

1. PLACE OF BIRTH

County Gila State Arizona
District or Township San Carlos Ind. Res. 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 Geneiva Cook

{ If child is not yet named, make supplemental report, as directed.

3. Sex of Child <u>f</u>	To be answered ONLY in event of plural births.	4. Twin, triplet or other <u>1</u>	6. Legitimate? <u>yes</u>	7. Date of birth <u>II-6-1929</u>
		5. No., in order of birth <u>3</u>		Month Day Year

8. FATHER
Full name James Cook

14. MOTHER
Full maiden name Clara Cassa

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

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

10. Color or race
1/4 apache
indian

11. Age at last birthday 31 (Years)

16. Color or race
4/4 apache
indian

17. Age at last birthday 24 (Years)

12. Birthplace (city or place) Rice
(State or country) Arizona

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

13. Occupation laborer
Nature of industry

19. Occupation housewife
Nature of industry

20. Number of children of this mother... <u>3</u> (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 <u>0</u>	
	(c) Stillborn _____	

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was alive at 3 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 _____ Address Rice, Arizona
Month, day, year _____

Registrar _____

Filed _____, 19____

Registrar _____

732-1106-321