

39511

Registration District No. 3409 Registered No. 361
(For use of Local Registrar)

Registration District No. 547 Registered No. 2000
(For use of Local Registrar)

No. 1 St. Ward

(If institution, give name of same instead of street and number.)

City of (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Mary Frances Jones If child is not yet named, submit supplemental report as directed

(1) Train	(2) Number	(3) Date	(4) Are	(5) DATE OF
				1954

(3) SEX OR GIRL <i>Girl</i>	(4) Twin or Triplet? <input checked="" type="checkbox"/>	(5) order of birth <i>1</i>	Parents Married? <i>NO</i>	BIRTH <i>12 01 19</i> (Name of Month) (Day) (Year)
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FATHER		MOTHER.
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(14) NAME BEFORE MARRIAGE: 1. 114

NAME John Baldwin MARRIAGE 2 sons 1 daughter

(1) PRESENT POSTOFFICE *B2 D422 1st Ave* (15) PRESENT POSTOFFICE *B7D #3 Newbury*

POSTOFFICE OF FATHER R.T. D#3 N. W. 200-7

(10) COLOR OR *Latino* (11) AGE AT LAST BIRTHDAY *28* (12) COLOR OR RACE *Latino* BIRTHDAY *5-1-1947* (Year)

12) BIRTHPLACE	1	18) BIRTHPLACE	1
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21.11.1955	200	21.11.1955	200
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(13) OCCUPATION	(19) OCCUPATION
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Farm Cadaver	Farm Laborer
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1945 Number of children of this mother 1 51

(20) Number of children born to mother, including present birth	(21) Number of children now living, including present birth
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CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(22) I hereby certify that I attended the birth of this child, who was... (Born alive or stillborn) (Hour A. M. or P. M.)

on the date above stated.

(ss) (Signature) Wendell Burton

(24) State whether Physician or Midwife

with wife.

Given name added from a supplemental report

(Signature of Witness necessary, when question 23 is signed by mark)

1972 (29) *[Signature]*
Local Registrar

..... 19

Registrar

(27) Elmer A. ...

Local Registrar

householder, etc., should make this return.

*When there was no attending physician or midwife, then the father, husband, or mother, if a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths at 5th month of pregnancy.

before the fifth month of pregnancy.

[illegible]
