

George reginald bamford, charlotte eugene boughner, roy eugene boughner

BIRTHS

County of Clay

Division of Sugars

	Surname first	Surname first	Surname first
1. What is the full name of child?	Bamford, George Reginald	Bent Bennett William	Bent, Donald Wallace
2. When was the child born?	Dec 2nd 1908	Dec 9th 1909	Dec 9th 1909
3. Where was the child born? Street number or Concession and Lot.	Cambridge St Sugars	Charles St Sugars	King St Sugars
4. Male or Female.	Male	Male	Male
5. Were the parents married?	Yes	Yes	Yes
6. Full name of Father.	George Tyler Bamford	Thomas Bent	John French
7. Occupation of Father?	Sailor	Butcher	Wood Worker
8. Full Maiden Name of Mother.	Charlotte B. Day	Caro May Smith	Elizabeth Graham
9. Has she been more than once married give names of former husband, or husbands.	-	-	-
10. Where were the parents married?	Jamaica	Sugars	Blacks, Scotland
11. When were they married?	June 7th 1905	July 26th 1905	Nov 2nd 1882
12. If not married give full Name of Mother.	-	-	-
13. Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
14. What is her occupation?	-	-	-
15. Name of Physician attending.	Dr. Rogers	Dr. Telf	Dr. Walker
16. What relation to child.	Father	Mariner	Father
17. Were you in house at time of Birth?	Yes	Yes	Yes
18. Certified by	Mrs. Tyler Bamford	Mrs. B. Bent	John French
Address	Sugars	Sugars	Sugars
Date	Jan 1st 1909	Jan 2nd 1909	Jan 2nd 1909
Remarks			
1. What is the full name of child?	Boughner, Herb Eugene	Wrightland, Frederic George	Clark, Frederic Edward
2. When was the child born?	Dec 2nd 1909	Jan 5th 1909	Dec 26th 1908
3. Where was the child born? Street number or Concession and Lot.	Marine St Sugars	Marine St Sugars	Marine St Sugars
4. Male or Female.	Male	Male	Male
5. Were the parents married?	Yes	Yes	Yes
6. Full name of Father.	Roy Eugene Boughner	Wm. J. Wrightland	Albert Green Clark
7. Occupation of Father?	Under-taker	Care-taker	Care-taker
8. Full Maiden Name of Mother.	Michaela Stranger	Martha B. Roberts	Elizabeth Kennedy
9. Has she been more than once married give names of former husband, or husbands.	-	-	-
10. Where were the parents married?	Bramford	Sugars	United States
11. When were they married?	Jan 1st 1905	July 27th 1905	Jan 28th 1905
12. If not married give full Name of Mother.	-	-	-
13. Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
14. What is her occupation?	-	-	-
15. Name of Physician attending.	Dr. Rogers	Dr. Telf	Dr. Williams
16. What relation to child.	Father	Father	Father
17. Were you in house at time of Birth?	Yes	Yes	No
18. Certified by	Roy E. Boughner	Wm. Wrightland	Albert Clark
Address	Sugars	Sugars	Sugars
Date	Jan 11th 1909	Jan 25th 1909	Jan 28th 1909
Remarks			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1909

Given under my hand this 10th day of Jan

A.D. 1909

BIRTHS

County of Jefferson Division of Jurgensen

	BIRTHS	BIRTHS	BIRTHS
What is the full name of child?	1. <u>William Albert Jurgensen</u>	1. <u>Brian Ralph Jurgensen</u>	1. <u>William Albert Jurgensen</u>
When was the child born?	2. <u>Dec 21st 1909</u>	2. <u>November 17th 1909</u>	2. <u>July 1st 1909</u>
Where was the child born? Street number or Con- cession and Lot.	3. <u>Home St Jurgensen</u>	3. <u>Home St Jurgensen</u>	3. <u>Home St Jurgensen</u>
Male or Female.	4. <u>Male</u>	4. <u>Male</u>	4. <u>Male</u>
Are the parents married?	5. <u>Yes</u>	5. <u>Yes</u>	5. <u>Yes</u>
Full name of Father.	6. <u>Albert Henry Jurgensen</u>	6. <u>Samuel Jurgensen</u>	6. <u>John W. Jurgensen</u>
Occupation of Father?	7. <u>Chemist</u>	7. <u>Butcher</u>	7. <u>Butcher</u>
Full Maiden Name of Mother.	8. <u>Katharine Mary Jurgensen</u>	8. <u>Gertrude Jurgensen</u>	8. <u>Christine Jurgensen</u>
If she has been more than once married give name of former husband, or husbands.	9. <u>-</u>	9. <u>-</u>	9. <u>-</u>
Where were the parents married?	10. <u>Chicago</u>	10. <u>Paris, Ind</u>	10. <u>Paris, Ind</u>
When were they married?	11. <u>April 20th 1908</u>	11. <u>July 6th 1896</u>	11. <u>Dec 21st 1899</u>
If not married give full Name of Mother.	12. <u>-</u>	12. <u>-</u>	12. <u>-</u>
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13. <u>-</u>	13. <u>-</u>	13. <u>-</u>
What is her occupation?	14. <u>-</u>	14. <u>-</u>	14. <u>-</u>
Name of Physician attend- ing.	15. <u>Dr. McKay</u>	15. <u>Dr. McKay</u>	15. <u>Dr. Calveridge</u>
Your relation to child.	16. <u>Father</u>	16. <u>Father</u>	16. <u>Mother</u>
Were you in home at time of Birth?	17. <u>Yes</u>	17. <u>Yes</u>	17. <u>Yes</u>
Certified by	18. <u>Albert H. Jurgensen</u>	18. <u>Samuel Jurgensen</u>	18. <u>John W. Jurgensen</u>
Address	<u>Jurgensen</u>	<u>Jurgensen</u>	<u>Jurgensen</u>
Date	<u>July 27th 1909</u>	<u>July 2nd 1909</u>	<u>July 2nd 1909</u>
Remarks			
What is the full name of child?	1. <u>Brian Clifford McKay</u>	1. <u>Young Albert Eric</u>	
When was the child born?	2. <u>July 1st 1909</u>	2. <u>July 18th 1909</u>	
Where was the child born? Street number or Con- cession and Lot.	3. <u>Home St Jurgensen</u>	3. <u>Home St Jurgensen</u>	
Male or Female.	4. <u>Male</u>	4. <u>Male</u>	
Are the parents married?	5. <u>Yes</u>	5. <u>Yes</u>	
Full name of Father.	6. <u>Robert A. Skinner</u>	6. <u>William Edgar Skinner</u>	6. <u>Frank Young</u>
Occupation of Father?	7. <u>Business Merchant</u>	7. <u>Butcher</u>	7. <u>Business Merchant</u>
Full Maiden Name of Mother.	8. <u>Casey Kallaway</u>	8. <u>Gertrude Kallaway</u>	8. <u>Edith Kallaway</u>
If she has been more than once married give name of former husband, or husbands.	9. <u>-</u>	9. <u>-</u>	9. <u>-</u>
Where were the parents married?	10. <u>Jurgensen</u>	10. <u>Jurgensen</u>	10. <u>Wyoming</u>
When were they married?	11. <u>Oct 9th 1907</u>	11. <u>July 29th 1909</u>	11. <u>Mar 14th 1909</u>
If not married give full Name of Mother.	12. <u>-</u>	12. <u>-</u>	12. <u>-</u>
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13. <u>-</u>	13. <u>-</u>	13. <u>-</u>
What is her occupation?	14. <u>-</u>	14. <u>-</u>	14. <u>-</u>
Name of Physician attend- ing.	15. <u>Dr. McKay</u>	15. <u>Dr. Calveridge</u>	15. <u>Dr. McKay</u>
Your relation to child.	16. <u>Mother</u>	16. <u>Father</u>	16. <u>Father</u>
Were you in home at time of Birth?	17. <u>Yes</u>	17. <u>Yes</u>	17. <u>Yes</u>
Certified by	18. <u>Dr. McKay</u>	18. <u>W. E. Skinner</u>	18. <u>Frank Young</u>
Address	<u>Jurgensen</u>	<u>Jurgensen</u>	<u>Jurgensen</u>
Date	<u>July 2nd 1909</u>	<u>July 6th 1909</u>	<u>July 9th 1909</u>
Remarks			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending July 31st 1909
 Given under my hand this 10th day of April A. D. 1909

Schedule B.

BIRTHS

N. B.—Record all still-births as births, as well as deaths.

County of Oldford

Division of Singeress

	BIRTHS #1	BIRTHS #2	BIRTHS #3
What is the full name of child?	1. <u>Myrthanna Carl Frederic</u>	2. <u>John Paul W. James</u>	3. <u>Margie Rethel James</u>
When was the child born?	2. <u>November 22nd 1903</u>	2. <u>July 15th 1904</u>	2. <u>July 22nd 1904</u>
Where was the child born? Street number or Concession and Lot.	3. <u>Calvin St. Singeress</u>	3. <u>Victoria St. Singeress</u>	3. <u>Victoria St. Singeress</u>
Male or Female	4. <u>Male</u>	4. <u>Male</u>	4. <u>Male</u>
Are the parents married?	5. <u>Yes</u>	5. <u>Yes</u>	5. <u>Yes</u>
Full name of Father	6. <u>Frank Stefan Myrthunne</u>	6. <u>Wm. John Johnston</u>	6. <u>James Dean Magee</u>
Occupation of Father?	7. <u>Mathematician</u>	7. <u>Bookkeeper</u>	7. <u>Bookkeeper</u>
Full Maiden Name of Mother	8. <u>Ida Bell Handbury</u>	8. <u>Annie Adeline Ray</u>	8. <u>Elizabeth Walcott</u>
If she has been more than once married give names of former husband, or husbands	9. <u>-</u>	9. <u>-</u>	9. <u>-</u>
Where were the parents married?	10. <u>Singeress</u>	10. <u>County of Wellington</u>	10. <u>Hamilton Park Park District</u>
When were they married?	11. <u>Nov 14th 1903</u>	11. <u>April 9th 1907</u>	11. <u>June 1st 1903</u>
If not married give full Name of Mother	12. <u>-</u>	12. <u>-</u>	12. <u>-</u>
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13. <u>-</u>	13. <u>-</u>	13. <u>-</u>
What is her occupation?	14. <u>-</u>	14. <u>-</u>	14. <u>-</u>
Name of Physician attending	15. <u>Dr. Neff</u>	15. <u>Dr. Neff</u>	15. <u>Dr. Neff</u>
Your relation to child	16. <u>Mother</u>	16. <u>Mother</u>	16. <u>Mother</u>
Were you in house at time of Birth?	17. <u>Yes</u>	17. <u>Yes</u>	17. <u>Yes</u>
Certified by	18. <u>Ida Bell Myrthunne</u>	18. <u>Wm. John Johnston</u>	18. <u>James Dean Magee</u>
Address	<u>Singeress</u>	<u>Singeress</u>	<u>Singeress</u>
Date	<u>July 10th 1904</u>	<u>July 10th 1904</u>	<u>July 22nd 1904</u>
Remarks			

	BIRTHS #1	BIRTHS #2	BIRTHS #3
What is the full name of child?	1. <u>Thomas Bernard</u>	1. <u>Thomas William</u>	1. <u>Jeffrie Elsie May</u>
When was the child born?	2. <u>July 25th 1904</u>	2. <u>July 25th 1904</u>	2. <u>July 25th 1904</u>
Where was the child born? Street number or Concession and Lot.	3. <u>Victoria St. Singeress</u>	3. <u>Victoria St. Singeress</u>	3. <u>Charles Street Singeress</u>
Male or Female	4. <u>Female</u>	4. <u>Male</u>	4. <u>Female</u>
Are the parents married?	5. <u>Yes</u>	5. <u>Yes</u>	5. <u>Yes</u>
Full name of Father	6. <u>August Stranas</u>	6. <u>August Stranas</u>	6. <u>Arthur Jeffrie</u>
Occupation of Father?	7. <u>Butcher</u>	7. <u>Butcher</u>	7. <u>in Bakery House</u>
Full Maiden Name of Mother	8. <u>Minna Oravie</u>	8. <u>Minna Oravie</u>	8. <u>Martha Harrington</u>
If she has been more than once married give names of former husband, or husbands	9. <u>-</u>	9. <u>-</u>	9. <u>-</u>
Where were the parents married?	10. <u>Bamberg, Germany</u>	10. <u>Bamberg, Germany</u>	10. <u>Wey, England</u>
When were they married?	11. <u>July 20th 1900</u>	11. <u>July 20th 1900</u>	11. <u>Oct 26th 1904</u>
If not married give full Name of Mother	12. <u>-</u>	12. <u>-</u>	12. <u>-</u>
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13. <u>-</u>	13. <u>-</u>	13. <u>-</u>
What is her occupation?	14. <u>-</u>	14. <u>-</u>	14. <u>-</u>
Name of Physician attending	15. <u>Dr. Neff</u>	15. <u>Dr. Neff</u>	15. <u>Dr. Neff</u>
Your relation to child	16. <u>Mother</u>	16. <u>Mother</u>	16. <u>Mother</u>
Were you in house at time of Birth?	17. <u>Yes</u>	17. <u>Yes</u>	17. <u>Yes</u>
Certified by	18. <u>August Stranas</u>	18. <u>August Stranas</u>	18. <u>Arthur Jeffrie</u>
Address	<u>Singeress</u>	<u>Singeress</u>	<u>Singeress</u>
Date	<u>July 26th 1904</u>	<u>July 26th 1904</u>	<u>July 27th 1904</u>
Remarks			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending ... day of ... A.D. 1904

Given under my hand this ... day of ...

Division Registrar of ...

A.D. 1904

BIRTHS

County of Jefferson

Division of Jugessence

Surname first	Surname last	Surname first	Surname last
1 What is the full name of child?	1 <u>Francis Ralph Ray</u>	1 <u>Francis Marie Joseph</u>	1 <u>Marie Beatrice Elizabeth</u>
2 When was the child born?	2 <u>July 10th 1909</u>	2 <u>July 24th 1909</u>	2 <u>July 25th 1909</u>
3 Where was the child born? Street number or Concession and Lot.	3 <u>Home Avenue Jugessence</u>	3 <u>If in a hospital give its name</u>	3 <u>If in a hospital give its name</u>
4 Male or Female.	4 <u>Male</u>	4 <u>Male</u>	4 <u>Female</u>
5 Are the parents married?	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>Yes</u>
6 Full name of Father.	6 <u>Wm Francis Bermes</u>	6 <u>George Lawrence</u>	6 <u>John George Wells Moore</u>
7 Occupation of Father?	7 <u>Carpenter</u>	7 <u>Welder</u>	7 <u>Welder</u>
8 Full Maiden Name of Mother.	8 <u>Edith Mildred Blain</u>	8 <u>Marie Blannet</u>	8 <u>Effie Thelma Bernese</u>
9 If she has been more than once married give names of former husband, or husband.	9 <u>-</u>	9 <u>-</u>	9 <u>-</u>
10 Where were the parents married?	10 <u>Amherst Ont</u>	10 <u>Hamilton Ont</u>	10 <u>Jugessence</u>
11 When were they married?	11 <u>Apr 20th 1904</u>	11 <u>Sept 25th 1907</u>	11 <u>July 25th 1909</u>
12 If not married give full Name of Mother.	12 <u>-</u>	12 <u>-</u>	12 <u>-</u>
13 Is she single, or a Widow? If a widow state name, occupation and date of husband's death.	13 <u>-</u>	13 <u>-</u>	13 <u>-</u>
14 What is her occupation?	14 <u>-</u>	14 <u>-</u>	14 <u>-</u>
15 Name of Physician attending.	15 <u>Dr Williams</u>	15 <u>Dr Jeff</u>	15 <u>Dr Rogers</u>
16 Your relation to child.	16 <u>Father</u>	16 <u>Father</u>	16 <u>Father</u>
17 Were you in house at time of birth?	17 <u>Yes</u>	17 <u>Yes</u>	17 <u>Yes</u>
18 Certified by.	18 <u>W F Bermes</u>	18 <u>George Lawrence</u>	18 <u>J G Wells Moore</u>
Address.	<u>Jugessence</u>	<u>Jugessence</u>	<u>Jugessence</u>
Date.	<u>Mar 2nd 1909</u>	<u>Mar 4th 1909</u>	<u>Mar 5th 1909</u>
Remarks.			

Surname first	Surname last	Surname first	Surname last
1 What is the full name of child?	1 <u>William Margaret Deane</u>	1 <u>Thom Margaret Deane</u>	1
2 When was the child born?	2 <u>Mar 2nd 1909</u>	2 <u>Mar 2nd 1909</u>	2
3 Where was the child born? Street number or Concession and Lot.	3 <u>Merritt St Jugessence</u>	3 <u>If in a hospital give its name</u>	3 <u>If in a hospital give its name</u>
4 Male or Female.	4 <u>Female</u>	4 <u>Female</u>	4
5 Are the parents married?	5 <u>Yes</u>	5 <u>Yes</u>	5
6 Full name of Father.	6 <u>Robert William Waterhouse</u>	6 <u>John Curtis Deane</u>	6
7 Occupation of Father?	7 <u>Merchant</u>	7 <u>Bookkeeper</u>	7
8 Full Maiden Name of Mother.	8 <u>Edith May Little</u>	8 <u>Esther Theresa Deane</u>	8
9 If she has been more than once married give names of former husband, or husband.	9 <u>-</u>	9 <u>-</u>	9
10 Where were the parents married?	10 <u>Amherst</u>	10 <u>Jugessence</u>	10
11 When were they married?	11 <u>July 11th 1907</u>	11 <u>May 20th 1907</u>	11
12 If not married give full Name of Mother.	12 <u>-</u>	12 <u>-</u>	12
13 Is she single, or a Widow? If a widow state name, occupation and date of husband's death.	13 <u>-</u>	13 <u>-</u>	13
14 What is her occupation?	14 <u>-</u>	14 <u>-</u>	14
15 Name of Physician attending.	15 <u>Dr Williams</u>	15 <u>Dr Caldwell</u>	15
16 Your relation to child.	16 <u>Father</u>	16 <u>Mother</u>	16
17 Were you in house at time of birth?	17 <u>Yes</u>	17 <u>Yes</u>	17
18 Certified by.	18 <u>R W Waterhouse</u>	18 <u>Mrs John Deane</u>	18
Address.	<u>Jugessence</u>	<u>Jugessence</u>	
Date.	<u>Mar 2nd 1909</u>	<u>Mar 24th 1909</u>	
Remarks.			

BIRTHS

County of Offord Division of Singersa

What is the full name of child?	Surname first	Surname first	Surname first
1. <u>Shearn Ralph Edward</u>	<u>Shearn</u>	<u>Reiter Margarie Rosa</u>	<u>Beddie Elsie Marie</u>
2. <u>March 7th 1909</u>	<u>March 7th 1909</u>	<u>March 19th 1909</u>	<u>March 18th 1909</u>
3. <u>Victoria St Singersa</u>	<u>Albert St Singersa</u>	<u>Victoria St Singersa</u>	<u>Victoria St Singersa</u>
4. <u>Male</u>	<u>Female</u>	<u>Female</u>	<u>Female</u>
5. <u>Yes</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
6. <u>Henry Edward Nicholas Shearn</u>	<u>Frederick William Reiter</u>	<u>William Beddie</u>	<u>William Beddie</u>
7. <u>Balance</u>	<u>Under-taker</u>	<u>Clerk</u>	<u>Clerk</u>
8. <u>Charlotte Wilkie</u>	<u>Annie Rose Wiltlake</u>	<u>Marise Barnett</u>	<u>Marise Barnett</u>
9. <u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
10. <u>Wasselaan</u>	<u>Wasselaan</u>	<u>West Offord</u>	<u>West Offord</u>
11. <u>July 20th 1906</u>	<u>June 17th 1906</u>	<u>June 1st 1904</u>	<u>June 1st 1904</u>
12. <u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
13. <u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
14. <u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
15. <u>Dr. Telf</u>	<u>Dr. Coleridge</u>	<u>Dr. Williams</u>	<u>Dr. Williams</u>
16. <u>Father</u>	<u>Father</u>	<u>Father</u>	<u>Father</u>
17. <u>Yes</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
18. <u>Edgar Shearn</u>	<u>Fred W. Reiter</u>	<u>William Beddie</u>	<u>William Beddie</u>
19. <u>Singersa</u>	<u>Singersa</u>	<u>Singersa</u>	<u>Singersa</u>
20. <u>Apr 2nd 1909</u>	<u>Apr 7th 1909</u>	<u>Apr 9th 1909</u>	<u>Apr 9th 1909</u>
21. <u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
1. <u>Henderson Ethel May</u>	<u>Henderson</u>	<u>Raper George Herman</u>	<u>Reel Cyrus Joseph</u>
2. <u>March 21st 1909</u>	<u>March 20th 1909</u>	<u>March 20th 1909</u>	<u>March 20th 1909</u>
3. <u>Wm St East Singersa</u>	<u>Carroll St Singersa</u>	<u>Carroll St Singersa</u>	<u>Carroll St Singersa</u>
4. <u>Female</u>	<u>Male</u>	<u>Male</u>	<u>Male</u>
5. <u>Yes</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
6. <u>George Henry Henderson</u>	<u>George Raper</u>	<u>Cyrus Reel</u>	<u>Cyrus Reel</u>
7. <u>Machinist</u>	<u>Balance</u>	<u>Balance</u>	<u>Balance</u>
8. <u>Elizabeth Jane Taylor</u>	<u>Ethel Ruthford</u>	<u>Nellie Reel</u>	<u>Nellie Reel</u>
9. <u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
10. <u>Singersa</u>	<u>Walswood</u>	<u>Dublin Canada</u>	<u>Dublin Canada</u>
11. <u>July 20th 1904</u>	<u>July 20th 1904</u>	<u>Oct 7th 1900</u>	<u>Oct 7th 1900</u>
12. <u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
13. <u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
14. <u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
15. <u>Dr. Telf</u>	<u>Dr. Telf</u>	<u>Dr. Williams</u>	<u>Dr. Williams</u>
16. <u>Father</u>	<u>Father</u>	<u>Father</u>	<u>Father</u>
17. <u>Yes</u>	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
18. <u>Fred H. Henderson</u>	<u>George Raper</u>	<u>Cyrus Reel</u>	<u>Cyrus Reel</u>
19. <u>Singersa</u>	<u>Singersa</u>	<u>Singersa</u>	<u>Singersa</u>
20. <u>Apr 10th 1909</u>	<u>Apr 13th 1909</u>	<u>Apr 13th 1909</u>	<u>Apr 13th 1909</u>
21. <u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1909 day of July 1909
 Given under my hand this 14th day of July 1909
 Division Registrar of Singersa

BIRTHS

County of Alford

Division of Jagersall

	Surname first	Surname first	Surname first
1	1 <u>Hammond William George</u>	1 <u>Olney Ralph Carter</u>	1 <u>Bregory Eric May</u>
2	2 <u>March 19th 1909</u>	2 <u>March 20th 1909</u>	2 <u>April 1st 1909</u>
3	3 <u>James H Jagersall</u>	3 <u>Cherry H Jagersall</u>	3 <u>Charles H Jagersall</u>
4	4 <u>Male</u>	4 <u>Male</u>	4 <u>Female</u>
5	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>Yes</u>
6	6 <u>Henry Harrison Hammond</u>	6 <u>Thomas George Olney</u>	6 <u>Jonathan Bregory</u>
7	7 <u>Laborer</u>	7 <u>Cooper</u>	7 <u>Wardman</u>
8	8 <u>Eliza Nellie Keely</u>	8 <u>Louisa Kelly White</u>	8 <u>Clara Bell Barker</u>
9	9 <u>-</u>	9 <u>-</u>	9 <u>-</u>
10	10 <u>England</u>	10 <u>Saer</u>	10 <u>Jagersall</u>
11	11 <u>Aug 26th 1903</u>	11 <u>May 15th 1909</u>	11 <u>Sept 15th 1906</u>
12	12 <u>-</u>	12 <u>-</u>	12 <u>-</u>
13	13 <u>-</u>	13 <u>-</u>	13 <u>-</u>
14	14 <u>-</u>	14 <u>-</u>	14 <u>-</u>
15	15 <u>Dr McKay</u>	15 <u>Dr Coleridge</u>	15 <u>Dr McKay</u>
16	16 <u>Paternal</u>	16 <u>Paternal</u>	16 <u>Grandmother</u>
17	17 <u>Yes</u>	17 <u>Yes</u>	17 <u>Yes</u>
18	18 <u>Wm Harrison Hammond</u>	18 <u>Thomas H. Olney</u>	18 <u>Mrs Wm Barker</u>
19	19 <u>Jagersall</u>	19 <u>Jagersall</u>	19 <u>Jagersall</u>
20	20 <u>Apr 15th 1909</u>	20 <u>Apr 19th 1909</u>	20 <u>Apr 22nd 1909</u>
21	21 <u>-</u>	21 <u>-</u>	21 <u>-</u>
1	1 <u>Rolinson William James</u>	1 <u>Mattison Benjamin Herman</u>	1 <u>Merrill Philip Edward</u>
2	2 <u>April 11th 1909</u>	2 <u>April 15th 1909</u>	2 <u>April 15th 1909</u>
3	3 <u>Henry H Rolinson</u>	3 <u>James H Mattison</u>	3 <u>William H Merrill</u>
4	4 <u>Male</u>	4 <u>Male</u>	4 <u>Male</u>
5	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>Yes</u>
6	6 <u>William Rolinson</u>	6 <u>Benjamin Herman Mattison</u>	6 <u>Benjamin Merrill</u>
7	7 <u>Laborer</u>	7 <u>Carpenter</u>	7 <u>Laborer</u>
8	8 <u>James Dyer</u>	8 <u>Lucine Eugene</u>	8 <u>Martha Jane Merrill</u>
9	9 <u>-</u>	9 <u>-</u>	9 <u>-</u>
10	10 <u>Sharnford Crk</u>	10 <u>Jagersall</u>	10 <u>Jagersall</u>
11	11 <u>Dec 21st 1904</u>	11 <u>June 1st 1904</u>	11 <u>Nov 21st 1902</u>
12	12 <u>-</u>	12 <u>-</u>	12 <u>-</u>
13	13 <u>-</u>	13 <u>-</u>	13 <u>-</u>
14	14 <u>-</u>	14 <u>-</u>	14 <u>-</u>
15	15 <u>Dr Hill</u>	15 <u>Dr Coleridge</u>	15 <u>Dr Hill</u>
16	16 <u>Maternal</u>	16 <u>Neighbor</u>	16 <u>Mother</u>
17	17 <u>Yes</u>	17 <u>Yes</u>	17 <u>Yes</u>
18	18 <u>Mrs Wm Rolinson</u>	18 <u>Mrs Elizabeth Mattison</u>	18 <u>Elizabeth Merrill</u>
19	19 <u>Jagersall</u>	19 <u>Jagersall</u>	19 <u>Jagersall</u>
20	20 <u>May 2nd 1909</u>	20 <u>May 2nd 1909</u>	20 <u>May 10th 1909</u>
21	21 <u>-</u>	21 <u>-</u>	21 <u>-</u>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1909
 Given under my hand this 10th day of July A. D. 1909

BIRTHS

County of Jefferson

Division of Jefferson

	Surname first	Surname first	Surname first
What is the full name of child?	1. Butler Annie Leahay	1. Ryan Sarah	1. Kuffler Corbin Robert
When was the child born?	2. April 21st 1909	2. May 17th 1909	2. June 1st 1909
Where was the child born? Street number or Congressional and Loc.	3. In a hospital give its name Jefferson	3. In a hospital give its name Jefferson	3. In a hospital give its name Jefferson
Male or Female.	4. Female	4. Female	4. Male
Are the parents married?	5. Yes	5. Yes	5. Yes
Full name of Father.	6. John Butler	6. William Ryan	6. Robinson Hamilton Kuffler
Occupation of Father?	7. Butcher	7. Laborer	7. Farmer
Full Maiden Name of Mother.	8. Margaret Robert	8. Elizabeth Bailey	8. Elizabeth Robinson
If she has been more than once married give names of former husband, or husbands.	9. -	9. -	9. -
Where were the parents married?	10. Jefferson	10. Jefferson	10. Jefferson
When were they married?	11. Sept 25th 1908	11. May 11th 1903	11. July 26th 1890
If not married give full Name of Mother.	12. -	12. -	12. -
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13. -	13. -	13. -
What is her occupation?	14. -	14. -	14. -
Name of Physician attending.	15. Dr. Calverly	15. Dr. Williams	15. Dr. Rogers
Your relation to child.	16. Aunt	16. Father	16. Father
Were you in house at time of Birth?	17. Yes	17. Yes	17. Yes
Certified by	18. J. M. Baker	18. Wm. Ryan	18. R. S. Kuffler
Address	Jefferson	Jefferson	Jefferson
Date	May 15th 1909	May 17th 1909	June 1st 1909
Remarks			

	Surname first	Surname first	Surname first
What is the full name of child?	1. Kirbyson Peter Barker	1. Bradley Donald Charles	1. Beach Agnes Annie
When was the child born?	2. May 12th 1909	2. May 2nd 1909	2. May 17th 1909
Where was the child born? Street number or Congressional and Loc.	3. In a hospital give its name Jefferson	3. In a hospital give its name Jefferson	3. In a hospital give its name Jefferson
Male or Female.	4. Male	4. Male	4. Female
Are the parents married?	5. Yes	5. Yes	5. Yes
Full name of Father.	6. William J. Kirbyson	6. Charles Alexander Bradley	6. George Henry Beach
Occupation of Father?	7. Laundry	7. Merchant	7. Laborer
Full Maiden Name of Mother.	8. Olga Foster	8. Emma Margaretman	8. Mary Alice Johnson
If she has been more than once married give names of former husband, or husbands.	9. -	9. -	9. -
Where were the parents married?	10. Washington	10. Braumsville	10. England
When were they married?	11. Aug 26th 1897	11. August 29th 1907	11. December 24th 1900
If not married give full Name of Mother.	12. -	12. -	12. -
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13. -	13. -	13. -
What is her occupation?	14. -	14. -	14. -
Name of Physician attending.	15. Dr. Kuffler	15. Dr. Kuffler	15. Dr. Williams
Your relation to child.	16. Father	16. Mother	16. Father
Were you in house at time of Birth?	17. Yes	17. Yes	17. Yes
Certified by	18. W. J. Kirbyson	18. Mrs. Chas. Bradley	18. George Henry Beach
Address	Jefferson	Jefferson	Jefferson
Date	June 12th 1909	June 1st 1909	June 17th 1909
Remarks			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1909
 Given under my hand this 14th day of July 1909
W. A. Warrick Division Registrar of Jefferson

BIRTHS

County of *Jefferson*

Division of *Ingersoll*

	Form No. 1	Form No. 2	Form No. 3
What is the full name of child?	<i>Brook Annie Lakelen</i>	<i>Wright Howard Stanley</i>	<i>Bobbe Baby</i>
When was the child born?	<i>June 11th 1909</i>	<i>May 14th 1909</i>	<i>June 5th 1909</i>
Where was the child born? Street number or Commission and Lot.	<i>Charles St Ingersoll</i> If in a hospital give its name.	<i>Charles St Ingersoll</i> If in a hospital give its name.	<i>Charles St Ingersoll</i> If in a hospital give its name.
Male or Female.	<i>Female</i>	<i>Male</i>	<i>Female</i>
Are the parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Full name of Father.	<i>William Andrew Parach</i>	<i>Henry Wright</i>	<i>Charles Bobbe</i>
Occupation of Father?	<i>Farmer</i>	<i>Balance</i>	<i>Farmer</i>
Full Maiden Name of Mother.	<i>Nancy May Marshall</i>	<i>Mary Ann Sanks</i>	<i>Donnet May Sankoff</i>
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	<i>Barre Ark</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
When were they married?	<i>April 2nd 1897</i>	<i>August 19th 1893</i>	-
If not married give full Name of Mother.	-	-	-
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	<i>Dr. Williams</i>	<i>Dr. McKay</i>	<i>Dr. Williams</i>
Your relation to child.	<i>Farther</i>	<i>Mother</i>	<i>Farther</i>
Were you in house at time of Birth?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Certified by	<i>W. A. Parach</i>	<i>Mary Ann Wright</i>	<i>Charles Bobbe</i>
Address	<i>Newman</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Date	<i>June 22nd 1909</i>	<i>June 29th 1909</i>	<i>June 5th 1909</i>
Remarks			
What is the full name of child?	1	1	1
When was the child born?	2	2	2
Where was the child born? Street number or Commission and Lot.	3 If in a hospital give its name.	3 If in a hospital give its name.	3 If in a hospital give its name.
Male or Female.	4	4	4
Are the parents married?	5	5	5
Full name of Father.	6	6	6
Occupation of Father?	7	7	7
Full Maiden Name of Mother.	8	8	8
If she has been more than once married give names of former husband, or husbands.	9	9	9
Where were the parents married?	10	10	10
When were they married?	11	11	11
If not married give full Name of Mother.	12	12	12
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13	13	13
What is her occupation?	14	14	14
Name of Physician attending.	15	15	15
Your relation to child.	16	16	16
Were you in house at time of Birth?	17	17	17
Certified by	18	18	18
Address			
Date			
Remarks			

BIRTHS

County of Oxford

Division of Sugersoll

	Surname first	Surname first	Surname first
What is the full name of child?	1 st <u>Cleave Robert Marshall</u>	1 <u>Mc Sherry Annie Marie</u>	1 <u>Caddy Dorothy Jean</u>
When was the child born?	2 <u>June 15th 1909</u>	2 <u>June 2nd 1909</u>	2 <u>June 12th 1909</u>
Where was the child born? Street number or Concession and lot.	3 <u>Charles St. Sugersoll</u>	3 <u>Ball St. Sugersoll</u>	3 <u>Charles St. Sugersoll</u>
Male or Female	4 <u>Male</u>	4 <u>Female</u>	4 <u>Female</u>
Were the parents married?	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>Yes</u>
Full name of Father	6 <u>John Henry Cleave</u>	6 <u>Lewis Fred Mc Sherry</u>	6 <u>William J. Caddy</u>
Occupation of Father?	7 <u>Laborer</u>	7 <u>Driver</u>	7 <u>Laborer</u>
Full Maiden Name of Mother	8 <u>Annie Curwin</u>	8 <u>Mary Burns</u>	8 <u>Lillie Maud Waterhouse</u>
If she has been more than once married give names of former husband or husbands	9 <u>-</u>	9 <u>-</u>	9 <u>-</u>
Where were the parents married?	10 <u>Woodstock</u>	10 <u>Sugersoll</u>	10 <u>Sugersoll</u>
When were they married?	11 <u>May 11th 1906</u>	11 <u>Sept. 7th 1905</u>	11 <u>March 5th 1902</u>
If not married give full Name of Mother	12 <u>-</u>	12 <u>-</u>	12 <u>-</u>
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13 <u>-</u>	13 <u>-</u>	13 <u>-</u>
What is her occupation?	14 <u>-</u>	14 <u>-</u>	14 <u>-</u>
Name of Physician attending	15 <u>Dr. Keff</u>	15 <u>Dr. McKay</u>	15 <u>Dr. Keff</u>
Your relation to child	16 <u>Father</u>	16 <u>Father</u>	16 <u>Father</u>
Were you in house at time of Birth?	17 <u>No</u>	17 <u>Yes</u>	17 <u>Yes</u>
Certified by	18 <u>John Cleave</u>	18 <u>Lewis Fred Mc Sherry</u>	18 <u>W. J. Caddy</u>
Address	<u>Sugersoll</u>	<u>Sugersoll</u>	<u>Sugersoll</u>
Date	<u>July 3rd 1909</u>	<u>July 5th 1909</u>	<u>July 10th 1909</u>
Remarks			
What is the full name of child?	1 st <u>Edwards Myrtle</u>	1 <u>Jackson William James</u>	1 <u>Daniels Mary Elizabeth</u>
When was the child born?	2 <u>June 2th 1909</u>	2 <u>June 1st</u>	2 <u>June 2nd 1909</u>
Where was the child born? Street number or Concession and lot.	3 <u>Washington St. Sugersoll</u>	3 <u>King Street Sugersoll</u>	3 <u>Charles St. Sugersoll</u>
Male or Female	4 <u>Female</u>	4 <u>Male</u>	4 <u>Female</u>
Were the parents married?	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>Yes</u>
Full name of Father	6 <u>James Arthur Edwards</u>	6 <u>James Jackson</u>	6 <u>John Lillie Daniels</u>
Occupation of Father?	7 <u>Carpenter</u>	7 <u>Machinist</u>	7 <u>Laborer</u>
Full Maiden Name of Mother	8 <u>Sophia Maud Waterhouse</u>	8 <u>Hannah Gueble</u>	8 <u>Mary Ellen Leigh</u>
If she has been more than once married give names of former husband or husbands	9 <u>-</u>	9 <u>-</u>	9 <u>-</u>
Where were the parents married?	10 <u>Sugersoll</u>	10 <u>England</u>	10 <u>Sugersoll</u>
When were they married?	11 <u>June 5th 1901</u>	11 <u>Aug. 26th 1891</u>	11 <u>July 2nd 1905</u>
If not married give full Name of Mother	12 <u>-</u>	12 <u>-</u>	12 <u>-</u>
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13 <u>-</u>	13 <u>-</u>	13 <u>-</u>
What is her occupation?	14 <u>-</u>	14 <u>-</u>	14 <u>-</u>
Name of Physician attending	15 <u>Dr. Keff</u>	15 <u>Dr. Keff</u>	15 <u>Dr. Williams</u>
Your relation to child	16 <u>Father</u>	16 <u>Father</u>	16 <u>Grandmother</u>
Were you in house at time of Birth?	17 <u>Yes</u>	17 <u>Yes</u>	17 <u>Yes</u>
Certified by	18 <u>J. A. Edwards</u>	18 <u>James Jackson</u>	18 <u>Mrs. Henry Leigh</u>
Address	<u>Sugersoll</u>	<u>Sugersoll</u>	<u>Sugersoll</u>
Date	<u>July 12th 1909</u>	<u>July 10th 1909</u>	<u>July 10th 1909</u>
Remarks			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept. 30 1909

Given under my hand this 14th day of October A.D. 190

John Cecil Longfield, Herbert Edgar Longfield, Mary Frances Smith, Gordon William Pettick, James Pettick, Edith French, Florence Ellen Carney, Charles Carney, Matilda Robinson, Thomas Brady, Benjamin Alexander McMillan, Mary Beard, Ralph Richardson, Robert

BIRTHS

County of Sufford Division of Sugersoll

	Surname and	Surname and	Surname and
What is the full name of child?	1 Longfield John Cecil	Pettick Gordon William	Carney Florence Ellen
When was the child born?	2 July 26th 1909	2 June 25th 1909	2 July 24th 1909
Where was the child born?	3 If in a hospital give its name, Sugersoll	3 King Street	3 If in a hospital give its name, Sugersoll
Sex of child	4 Male	4 Male	4 Female
Are the parents married?	5 Yes	5 Yes	5 Yes
Full name of Father?	6 Herbert Edgar Longfield	6 James Pettick	6 Charles Carney
Occupation of Father?	7 Engineer	7 Machinist	7 Machinist
Full Maiden Name of Mother?	8 Mary Frances Smith	8 Edith French	8 Matilda Robinson
If she has been more than once married give names of former husband, or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Sugersoll	10 Sugersoll	10 Sugersoll
When were they married?	11 Jan. 9th 1907	11 June 4th 1905	11 Mar. 19th 1903
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attending.	15 Dr. Kuff	15 Dr. Kuff	15 Dr. Rogers
Your relation to child.	16 Father	16 Father	16 Father
Were you in house at time of birth?	17 Yes	17 Yes	17 Yes
Certified by	18 Herbert Edgar Longfield	18 James Pettick	18 Charles Carney
Address	Sugersoll	Sugersoll	Sugersoll
Date	July 26th 1909	July 24th 1909	July 6th 1909
Remarks			
What is the full name of child?	19 McMillan Thomas Lady	Scott Mary Beadette	Richardson Ralph
When was the child born?	2 July 10th 1909	2 July 31st 1909	2 July 26th 1909
Where was the child born?	3 If in a hospital give its name, Sugersoll	3 King St. W.	3 Chamberlains St. Sugersoll
Sex of child	4 Male	4 Female	4 Male
Are the parents married?	5 Yes	5 Yes	5 Yes
Full name of Father?	6 Benjamin Alexander McMillan	6 Roy Scott	6 Robert Richardson
Occupation of Father?	7 Butcher	7 Bill Driver	7 Wood Worker
Full Maiden Name of Mother?	8 Mary Beard	8 Margaret McGinnis	8 Daisy Charlotte Kibble
If she has been more than once married give names of former husband, or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Sugersoll	10 Sugersoll	10 Paris
When were they married?	11 Aug. 29th 1899	11 June 3rd 1908	11 Oct. 1st 1907
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attending.	15 Dr. Williams	15 Dr. Goldridge	15 Dr. Williams
Your relation to child.	16 Father	16 Mother	16 Father
Were you in house at time of birth?	17 Yes	17 Yes	17 Yes
Certified by	18 B. D. McMillan	18 Mrs. Roy Scott	18 Robert Richardson
Address	Sugersoll	Sugersoll	Sugersoll
Date	July 10th 1909	Aug. 25th 1909	Aug. 14th 1909
Remarks			

BIRTHS

County of Osgood Division of Jagersoll

	Surname First	Surname First	Surname First
What is the full name of child?	1 <u>Roddy William Charles Desmond James Learl</u>	2 <u>Albert Byron Wellington</u>	3 <u>Borrowman Elizabeth Haine</u>
When was the child born? Where was the child born? Street number or Con- cession and Lot.	2 <u>July 20th 1909</u> 3 <u>Jagersoll</u>	2 <u>July 18th 1909</u> 3 <u>Jagersoll</u>	2 <u>June 27th 1909</u> 3 <u>Jagersoll</u>
Male or Female.	4 <u>Male</u>	4 <u>Male</u>	4 <u>Female</u>
Are the parents married?	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>Yes</u>
Full name of Father.	6 <u>William Joseph Roddy</u>	6 <u>Desmond</u>	6 <u>Robert Mc Larnin Borrowman</u>
Occupation of Father?	7 <u>Machinist</u>	7 <u>Shepper</u>	7 <u>Merchant</u>
Full Maiden Name of Mother.	8 <u>Daisie Webb</u>	8 <u>Jennette Edgar</u>	8 <u>Grace Edna Manning</u>
If she has been more than once married give names of former husband, or linebands	9 <u>-</u>	9 <u>-</u>	9 <u>-</u>
Where were the parents married?	10 <u>Woodstock</u>	10 <u>Dunville</u>	10 <u>Buffalo Ct. S. A.</u>
When were they married? If not married give full Name of Mother.	11 <u>May 24th 1895</u>	11 <u>Jan. 21st 1891</u>	11 <u>Sept. 9th 1908</u>
If a single or a Widow? If a widow state name, occupation, and date of husband's death.	12 <u>-</u>	12 <u>-</u>	12 <u>-</u>
What is her occupation?	14 <u>-</u>	14 <u>-</u>	14 <u>-</u>
Name of Physician attending	15 <u>Dr. Williams</u>	15 <u>Dr. Rogers</u>	15 <u>Dr. Huff</u>
Your relation to child.	16 <u>Father</u>	16 <u>Father</u>	16 <u>Father</u>
Were you in house at time of Birth?	17 <u>Yes</u>	17 <u>Yes</u>	17 <u>Yes</u>
Certified by	18 <u>W. J. Roddy</u>	18 <u>L. B. W. Desmond</u>	18 <u>R. H. Borrowman</u>
Address	<u>Jagersoll</u>	<u>Jagersoll</u>	<u>Jagersoll</u>
Date	<u>Aug 16th 1909</u>	<u>Aug. 19th 1909</u>	<u>Aug 20th 1909</u>
Remarks			

	Surname First	Surname First	Surname First
What is the full name of child?	1 <u>Clark Earl Graham</u>	1 <u>Davis Minnie Leala</u>	1 <u>Loole Louise Seabille</u>
When was the child born? Where was the child born? Street number or Con- cession and Lot.	2 <u>Aug 29th 1909</u> 3 <u>Jagersoll</u>	2 <u>Aug 5th 1909</u> 3 <u>Jagersoll</u>	2 <u>Aug 19th 1909</u> 3 <u>Jagersoll</u>
Male or Female.	4 <u>Male</u>	4 <u>Female</u>	4 <u>Female</u>
Are the parents married?	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>Yes</u>
Full name of Father.	6 <u>John Stanley Clark</u>	6 <u>William Hugh Davis</u>	6 <u>Albth. Poole</u>
Occupation of Father?	7 <u>Printer</u>	7 <u>Blacksmith</u>	7 <u>Machinist</u>
Full Maiden Name of Mother.	8 <u>Vesta Leone Chamber</u>	8 <u>Mabel Douglas Helion</u>	8 <u>Mary Ann Hebron</u>
If she has been more than once married give names of former husband, or husbands	9 <u>-</u>	9 <u>-</u>	9 <u>-</u>
Where were the parents married?	10 <u>Jagersoll</u>	10 <u>St. Thomas</u>	10 <u>Jagersoll</u>
When were they married? If not married give full Name of Mother.	11 <u>Sept. 7th 1908</u>	11 <u>Jan. 12th 1904</u>	11 <u>24th 1900</u>
If a single or a Widow? If a widow state name, occupation, and date of husband's death.	12 <u>-</u>	12 <u>-</u>	12 <u>-</u>
What is her occupation?	14 <u>-</u>	14 <u>-</u>	14 <u>-</u>
Name of Physician attending	15 <u>Dr. Williams</u>	15 <u>Dr. Huff</u>	15 <u>Dr. Rogers</u>
Your relation to child.	16 <u>Father</u>	16 <u>Uncle</u>	16 <u>Uncle</u>
Were you in house at time of Birth?	17 <u>Yes</u>	17 <u>Yes</u>	17 <u>Yes</u>
Certified by	18 <u>John Stanley Clark</u>	18 <u>Mrs. Elizabeth Mc Minnow</u>	18 <u>Grace Elizabeth Mc Minnow</u>
Address	<u>Jagersoll</u>	<u>Jagersoll</u>	<u>Jagersoll</u>
Date	<u>Aug 23rd 1909</u>	<u>Aug. 28th 1909</u>	<u>Aug. 25th 1909</u>
Remarks			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 20th 1909
 Given under my hand this 10th day of October A. D. 1909

BIRTHS

County of _____

Division of _____

	Surname first	Surname first	Surname first
What is the full name of child?	1. <i>Ransom Helen Charles</i>	1. <i>Sonson George Franklin</i>	1. <i>La Penatier Barbara</i>
When was the child born?	2. <i>Sept. 1st. 1909</i>	2. <i>Aug. 5th. 1909</i>	2. <i>Aug. 14th. 1909</i>
Where was the child born? Street number or Concession and Loc.	3. <i>King St. Sigersoll</i>	3. <i>King St. Sigersoll</i>	3. <i>King St. Sigersoll</i>
Male or Female.	4. <i>Male</i>	4. <i>Male</i>	4. <i>Female</i>
Are the parents married?	5. <i>Yes</i>	5. <i>Yes</i>	5. <i>Yes</i>
Full name of Father.	6. <i>Albion Ransom</i>	6. <i>George Anthony Sonson</i>	6. <i>Arthur La Penatier</i>
Occupation of Father?	7. <i>Woolder</i>	7. <i>Drug gbt</i>	7. <i>Clerk</i>
Full Maiden Name of Mother.	8. <i>Pearl May Boss</i>	8. <i>Maggie Jylfar Lemau</i>	8. <i>Barbara Elue Sewell</i>
If she has been more than once married give names of former husband, or husbands.	9. <i>-</i>	9. <i>-</i>	9. <i>-</i>
Where were the parents married?	10. <i>Sigersoll</i>	10. <i>-</i>	10. <i>Niagara Falls N. S. C.</i>
When were they married?	11. <i>May 1st. 1909</i>	11. <i>July 10th. 1898</i>	11. <i>Oct. 6th. 1909</i>
If not married give full Name of Mother.	12. <i>-</i>	12. <i>-</i>	12. <i>-</i>
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13. <i>-</i>	13. <i>-</i>	13. <i>-</i>
What is her occupation?	14. <i>-</i>	14. <i>-</i>	14. <i>-</i>
Name of Physician attending.	15. <i>Dr. Coldridge</i>	15. <i>Dr. Huff</i>	15. <i>Dr. Williams</i>
Your relation to child.	16. <i>Father</i>	16. <i>Father</i>	16. <i>Mother</i>
Were you in house at time of Birth?	17. <i>No</i>	17. <i>Yes</i>	17. <i>Yes</i>
Certified by	18. <i>Albion Ransom</i>	18. <i>George A. Sonson</i>	18. <i>Barbara E. La Penatier</i>
Address	<i>Sigersoll</i>	<i>Sigersoll</i>	<i>Sigersoll</i>
Date	<i>Sept. 2nd. 1909</i>	<i>Sept. 9th. 1909</i>	<i>Sept. 10th. 1909</i>
Remarks			
What is the full name of child?	1. <i>Coleridge Helen Margaret</i>	1. <i>Garnett Gertrude</i>	1. <i>Henderson Ellen Mary</i>
When was the child born?	2. <i>Sept. 5th. 1909</i>	2. <i>Sept. 11th. 1909</i>	2. <i>Sept. 5th. 1909</i>
Where was the child born? Street number or Concession and Loc.	3. <i>King St. Sigersoll</i>	3. <i>Hubermain St. Sigersoll</i>	3. <i>Charles St. Sigersoll</i>
Male or Female.	4. <i>Female</i>	4. <i>Female</i>	4. <i>Female</i>
Are the parents married?	5. <i>Yes</i>	5. <i>Yes</i>	5. <i>Yes</i>
Full name of Father.	6. <i>James Bruce Coleridge</i>	6. <i>Charles E. Garnett</i>	6. <i>George Arthur Henderson</i>
Occupation of Father?	7. <i>Physician</i>	7. <i>Machinist</i>	7. <i>Machinist</i>
Full Maiden Name of Mother.	8. <i>Frances Cecelia Witter</i>	8. <i>Clara Blanch Ball</i>	8. <i>Emmabel Daves</i>
If she has been more than once married give names of former husband, or husbands.	9. <i>-</i>	9. <i>-</i>	9. <i>-</i>
Where were the parents married?	10. <i>Stratford</i>	10. <i>Dorcham Centre</i>	10. <i>Sigersoll</i>
When were they married?	11. <i>Oct. 27th. 1909</i>	11. <i>Aug. 24th. 1899</i>	11. <i>July 15th. 1909</i>
If not married give full Name of Mother.	12. <i>-</i>	12. <i>-</i>	12. <i>-</i>
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13. <i>-</i>	13. <i>-</i>	13. <i>-</i>
What is her occupation?	14. <i>-</i>	14. <i>-</i>	14. <i>-</i>
Name of Physician attending.	15. <i>Dr. Sinclair, Huff-Coleridge</i>	15. <i>Dr. Williams</i>	15. <i>Dr. Williams</i>
Your relation to child.	16. <i>Father</i>	16. <i>Father</i>	16. <i>Father</i>
Were you in house at time of Birth?	17. <i>Yes</i>	17. <i>Yes</i>	17. <i>Yes</i>
Certified by	18. <i>J. B. Coleridge</i>	18. <i>Charles E. Garnett</i>	18. <i>Geo. A. Henderson</i>
Address	<i>Sigersoll</i>	<i>Sigersoll</i>	<i>Sigersoll</i>
Date	<i>Sept. 10th. 1909</i>	<i>Sept. 13th. 1909</i>	<i>Sept. 10th. 1909</i>
Remarks			

alfred pryce jones, lloyd andrews, christopher andrews, mary ethel

BIRTHS

County of *Oxford*

Division of *Lingersoll*

What is the full name of child?	When was the child born?	Where was the child born? Street number or Concession and Lot.	Male or Female.	Are the parents married?	Full name of Father.	Occupation of Father?	Full Maiden Name of Mother.	If she has been more than once married give names of former husband, or husbands.	Where were the parents married?	When were they married?	If not married give full Name of Mother.	Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	What is her occupation?	Name of Physician attending.	Your relation to child.	Were you in house at time of Birth?	Certified by	Address	Date	Remarks
1. <i>Knights Margaret Elizabeth Jones Alfred Pryce</i>	2. <i>Aug. 29th. 1909</i>	3. <i>St. James St. Lingersoll</i>	4. <i>Female</i>	5. <i>Yes</i>	6. <i>Alfred Knights</i>	7. <i>Steel Temperer</i>	8. <i>Henrietta Spindone</i>	9. <i>-</i>	10. <i>Toronto</i>	11. <i>Dec. 3rd. 1903</i>	12. <i>-</i>	13. <i>-</i>	14. <i>-</i>	15. <i>Dr. Jeff</i>	16. <i>Mother</i>	17. <i>Yes</i>	18. <i>Mrs Alfred Knights</i>	<i>Lingersoll</i>	<i>Sept. 18th. 1909</i>	
2. <i>Lloyd Pryce Jones</i>	3. <i>Sept. 5th. 1909</i>	4. <i>St. James St. Lingersoll</i>	5. <i>Male</i>	6. <i>Yes</i>	7. <i>Lloyd Pryce Jones</i>	8. <i>Organist</i>	9. <i>Emma Adeline Blewett</i>	10. <i>-</i>	11. <i>-</i>	12. <i>-</i>	13. <i>-</i>	14. <i>-</i>	15. <i>Dr. Canfield</i>	16. <i>Father</i>	17. <i>Yes</i>	18. <i>Lloyd Pryce Jones</i>	<i>Lingersoll</i>	<i>Sept. 20th. 1909</i>		
1. <i>Andrew Mary Christina</i>	2. <i>Mar. 10th. 1908</i>	3. <i>Alma St. Lingersoll</i>	4. <i>Female</i>	5. <i>Yes</i>	6. <i>Christopher Andrews</i>	7. <i>Laborer</i>	8. <i>Margaret French</i>	9. <i>Wm. Kilpatrick</i>	10. <i>Woodstock</i>	11. <i>April end. 1908</i>	12. <i>-</i>	13. <i>Wm. Kilpatrick</i>	14. <i>Housewife</i>	15. <i>Dr. Rogers</i>	16. <i>Mother</i>	17. <i>Yes</i>	18. <i>Margaret Andrews</i>	<i>Lingersoll</i>	<i>Sept. 20th. 1909</i>	
1. <i>Sawyer Austin Ray Cornell</i>	2. <i>Aug. 29th. 1909</i>	3. <i>St. James St. Lingersoll</i>	4. <i>Male</i>	5. <i>Yes</i>	6. <i>Austin Ray Cornell</i>	7. <i>Farmer</i>	8. <i>Mary Ethel Cornell</i>	9. <i>-</i>	10. <i>Lingersoll</i>	11. <i>June 3rd. 1908</i>	12. <i>-</i>	13. <i>-</i>	14. <i>-</i>	15. <i>Dr. Williams</i>	16. <i>Father</i>	17. <i>Yes</i>	18. <i>A. Austin Hayes</i>	<i>Lingersoll</i>	<i>Sept. 25th. 1909</i>	
1. <i>Bellow Albert Whitney</i>	2. <i>Sept 5th. 1909</i>	3. <i>St. James St. Lingersoll</i>	4. <i>Male</i>	5. <i>Yes</i>	6. <i>John Albert Bellow</i>	7. <i>Painter</i>	8. <i>Mahalia Seaton</i>	9. <i>-</i>	10. <i>Lingersoll</i>	11. <i>Apr. 10th. 1906</i>	12. <i>-</i>	13. <i>-</i>	14. <i>-</i>	15. <i>Dr. McKay</i>	16. <i>Father</i>	17. <i>Yes</i>	18. <i>John Albert Bellow</i>	<i>Lingersoll</i>	<i>Sept. 29th. 1909</i>	

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending *Sept. 30th. 1909*
 Given under my hand this *14th* day of *October* A.D. *1909*

BIRTHS

County of *Offord*

Division of *Sugersall*

	Form No. 1st	Form No. 2nd	Form No. 3rd
1. Give the full name of the child born?	<i>Waters Joseph Lawrence</i>	<i>Maas Laura Eleanor</i>	<i>Dammill John Joseph</i>
2. When was the child born?	<i>Sept 5th 1905</i>	<i>Sept 24th 1905</i>	<i>Sept 11th 1905</i>
3. In a hospital give its name.	—	—	—
4. Sex of child?	<i>Male</i>	<i>Female</i>	<i>Male</i>
5. Were the parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
6. Name of Father.	<i>Dammill Waters</i>	<i>George Ferdinand Maas</i>	<i>Thomas Cecil Dammill</i>
7. Occupation of Father?	<i>Blacksmith</i>	<i>Dentist</i>	<i>Teacher</i>
8. Maiden Name of Mother.	<i>Mary Roney</i>	<i>Elizabeth Dunning Allen</i>	<i>Mabel Strawbridge</i>
9. Has the mother been married before?	—	—	—
10. Name of the parents married?	<i>Stratford</i>	<i>Kingston</i>	<i>Sugersall</i>
11. When were they married?	<i>Sept 18th 1905</i>	<i>Sept 5th 1906</i>	<i>Mar. 2nd 1905</i>
12. If not married give full name of Mother.	—	—	—
13. Is the child single, or a Widow?	—	—	—
14. Has the child any occupation?	—	—	—
15. Name of the physician attending.	<i>Dr. Calveridge</i>	<i>Dr. McKay</i>	<i>Dr. Calveridge</i>
16. Name of the relation to child.	<i>Father</i>	<i>Father</i>	<i>Father</i>
17. Was the child born in a hospital?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
18. Certified by	<i>Dammill Waters</i> <i>Sugersall</i> <i>Oct 2nd 1905</i>	<i>Geo. J. Maas</i> <i>Sugersall</i> <i>Oct 1st 1905</i>	<i>Thos Cecil Dammill</i> <i>Sugersall</i> <i>Oct 13th 1905</i>
19. Give the full name of the child born?	<i>George William Dammill</i>	<i>Collins Mary Joseph Eleanor</i>	<i>Oullin Thomas Harry</i>
20. When was the child born?	<i>Oct 22nd 1905</i>	<i>Sept 20th 1905</i>	<i>Sept 30th 1905</i>
21. In a hospital give its name.	—	—	—
22. Sex of child?	<i>Male</i>	<i>Female</i>	<i>Male</i>
23. Were the parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
24. Name of Father.	<i>George William Dammill</i>	<i>William Henry Collins</i>	<i>Henry B. Oullin</i>
25. Occupation of Father?	<i>Farmer</i>	<i>Manager of Brewery</i>	<i>Watchman</i>
26. Maiden Name of Mother.	<i>Elizabeth Dammill</i>	<i>Carrie Parks</i>	<i>Elizabeth Ann Dunning</i>
27. Has the mother been married before?	—	—	—
28. Name of the parents married?	<i>Carl Herman. Mich</i>	<i>Stratford</i>	<i>Beachville</i>
29. When were they married?	<i>June 14th 1906</i>	<i>July 1st 1905</i>	<i>May 30th 1902</i>
30. If not married give full name of Mother.	—	—	—
31. Is the child single, or a Widow?	—	—	—
32. Has the child any occupation?	—	—	—
33. Name of the physician attending.	<i>Dr. Kelly</i>	<i>Dr. Kelly</i>	<i>Dr. Calveridge</i>
34. Name of the relation to child.	<i>Father</i>	<i>Father</i>	<i>Father</i>
35. Was the child born in a hospital?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
36. Certified by	<i>George William Dammill</i> <i>Sugersall</i> <i>Oct 22nd 1905</i>	<i>Wm Henry Collins</i> <i>Sugersall</i> <i>Oct 22nd 1905</i>	<i>Henry B. Oullin</i> <i>Sugersall</i> <i>Oct 29th 1905</i>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending *Dec 31st* 1905
 Given under my hand this *12th* day of *Jan* A.D. 1906
W. Dammill Division Registrar *Sugersall*

My mulvey mulney, benjamin crosby
 Frederick william nancekivell, jennie
 Johnson waterworks, edith tunc, annetta
 murray, william

BIRTHS

County of Jefferson Division of Sugarsale

	Surname first	Surname first	Surname first
What is the full name of child?	1. <u>Caroline Sylvia Beard</u>	1. <u>Abella Benjamin Creaky</u>	1. <u>Marcelline Frederic W...</u>
When was the child born?	2. <u>August 29th 1905</u>	2. <u>Sept 18th 1905</u>	2. <u>Sept 25th 1905</u>
Where was the child born? Street number or Con- cession and Lot	3. <u>If in a hospital give its name.</u>	3. <u>If in a hospital give its name.</u>	3. <u>If in a hospital give its name.</u>
Male or Female	4. <u>Female</u>	4. <u>Male</u>	4. <u>Male</u>
Are the parents married?	5. <u>Yes</u>	5. <u>Yes</u>	5. <u>Yes</u>
Full name of Father	6. <u>George Thomas Cooper</u>	6. <u>Speck Ezra Cable</u>	6. <u>William F. Nancekivell</u>
Occupation of Father?	7. <u>Farmer</u>	7. <u>Farmer</u>	7. <u>Farmer</u>
Full Maiden Name of Mother	8. <u>Andy Mulvey</u>	8. <u>Caro William Meyer</u>	8. <u>Jennie Anderson</u>
If she has been more than once married give name of former husband, or husbands	9. <u>-</u>	9. <u>-</u>	9. <u>-</u>
Where were the parents married?	10. <u>England</u>	10. <u>Sugarsale</u>	10. <u>East Georgia</u>
When were they married?	11. <u>Aug 2nd 1890</u>	11. <u>Nov 20th 1899</u>	11. <u>1899</u>
If not married give full Name of Mother	12. <u>-</u>	12. <u>-</u>	12. <u>-</u>
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13. <u>-</u>	13. <u>-</u>	13. <u>-</u>
What is her occupation?	14. <u>-</u>	14. <u>-</u>	14. <u>-</u>
Name of Physician attend- ing	15. <u>Dr. Kelly</u>	15. <u>Dr. Kelly</u>	15. <u>Dr. Rogers</u>
Your relation to child	16. <u>Mother</u>	16. <u>Father</u>	16. <u>Mother</u>
Were you in house at time of Birth?	17. <u>Yes</u>	17. <u>Yes</u>	17. <u>Yes</u>
Certified by	18. <u>Mrs. Andy Cooper</u>	18. <u>Speck Ezra Cable</u>	18. <u>Mrs. W. F. Nancekivell</u>
Address	<u>Sugarsale</u>	<u>Sugarsale</u>	<u>Sugarsale</u>
Date	<u>Oct 29th 1905</u>	<u>Oct 29th 1905</u>	<u>Oct 29th 1905</u>
Remarks			
What is the full name of child?	1. <u>William W. James</u>	1. <u>George Annette Margaret</u>	1. <u>Murray Helen J.</u>
When was the child born?	2. <u>Oct 26th 1905</u>	2. <u>Oct 22nd 1905</u>	2. <u>Oct 12th 1905</u>
Where was the child born? Street number or Con- cession and Lot	3. <u>If in a hospital give its name.</u>	3. <u>If in a hospital give its name.</u>	3. <u>If in a hospital give its name.</u>
Male or Female	4. <u>Male</u>	4. <u>Female</u>	4. <u>Female</u>
Are the parents married?	5. <u>Yes</u>	5. <u>Yes</u>	5. <u>Yes</u>
Full name of Father	6. <u>Samuel James Waterman</u>	6. <u>Frederic Lewis Magee</u>	6. <u>William Murray</u>
Occupation of Father?	7. <u>Business</u>	7. <u>Farmer</u>	7. <u>Farmer</u>
Full Maiden Name of Mother	8. <u>Edith S. James</u>	8. <u>Mary Ann B. B...</u>	8. <u>Eileen Carroll</u>
If she has been more than once married give name of former husband, or husbands	9. <u>-</u>	9. <u>-</u>	9. <u>-</u>
Where were the parents married?	10. <u>East Jefferson</u>	10. <u>East Jefferson, Mich</u>	10. <u>Hamilton</u>
When were they married?	11. <u>Aug 11th 1897</u>	11. <u>June 11th 1906</u>	11. <u>July 1st 1900</u>
If not married give full Name of Mother	12. <u>-</u>	12. <u>-</u>	12. <u>-</u>
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13. <u>-</u>	13. <u>-</u>	13. <u>-</u>
What is her occupation?	14. <u>-</u>	14. <u>-</u>	14. <u>-</u>
Name of Physician attend- ing	15. <u>Dr. Kelly</u>	15. <u>Dr. Kelly</u>	15. <u>Dr. Williams</u>
Your relation to child	16. <u>Father</u>	16. <u>Father</u>	16. <u>Mother</u>
Were you in house at time of Birth?	17. <u>Yes</u>	17. <u>Yes</u>	17. <u>Yes</u>
Certified by	18. <u>S. J. Waterman</u>	18. <u>Frederic L. Magee</u>	18. <u>Mrs. W. F. Nancekivell</u>
Address	<u>Sugarsale</u>	<u>Sugarsale</u>	<u>Sugarsale</u>
Date	<u>Nov 12th 1905</u>	<u>Nov 12th 1905</u>	<u>Nov 12th 1905</u>
Remarks			

BIRTHS

County of *Jefferson*

Division of *Louisiana*

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
What is the full name of child?	<i>William Miller Thomas Augustine</i>	<i>Birns</i>	<i>Joseph Joseph Martin</i>																
When was the child born?	<i>Nov 14th 1904</i>	<i>Nov 17th 1904</i>	<i>Oct 21st 1904</i>																
Where was the child born? Street number or Concession and Loc.																			
Male or Female.	<i>Female</i>	<i>Female</i>	<i>Male</i>																
Are the parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>																
Full name of Father.	<i>William Miller</i>	<i>Michael John Birns</i>	<i>Federick B. Foster</i>																
Occupation of Father?	<i>Farmer</i>	<i>Farmer</i>	<i>Machinist</i>																
Full Maiden Name of Mother.	<i>Christine Christine Andersen</i>	<i>Catherine Wilderspin</i>	<i>Margaret Sherman</i>																
If she has been more than once married give names of former husband, or husbands.																			
Where were the parents married?	<i>Louisiana</i>	<i>Louisiana</i>	<i>Louisiana</i>																
When were they married?	<i>16 years ago</i>	<i>Aug 1st 1902</i>	<i>Aug 2nd 1902</i>																
If not married give full Name of Mother.																			
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.																			
What is her occupation?																			
Name of Physician attending.	<i>Dr. Coleridge</i>	<i>Dr. Coleridge</i>	<i>Dr. Neff</i>																
Your relation to child.	<i>Father</i>	<i>Father</i>	<i>Father</i>																
Were you in home at time of birth?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>																
Certified by	<i>Wm Miller</i>	<i>W. J. Birns</i>	<i>F. B. Foster</i>																
Address	<i>Louisiana</i>	<i>Louisiana</i>	<i>Louisiana</i>																
Date	<i>Nov 15th 1904</i>	<i>Nov 17th 1904</i>	<i>Nov 21st 1904</i>																
Remarks																			

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
What is the full name of child?	<i>William Miller Ralph Rager</i>	<i>Edmonds Mary Emerau</i>	<i>Staples John Albert Wesley</i>																
When was the child born?	<i>Nov 2nd 1904</i>	<i>Nov 14th 1904</i>	<i>Nov 14th 1904</i>																
Where was the child born? Street number or Concession and Loc.			<i>Charleston</i>																
Male or Female.	<i>Male</i>	<i>Male</i>	<i>Male</i>																
Are the parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>																
Full name of Father.	<i>Walker Omar Tompkins</i>	<i>Joseph Edmonds</i>	<i>Wm James Wesley Staples</i>																
Occupation of Father?	<i>Miller</i>	<i>Machinist</i>	<i>Machinist</i>																
Full Maiden Name of Mother.	<i>Edith Mary Rager</i>	<i>Elizabeth A. Volme</i>	<i>Agnes Mary Edmonds</i>																
If she has been more than once married give names of former husband, or husbands.																			
Where were the parents married?	<i>Louisiana</i>	<i>Louisiana</i>	<i>Louisiana</i>																
When were they married?	<i>May 11th 1904</i>	<i>Dec 21st 1901</i>	<i>May 9th 1900</i>																
If not married give full Name of Mother.																			
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.																			
What is her occupation?																			
Name of Physician attending.	<i>Dr. Rager</i>	<i>Dr. Neff</i>	<i>Dr. Rager</i>																
Your relation to child.	<i>Maternal</i>	<i>Father</i>	<i>Father</i>																
Were you in home at time of birth?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>																
Certified by	<i>Wm O. Tompkins</i>	<i>Joseph Edmonds</i>	<i>W. J. W. Staples</i>																
Address	<i>Louisiana</i>	<i>Louisiana</i>	<i>Louisiana</i>																
Date	<i>Nov 7th 1904</i>	<i>Dec 11th 1904</i>	<i>Dec 14th 1904</i>																
Remarks																			

I hereby certify the foregoing to be the true and correct copies of all Births returned to me for the quarter year ending *Dec 31st* 1904
 Given under my hand this *12th* day of *Nov* A.D. 1904
 Division Registrar of *Louisiana*

BIRTHS

John Anderson McLeod, John James McLeod, Helen
 Agnes Sutherland

County of *Alford*

Division of *Suzerath*

	Surname First	Surname First	Surname First
What is the full name of child?	1. <i>McLeod John Anderson</i>	1	1
When was the child born?	2. <i>Dec 9th 1908</i>	2	2
Where was the child born? Street number or Con- cession and Loc.	3. <i>Merrett St. Suzerath</i>	3	3 If in a hospital give its name.
Male or Female.	4. <i>Male</i>	4	4
Are the parents married?	5. <i>Yes</i>	5	5
Full name of Father.	6. <i>John James McLeod</i>	6	6
Occupation of Father?	7. <i>Merchant</i>	7	7
Full Maiden Name of Mother.	8. <i>Helen Agnes Sutherland</i>	8	8
If she has been more than once married give name of former husband, or husbands.	9. <i>—</i>	9	9
Where were the parents married?	10. <i>East Java</i>	10	10
When were they married?	11. <i>Oct. 16th 1907</i>	11	11
If not married give full Name of Mother.	12. <i>—</i>	12	12
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13. <i>—</i>	13	13
What is her occupation?	14. <i>—</i>	14	14
Name of Physician attend- ing.	15. <i>Dr. Rogers</i>	15	15
Your relation to child.	16. <i>Wife</i>	16	16
Were you in house at time of birth?	17. <i>Yes</i>	17	17
Delivered by	18. <i>John J. McLeod</i>	18	18
Address	<i>Suzerath</i>		
Date	<i>Dec 22nd 1908</i>		
Remarks			

	Surname First	Surname First	Surname First
What is the full name of child?	1.	1	1
When was the child born?	2	2	2
Where was the child born? Street number or Con- cession and Loc.	3 If in a hospital give its name.	3	3 If in a hospital give its name.
Male or Female.	4	4	4
Are the parents married?	5	5	5
Full name of Father.	6	6	6
Occupation of Father?	7	7	7
Full Maiden Name of Mother.	8	8	8
If she has been more than once married give name of former husband, or husbands.	9	9	9
Where were the parents married?	10	10	10
When were they married?	11	11	11
If not married give full Name of Mother.	12	12	12
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13	13	13
What is her occupation?	14	14	14
Name of Physician attend- ing.	15	15	15
Your relation to child.	16	16	16
Were you in house at time of birth?	17	17	17
Delivered by	18	18	18
Address			
Date			
Remarks			

Dec 21st

BIRTHS

County of *Jefferson*

Division of *Surgeon*

	Surname first	Surname first	Surname first
1 What is the full name of child?	<i>Marye Jean Meyers</i>	<i>Ann Marie Bell</i>	<i>Robert Ralph Williams</i>
2 When was the child born?	<i>Sept 20th 1909</i>	<i>Sept 14th 1909</i>	<i>Sept 23rd 1909</i>
3 Where was the child born? Street number or Concession and Lot.	<i>Osceola St</i>	<i>Osceola St</i>	<i>Osceola St</i>
4 Male or Female	<i>Female</i>	<i>Male</i>	<i>Male</i>
5 Are the parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
6 Full name of Father	<i>George Rubin Meyers</i>	<i>William George Kern</i>	<i>William Stanley Butler</i>
7 Occupation of Father?	<i>Car Operator</i>	<i>Bar Manager</i>	<i>Drayman</i>
8 Full Maiden Name of Mother	<i>Georgia M. Bulize</i>	<i>Edna Marie Bell</i>	<i>Blanche Elena Purcell</i>
9 If she has been more than once married give name of former husband, or husbands.	-	-	-
10 Where were the parents married?	<i>West of here</i>	<i>Surgeon</i>	<i>Arkansas Out</i>
11 When were they married?	<i>Oct 14th 1905</i>	<i>June 15th 1905</i>	<i>Aug 14th 1907</i>
12 If not married give full Name of Mother	-	-	-
13 Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
14 What is her occupation?	-	-	-
15 Name of Physician attending	<i>Dr. Williams</i>	<i>Dr. Williams</i>	<i>Dr. Williams</i>
16 Your relation to child	<i>Father</i>	<i>Father</i>	<i>Father</i>
17 Were you in house at time of birth?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
18 Certified by	<i>G. B. Meyers</i>	<i>W. Kern</i>	<i>W. Butler</i>
19 Address	<i>Surgeon</i>	<i>Surgeon</i>	<i>Surgeon</i>
20 Date	<i>Oct 7th 1909</i>	<i>Oct 12th 1909</i>	<i>Oct 14th 1909</i>
21 Remarks			

	Surname first	Surname first	Surname first
1 What is the full name of child?	<i>Stephan Submyllkatla</i>	<i>Burphy Evelyn</i>	<i>Frank Sanders</i>
2 When was the child born?	<i>Sept 16th 1909</i>	<i>Oct 2nd 1909</i>	<i>Oct 16th 1909</i>
3 Where was the child born? Street number or Concession and Lot.	<i>Osceola St</i>	<i>Osceola St</i>	<i>Osceola St</i>
4 Male or Female	<i>Male</i>	<i>Female</i>	<i>Female</i>
5 Are the parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
6 Full name of Father	<i>Wm John Speer</i>	<i>David Burphy</i>	<i>Charles Crawford</i>
7 Occupation of Father?	<i>Wagoner</i>	<i>Wagoner</i>	<i>Shipping Clerk</i>
8 Full Maiden Name of Mother	<i>Lydia Jennings Speer</i>	<i>Biggie Bauerman</i>	<i>Martha Clark</i>
9 If she has been more than once married give name of former husband, or husbands.	-	-	-
10 Where were the parents married?	<i>Wagoner</i>	<i>Surgeon</i>	<i>Wagoner</i>
11 When were they married?	<i>Dec 14th 1908</i>	<i>Apr 26th 1902</i>	<i>July 19th 1900</i>
12 If not married give full Name of Mother	-	-	-
13 Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
14 What is her occupation?	-	-	-
15 Name of Physician attending	<i>Dr. Rogers</i>	<i>Dr. Confield</i>	<i>Dr. Confield</i>
16 Your relation to child	<i>Wagoner</i>	<i>None</i>	<i>None</i>
17 Were you in house at time of birth?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
18 Certified by	<i>Lydia Jennings Speer</i>	<i>Dr. Confield</i>	<i>Dr. Confield</i>
19 Address	<i>Surgeon</i>	<i>Surgeon</i>	<i>Surgeon</i>
20 Date	<i>Oct 16th 1909</i>	<i>Oct 23rd 1909</i>	<i>Oct 26th 1909</i>
21 Remarks			

What is the full name of child?	When was the child born?	If in a hospital give the name of the hospital and Loc.	Sex of Child.	Are the parents married?	Full name of Father.	Occupation of Father?	Full Medical Name of Mother.	If she has been more than once married give names of former husbands, or husband.	When were the parents married?	When were they married?	If not married give full name of Mother.	Is she single, or a Widow, or a wife, and date of husband's death.	What is her occupation?	Name of Physician attending.	Your relation to child.	Where born to house at large of birth?	Declared by.	Address.	Date.	Signature.
Sherry James	Oct 24th 1870	At St. George's Hospital	M	Yes	James Sherry	Labourer	Ann Sherry	None	1870	1870	Ann Sherry	Widow	None	Dr. Mackay	Dr. Mackay	At St. George's Hospital	James Sherry	Oct 24th 1870	James Sherry	
James James	Oct 24th 1870	At St. George's Hospital	M	Yes	James James	Labourer	Ann James	None	1870	1870	Ann James	Widow	None	Dr. Mackay	Dr. Mackay	At St. George's Hospital	James James	Oct 24th 1870	James James	
James James	Oct 24th 1870	At St. George's Hospital	M	Yes	James James	Labourer	Ann James	None	1870	1870	Ann James	Widow	None	Dr. Mackay	Dr. Mackay	At St. George's Hospital	James James	Oct 24th 1870	James James	
James James	Oct 24th 1870	At St. George's Hospital	M	Yes	James James	Labourer	Ann James	None	1870	1870	Ann James	Widow	None	Dr. Mackay	Dr. Mackay	At St. George's Hospital	James James	Oct 24th 1870	James James	
James James	Oct 24th 1870	At St. George's Hospital	M	Yes	James James	Labourer	Ann James	None	1870	1870	Ann James	Widow	None	Dr. Mackay	Dr. Mackay	At St. George's Hospital	James James	Oct 24th 1870	James James	

BIRTHS

County of Jefferson

Division of Ingersoll

	Surname first	Surname first	Surname first
What is the full name of child?	1 <u>Wright John Ernest</u>	1 <u>Bauer Helen Mary</u>	1 <u>Dunlop Oscar Russell</u>
When was the child born?	2 <u>Nov 15th 1909</u>	2 <u>Nov 22nd 1909</u>	2 <u>Nov 14th 1909</u>
Where was the child born? Street number or Concession and Lot.	3 <u>King Arrow St Ingersoll</u>	3 <u>Person St Ingersoll</u>	3 <u>Person St Ingersoll</u>
Male or Female.	4 <u>Male</u>	4 <u>Female</u>	4 <u>Male</u>
Are the parents married?	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>Yes</u>
Full name of Father.	6 <u>Ellen Paul Wright</u>	6 <u>Harry Thomas Bauer</u>	6 <u>Edgar Dunlop</u>
Occupation of Father?	7 <u>Butcher</u>	7 <u>Teacher</u>	7 <u>Teacher</u>
Full Maiden Name of Mother.	8 <u>Rephzillah Rogers</u>	8 <u>Esther Ethel Berry</u>	8 <u>Mary Elizabeth Dunstan</u>
If she has been more than once married give names of former husband, or husbands.	9 <u>-</u>	9 <u>-</u>	9 <u>-</u>
Where were the parents married?	10 <u>Ingersoll</u>	10 <u>Ingersoll</u>	10 <u>Ingersoll</u>
When were they married?	11 <u>July 26th 1906</u>	11 <u>Aug 21st 1905</u>	11 <u>June 28th 1906</u>
If not married give full Name of Mother.	12 <u>-</u>	12 <u>-</u>	12 <u>-</u>
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13 <u>-</u>	13 <u>-</u>	13 <u>-</u>
What is her occupation?	14 <u>-</u>	14 <u>-</u>	14 <u>-</u>
Name of Physician attending.	15 <u>Dr. Calderidge</u>	15 <u>Dr. McKay</u>	15 <u>Dr. Rogers</u>
Your relation to child.	16 <u>Father</u>	16 <u>Father</u>	16 <u>Father</u>
Were you in house at time of Birth?	17 <u>Yes</u>	17 <u>Yes</u>	17 <u>Yes</u>
Certified by	18 <u>Ellen Paul Wright</u>	18 <u>Harry T Bauer</u>	18 <u>Edgar Dunlop</u>
Address	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Date	<u>Nov 22nd 1909</u>	<u>Nov 30th 1909</u>	<u>Dec 1st 1909</u>
Remarks			
What is the full name of child?	1 <u>Bayne Nelson Arthur</u>	1 <u>Stephenson Ethel Violet</u>	1 <u>Scott Marjorie Merion</u>
When was the child born?	2 <u>Nov 20th 1909</u>	2 <u>Nov 22nd 1909</u>	2 <u>Nov 21st 1909</u>
Where was the child born? Street number or Concession and Lot.	3 <u>Charles St Ingersoll</u>	3 <u>King St Ingersoll</u>	3 <u>Person St Ingersoll</u>
Male or Female.	4 <u>Male</u>	4 <u>Female</u>	4 <u>Male</u>
Are the parents married?	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>Yes</u>
Full name of Father.	6 <u>John Bayne</u>	6 <u>Geo. Milton Stephenson</u>	6 <u>Merton Edwin Scott</u>
Occupation of Father?	7 <u>Business</u>	7 <u>Teacher</u>	7 <u>Coal Dealer</u>
Full Maiden Name of Mother.	8 <u>Margaret McCallan</u>	8 <u>Mary Esther Crayton</u>	8 <u>Isabella Jane Smith</u>
If she has been more than once married give names of former husband, or husbands.	9 <u>-</u>	9 <u>-</u>	9 <u>-</u>
Where were the parents married?	10 <u>Ingersoll</u>	10 <u>Cambridge</u>	10 <u>Ingersoll</u>
When were they married?	11 <u>-</u>	11 <u>-</u>	11 <u>-</u>
If not married give full Name of Mother.	12 <u>-</u>	12 <u>-</u>	12 <u>-</u>
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13 <u>-</u>	13 <u>-</u>	13 <u>-</u>
What is her occupation?	14 <u>-</u>	14 <u>-</u>	14 <u>-</u>
Name of Physician attending.	15 <u>None</u>	15 <u>Dr. McKay</u>	15 <u>Dr. Rogers</u>
Your relation to child.	16 <u>Grandfather</u>	16 <u>Mother</u>	16 <u>Father</u>
Were you in house at time of Birth?	17 <u>Yes</u>	17 <u>Yes</u>	17 <u>Yes</u>
Certified by	18 <u>M. McCallan</u>	18 <u>Mary Esther Stephenson</u>	18 <u>M. E. Scott</u>
Address	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Date	<u>Dec 17th 1909</u>	<u>Dec 24th 1909</u>	<u>Dec 24th 1909</u>
Remarks			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending _____ day of _____

BIRTHS

County of Jefferson

Division of Lingersale

	Surname first	Surname first	Surname first
What is the full name of child?	DePomanti Emma Mildred	Wurker Marion Annie May	Longfield James Ross
When was the child born?	Jan 25th 1910	Jan 14th 1910	Jan 14th 1910
Where was the child born? Street number or Con- cession and Lot.	Waller St Lingersale	Waller St Lingersale	Waller St Lingersale
Male or Female.	Female	Female	Male
Are the parents married?	Yes	Yes	Yes
Full name of Father.	John Henry DePomanti	Federick Wurker	Ernest Longfield
Occupation of Father?	Welder	Welder	Welder
Full Maiden Name of Mother.	Maria Child	May Emma Buckley	Melissa Fitzpatrick
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	Lingersale	England	Barreville
When were they married?	Mar 20th 1908	Oct 14th 1900	Mar 27th 1900
If not married give full Name of Mother.	-	-	-
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attend- ing.	Dr. Velt	Dr. Velt	Dr. Walker
Your relation to child.	Father	Mother	Mother
Were you in house at time of Birth?	Yes	Yes	Yes
Certified by	J. H. DePomanti	Wm. Fred Wurker	Melissa Longfield
Address	Lingersale	Lingersale	Lingersale
Date	Jan 25th 1910	Jan 14th 1910	Jan 14th 1910
Remarks			

	Surname first	Surname first	Surname first
What is the full name of child?	Crawford Bertie	Harrison Margaret Ellen	Burlow George Wilbur
When was the child born?	Feb 11th 1910	Jan 17th 1910	Jan 10th 1910
Where was the child born? Street number or Con- cession and Lot.	Waller St Lingersale	Waller St Lingersale	Waller St Lingersale
Male or Female.	Female	Female	Male
Are the parents married?	Yes	Yes	Yes
Full name of Father.	William Stanley Crawford	William Harrison	Charles Edwin Burlow
Occupation of Father?	Traveler	Weld Surgeon	Welder
Full Maiden Name of Mother.	Charles Berne	Edith Maria Harris	Emily Blackwell
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	Barreville	Barreville	England
When were they married?	Apr 20th 1908	July 14th 1909	Aug 20th 1908
If not married give full Name of Mother.	-	-	-
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attend- ing.	Dr. Williams	Dr. Rogers	Dr. Velt
Your relation to child.	Father	Father	Father
Were you in house at time of Birth?	Yes	Yes	Yes
Certified by	W. S. Crawford	W. J. Harrison	Chas. E. Burlow
Address	Lingersale	Lingersale	Lingersale
Date	Feb 11th 1910	Jan 17th 1910	Jan 10th 1910
Remarks			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1910
 Given under my hand this 14th day of April A.D. 1910
Wm. Fred Wurker
 Division Registrar of Lingersale

BIRTHS

William Henry Bowman, Harry Stanley Bowman, Louise Maud Ross, Alberta
 Elizabeth Louise Brown, Edward John Robson, Emma Minerva Marsh, William
 Frank John Brown, Jean, Scott, & Co.

H. B. - Record all still births as births, as well as deaths.

County of Offord Division of Sudbury

	Surname first	Surname first	Surname first
What is the full name of child?	<u>Bourman William Henry</u>	<u>Edwards Elizabeth</u>	<u>Ellen William Mark</u>
When was the child born? Where was the child born? Street number or Concession and Lot.	<u>July 19th 1910</u> <u>St. Mary St</u> <u>If in a hospital give its name</u>	<u>Mar 8th 1910</u> <u>Charles St</u> <u>If in a hospital give its name</u>	<u>Mar 13th 1910</u> <u>Victoria St</u> <u>If in a hospital give its name</u>
Male or Female.	<u>Male</u>	<u>Female</u>	<u>Male</u>
Are the parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>Henry Stanley Bourman</u>	<u>Edward John Edwards</u>	<u>George Allan</u>
Occupation of Father?	<u>Clerk</u>	<u>Insurance</u>	<u>Chief</u>
Full Maiden Name of Mother.	<u>Louise Maud Ross</u>	<u>Emma Minerva Marsh</u>	<u>Winnie Kibler</u>
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	<u>London</u>	<u>Brandon</u>	<u>Bank Street</u>
When were they married?	<u>Sept 20th 1909</u>	<u>Aug 11th 1904</u>	<u>July 27th 1909</u>
If not married give full Name of Mother.	-	-	-
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	<u>Dr. Kelly</u>	<u>Dr. Kelly</u>	<u>Dr. Williams</u>
Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Father</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>Henry Stanley Bourman</u>	<u>E. J. Edwards</u>	<u>George Allan</u>
Address	<u>Sudbury</u>	<u>Sudbury</u>	<u>Sudbury</u>
Date	<u>Mar 22nd 1910</u>	<u>Mar 8th 1910</u>	<u>Mar 21st 1910</u>
Remarks			
What is the full name of child?	1	1	1
When was the child born? Where was the child born? Street number or Concession and Lot.	2	2	2
Male or Female.	3	3	3
Are the parents married?	4	4	4
Full name of Father.	5	5	5
Occupation of Father?	6	6	6
Full Maiden Name of Mother.	7	7	7
If she has been more than once married give names of former husband, or husbands.	8	8	8
Where were the parents married?	9	9	9
When were they married?	10	10	10
If not married give full Name of Mother.	11	11	11
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	12	12	12
What is her occupation?	13	13	13
Name of Physician attending.	14	14	14
Your relation to child.	15	15	15
Were you in house at time of Birth?	16	16	16
Certified by	17	17	17
Address	18	18	18
Date			
Remarks			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1910
 Given under my hand this 22nd day of April A.D. 1910
 Division Registrar of Sudbury

BIRTHS

Married in 1900...
 for...
 hold...
 game...
 James...

County of Jefferson

Division of Public Health

to 1910

No.	Surname and Name of Child	Date of Birth	Sex
1	Briggs, Margaret	Jan 10th 1910	Female
2	Wallace, [illegible]	Jan 5th 1910	Male
3	Shanks, Thomas	Jan 5th 1910	Male
4	[illegible]	[illegible]	[illegible]
5	[illegible]	[illegible]	[illegible]
6	Alfred Bright	[illegible]	Male
7	William [illegible]	[illegible]	Male
8	Jessie Ross	[illegible]	Female
9	[illegible]	[illegible]	[illegible]
10	[illegible]	[illegible]	[illegible]
11	[illegible]	[illegible]	[illegible]
12	[illegible]	[illegible]	[illegible]
13	[illegible]	[illegible]	[illegible]
14	[illegible]	[illegible]	[illegible]
15	Dr. McKay	[illegible]	Male
16	[illegible]	[illegible]	[illegible]
17	[illegible]	[illegible]	[illegible]
18	Alfred Bright	Jan 10th 1910	Male
19	[illegible]	[illegible]	[illegible]
20	[illegible]	[illegible]	[illegible]
21	[illegible]	[illegible]	[illegible]
22	[illegible]	[illegible]	[illegible]
23	[illegible]	[illegible]	[illegible]
24	[illegible]	[illegible]	[illegible]
25	[illegible]	[illegible]	[illegible]
26	[illegible]	[illegible]	[illegible]
27	[illegible]	[illegible]	[illegible]
28	[illegible]	[illegible]	[illegible]
29	[illegible]	[illegible]	[illegible]
30	[illegible]	[illegible]	[illegible]
31	[illegible]	[illegible]	[illegible]
32	[illegible]	[illegible]	[illegible]
33	[illegible]	[illegible]	[illegible]
34	[illegible]	[illegible]	[illegible]
35	[illegible]	[illegible]	[illegible]
36	[illegible]	[illegible]	[illegible]
37	[illegible]	[illegible]	[illegible]
38	[illegible]	[illegible]	[illegible]
39	[illegible]	[illegible]	[illegible]
40	[illegible]	[illegible]	[illegible]
41	[illegible]	[illegible]	[illegible]
42	[illegible]	[illegible]	[illegible]
43	[illegible]	[illegible]	[illegible]
44	[illegible]	[illegible]	[illegible]
45	[illegible]	[illegible]	[illegible]
46	[illegible]	[illegible]	[illegible]
47	[illegible]	[illegible]	[illegible]
48	[illegible]	[illegible]	[illegible]
49	[illegible]	[illegible]	[illegible]
50	[illegible]	[illegible]	[illegible]

I hereby certify the foregoing to be true and correct entries of all Births returned to me for the quarter year ending March 31st 1910
 Signed under my hand this 10th day of April A.D. 1910
 Division of Public Health

BIRTHS

In smother's, ohn smother's,
we may carroll, gordon eley,
with every mary grace

County of Offord

Division of Sugersall

	Surname first	Surname first	Surname first
What is the full name of child?	1 Skinner William	1 Smothers Isabelle Dela	1 Barber Ralph Arnold
When was the child born?	2 March 2nd 1910	2 March 14th 1910	2 March 14th 1910
Where was the child born? Street number or Con- cession and Lot.	3 If in a hospital give its name Sugersall	3 If in a hospital give its name Sugersall	3 If in a hospital give its name Sugersall
Male or Female.	4 Female	4 Female	4 Male
Are the parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	6 Frank Skinner	6 John Smothers	6 Robert Barber
Occupation of Father?	7 Section man	7 Baker	7 Coalier
Full Maiden Name of Mother.	8 Rose Brettle	8 Anne Bickles	8 Annie May Cornell
If she has been more than once married give names of former husband, or husbands.	9 -	9 -	9 Harry Bryan
Where were the parents married?	10 London	10 Sugersall	10 England
When were they married?	11 Sept 13th 1907	11 Oct 20th 1902	11 April 2nd 1908
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attend- ing.	15 Dr. West	15 Dr. Canfield	15 Dr. Williams
Your relation to child	16 Father	16 Father	16 Mother
Were you in house at time of Birth?	17 Yes	17 Yes	17 Yes
Certified by	18 F. Skinner	18 John Smothers	18 Annie May Barber
Address	Sugersall	Sugersall	Sugersall
Date	April 14th 1910	April 14th 1910	April 9th 1910.
Remarks			
	Surname first	Surname first	Surname first
What is the full name of child?	1 Eley Gordon	1 Avery Mary Ruth	1 MacMillan David
When was the child born?	2 April 2nd 1910	2 March 14th 1910	2 March 29th 1910
Where was the child born? Street number or Con- cession and Lot.	3 If in a hospital give its name Sugersall	3 If in a hospital give its name Sugersall	3 If in a hospital give its name Sugersall
Male or Female.	4 Male	4 Female	4 Male
Are the parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	6 Alphonse Eley	6 Benny Avery	6 David MacMillan
Occupation of Father?	7 Agent	7 Shipping Clerk	7 Mechanic
Full Maiden Name of Mother.	8 Anna Eliza Bennett	8 Mary Grace Harris	8 Mary Marge Hutchinson
If she has been more than once married give names of former husband, or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Sugersall	10 Smithville	10 Sugersall
When were they married?	11 June 2nd 1909	11 May 2nd 1906	11 June 2nd 1909
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attend- ing.	15 Dr. Williams	15 Dr. Colbridge	15 Dr. Williams
Your relation to child.	16 Father	16 Father	16 Father
Were you in house at time of Birth?	17 Yes	17 Yes	17 Yes
Certified by	18 W. Eley	18 Benny Avery	18 David MacMillan
Address	Sugersall	Sugersall	Sugersall
Date	April 14th 1910.	April 13th 1910.	April 14th 1910
Remarks			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1910

Given under my hand this 14th day of July 1910
Division Registrar

N. B. - The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.

BIRTHS

County of Offord

Division of Sagersall

	Surname first	Surname first	Surname first
What is the full name of child?	<u>Kray Donald Courtmett</u>	<u>Dallon Gladys Eleanor</u>	<u>Loobkey Muriel Jean</u>
When was the child born?	<u>March 22nd 1910</u>	<u>March 15th 1910</u>	<u>March 2nd 1910</u>
Where was the child born? Street number or Concession and Lot.	<u>Offord St Sagersall</u>	<u>Offord St Sagersall</u>	<u>Offord St Sagersall</u>
Male or Female.	<u>Male</u>	<u>Female</u>	<u>Female</u>
Are the parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>Samuel William Kray</u>	<u>Thomas Dallon</u>	<u>Albert James Loobkey</u>
Occupation of Father?	<u>Expresman</u>	<u>Teacher</u>	<u>Machinist</u>
Full Maiden Name of Mother.	<u>Belena May Courtmett</u>	<u>Clara B. Bamberburgh</u>	<u>Bertrude Limes</u>
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	<u>Werschaye Ont</u>	<u>Delrie</u>	<u>Sagersall</u>
When were they married?	<u>June 11th 1909</u>	<u>Sept 14th 1909</u>	<u>Nov 2nd 1903</u>
If not married give full Name of Mother.	-	-	-
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	<u>Dr. Walker</u>	<u>Dr. Jeff</u>	<u>Dr. Colridge</u>
Your relation to child.	<u>Father</u>	<u>Mother</u>	<u>Father</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>W. W. Kray</u>	<u>Mrs. Dallon</u>	<u>Albert Loobkey</u>
Address	<u>Sagersall</u>	<u>Sagersall</u>	<u>Sagersall</u>
Date	<u>April 16th 1910</u>	<u>April 15th 1910</u>	<u>April 20th 1910</u>
Remarks			
What is the full name of child?	<u>Wesley Donald</u>	<u>Walter William Mary Emma</u>	<u>Norman Mildred Ellen</u>
When was the child born?	<u>April 10th 1910</u>	<u>March 22nd 1910</u>	<u>April 14th 1910</u>
Where was the child born? Street number or Concession and Lot.	<u>Concession St Sagersall</u>	<u>Concession St Sagersall</u>	<u>Concession St Sagersall</u>
Male or Female.	<u>Male</u>	<u>Female</u>	<u>Female</u>
Are the parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>Charles William Wesley</u>	<u>Walter Holmes</u>	<u>William James Norman</u>
Occupation of Father?	<u>Traveler</u>	<u>Coachman</u>	<u>Teacher</u>
Full Maiden Name of Mother.	<u>Margaret Holmes</u>	<u>Annah Buff</u>	<u>Wendell Agnes Dallon</u>
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	<u>Sagersall</u>	<u>England</u>	<u>Sagersall</u>
When were they married?	<u>June 14th 1909</u>	<u>July 26th 1908</u>	<u>July 9th 1904</u>
If not married give full Name of Mother.	-	-	-
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	<u>Dr. Williams</u>	<u>Dr. Jeff</u>	<u>Dr. Jeff</u>
Your relation to child.	<u>Child</u>	<u>Mother</u>	<u>Father</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>W. W. Kray</u>	<u>Walter Holmes</u>	<u>W. J. Norman</u>
Address	<u>Sagersall</u>	<u>Sagersall</u>	<u>Sagersall</u>
Date	<u>April 27th 1910</u>	<u>April 27th 1910</u>	<u>April 27th 1910</u>
Remarks			

BIRTHS

Schedule B.
N. B. - Record all still births as births,
as well as deaths.

County of Alford

Division of Sugersall

	Surname first	Surname first	Surname first
1	1 <u>Wheas Eleanor Margaret</u>	1 <u>Boat Frank Rex</u>	1 <u>Markham Emma Helen</u>
2	2 <u>April 1st 1910</u>	2 <u>April 1st 1910</u>	2 <u>April 10th 1910</u>
3	3 <u>Home St. Sugersall</u>	3 <u>Home St. Sugersall</u>	3 <u>East St. Sugersall</u>
4	4 <u>Female</u>	4 <u>Male</u>	4 <u>Female</u>
5	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>Yes</u>
6	6 <u>Sam Allen Wheas</u>	6 <u>Frank Boat</u>	6 <u>William Frederick Markham</u>
7	7 <u>Teacher</u>	7 <u>Gas Engineer</u>	7 <u>Drayman</u>
8	8 <u>Maud Christie</u>	8 <u>Elsie May Barber</u>	8 <u>Sarah Sales</u>
9	9 <u>-</u>	9 <u>-</u>	9 <u>-</u>
10	10 <u>New Zealand Out</u>	10 <u>England</u>	10 <u>Bradford</u>
11	11 <u>Oct 14th 1901</u>	11 <u>Sept 5th 1905</u>	11 <u>Oct 14th 1899</u>
12	12 <u>-</u>	12 <u>-</u>	12 <u>-</u>
13	13 <u>-</u>	13 <u>-</u>	13 <u>-</u>
14	14 <u>-</u>	14 <u>-</u>	14 <u>-</u>
15	15 <u>Dr. Wheas</u>	15 <u>Dr. Hef</u>	15 <u>Dr. Hef</u>
16	16 <u>Father</u>	16 <u>Father</u>	16 <u>Father</u>
17	17 <u>Yes</u>	17 <u>Yes</u>	17 <u>Yes</u>
18	18 <u>W. A. Wheas</u>	18 <u>W. A. Boat</u>	18 <u>W. A. Markham</u>
Address	<u>Sugersall</u>	<u>Sugersall</u>	<u>Sugersall</u>
Date	<u>May 2nd 1910</u>	<u>May 1st 1910</u>	<u>May 7th 1910</u>
Remarks			
1	1 <u>Wheas Carrie Irene</u>	1 <u>Wheas Bessie Vermont</u>	1 <u>Wheas Roger Robert William</u>
2	2 <u>April 19th 1910</u>	2 <u>April 22nd 1910</u>	2 <u>April 19th 1910</u>
3	3 <u>Home St. Sugersall</u>	3 <u>Home St. Sugersall</u>	3 <u>Home St. Sugersall</u>
4	4 <u>Female</u>	4 <u>Male</u>	4 <u>Male</u>
5	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>Yes</u>
6	6 <u>Robert John Heil</u>	6 <u>William Vermont Wheas</u>	6 <u>Ceter W. Wheas</u>
7	7 <u>Wheas</u>	7 <u>Carpenter</u>	7 <u>Rayberies Wheas</u>
8	8 <u>Christine Isabelle W. Heil</u>	8 <u>Barnet Miller</u>	8 <u>Mary W. Wheas</u>
9	9 <u>-</u>	9 <u>-</u>	9 <u>-</u>
10	10 <u>Sugersall</u>	10 <u>Sugersall</u>	10 <u>Sugersall</u>
11	11 <u>Oct 24th 1903</u>	11 <u>Jan 20th 1904</u>	11 <u>May 12th 1894</u>
12	12 <u>-</u>	12 <u>-</u>	12 <u>-</u>
13	13 <u>-</u>	13 <u>-</u>	13 <u>-</u>
14	14 <u>-</u>	14 <u>-</u>	14 <u>-</u>
15	15 <u>Dr. Rogers</u>	15 <u>Dr. Hef</u>	15 <u>Dr. Hef</u>
16	16 <u>Father</u>	16 <u>Father</u>	16 <u>Sister</u>
17	17 <u>Yes</u>	17 <u>No</u>	17 <u>Yes</u>
18	18 <u>R. J. Heil</u>	18 <u>William Vermont Wheas</u>	18 <u>Wheas W. Wheas</u>
Address	<u>Sugersall</u>	<u>Sugersall</u>	<u>Sugersall</u>
Date	<u>May 12th 1910</u>	<u>May 1st 1910</u>	<u>May 20th 1910</u>
Remarks			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1910

Given under my hand this 14th day of July
 Division Registrar of Sugersall

BIRTHS

County of Offord Division of Sugersall

	Surname first	Surname first	Surname first
1 What is the full name of child?	1 <u>Malice Alice Robert</u>	1 <u>Ridley Madeline Martha</u>	1 <u>Manekinnell David Kerib</u>
2 When was the child born?	2 <u>April 23rd 1910</u>	2 <u>April 2nd 1910</u>	2 <u>April 30th 1910</u>
3 Where was the child born? Street number or Concession and Loc.	3 <u>Waverley Sugersall</u>	3 <u>Waverley Sugersall</u>	3 <u>Waverley Sugersall</u>
4 Male or Female.	4 <u>Female</u>	4 <u>Female</u>	4 <u>Male</u>
5 Are the parents married?	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>Yes</u>
6 Full name of Father.	6 <u>Ernest Albert Malice</u>	6 <u>John Thomas Ridley</u>	6 <u>William J Manekinnell</u>
7 Occupation of Father?	7 <u>Hayman</u>	7 <u>Hayman</u>	7 <u>Farmer</u>
8 Full Maiden Name of Mother.	8 <u>Elizabeth Ellis</u>	8 <u>Annie Myrtle Malice</u>	8 <u>Sarah John Anderson</u>
9 If she has been more than once married give names of former husband, or husbands.	9 <u>-</u>	9 <u>-</u>	9 <u>-</u>
10 Where were the parents married?	10 <u>Sugersall</u>	10 <u>Sugersall</u>	10 <u>East Gerra</u>
11 When were they married?	11 <u>Nov 9th 1897</u>	11 <u>Oct 30th 1897</u>	11 <u>April 13th 1898</u>
12 If not married give full Name of Mother.	12 <u>-</u>	12 <u>-</u>	12 <u>-</u>
13 Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13 <u>-</u>	13 <u>-</u>	13 <u>-</u>
14 What is her occupation?	14 <u>-</u>	14 <u>-</u>	14 <u>-</u>
15 Name of Physician attending.	15 <u>Dr. Rogers</u>	15 <u>Dr. McKay</u>	15 <u>Dr. Rogers</u>
16 Your relation to child.	16 <u>Sister</u>	16 <u>Mother</u>	16 <u>Mother</u>
17 Were you in house at time of birth?	17 <u>Yes</u>	17 <u>Yes</u>	17 <u>Yes</u>
18 Certified by	18 <u>Walter Maghee</u>	18 <u>Mrs. S. Ridley</u>	18 <u>Mrs. W. J. Manekinnell</u>
19 Address	19 <u>Sugersall</u>	19 <u>Sugersall</u>	19 <u>Sugersall</u>
20 Date	20 <u>May 2nd 1910</u>	20 <u>May 2nd 1910</u>	20 <u>June 1st 1910</u>
21 Remarks			

	Surname first	Surname first	Surname first
1 What is the full name of child?	1 <u>Cray Allan</u>	1 <u>Carlisle Frederic Albert</u>	1 <u>Sallist Florence Neogh</u>
2 When was the child born?	2 <u>May 15th 1910</u>	2 <u>May 6th 1910</u>	2 <u>May 21st 1910</u>
3 Where was the child born? Street number or Concession and Loc.	3 <u>Waverley Sugersall</u>	3 <u>Carlisle St Sugersall</u>	3 <u>Waverley Sugersall</u>
4 Male or Female.	4 <u>Male</u>	4 <u>Male</u>	4 <u>Female</u>
5 Are the parents married?	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>Yes</u>
6 Full name of Father.	6 <u>John Cray</u>	6 <u>Albert Carlisle</u>	6 <u>William Lewis Sallist</u>
7 Occupation of Father?	7 <u>Hayman</u>	7 <u>Scavenger</u>	7 <u>Merchant</u>
8 Full Maiden Name of Mother.	8 <u>Sarah Billing</u>	8 <u>Sarah Cliff</u>	8 <u>Clara Maria Crakett</u>
9 If she has been more than once married give names of former husband, or husbands.	9 <u>-</u>	9 <u>-</u>	9 <u>-</u>
10 Where were the parents married?	10 <u>England</u>	10 <u>London</u>	10 <u>Southwell Ont</u>
11 When were they married?	11 <u>Nov 7th 1896</u>	11 <u>April 25th 1897</u>	11 <u>June 11th 1902</u>
12 If not married give full Name of Mother.	12 <u>-</u>	12 <u>-</u>	12 <u>-</u>
13 Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13 <u>-</u>	13 <u>-</u>	13 <u>-</u>
14 What is her occupation?	14 <u>-</u>	14 <u>-</u>	14 <u>-</u>
15 Name of Physician attending.	15 <u>Dr. McKay</u>	15 <u>Dr. McKay</u>	15 <u>Dr. Hill</u>
16 Your relation to child.	16 <u>Father</u>	16 <u>Father</u>	16 <u>Father</u>
17 Were you in house at time of birth?	17 <u>Yes</u>	17 <u>No</u>	17 <u>No</u>
18 Certified by	18 <u>John Cray</u>	18 <u>Albert Carlisle</u>	18 <u>W. L. Sallist</u>
19 Address	19 <u>Sugersall</u>	19 <u>Sugersall</u>	19 <u>Sugersall</u>
20 Date	20 <u>May 2nd 1910</u>	20 <u>June 1st 1910</u>	20 <u>June 21st 1910</u>
21 Remarks			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1910

Given under my hand this 14th day of July A.D. 1910

W. J. Sugersall
Division Registrar of Sugersall

BIRTHS

County of Offord

Division of Sagersall

	Surname first	Surname first	Surname first
1	1 <u>White Herbert Ernest Sample</u>	1 <u>Barkins Russell Maudie</u>	1 <u>Wheeler Marie Victoria</u>
2	2 <u>June 6th 1910</u>	2 <u>May 23rd 1910</u>	2 <u>May 24th 1910</u>
3	3 <u>Offord St</u>	3 <u>Offord St</u>	3 <u>Offord St</u>
4	4 <u>Male</u>	4 <u>Male</u>	4 <u>Male</u>
5	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>Yes</u>
6	6 <u>Thomas White</u>	6 <u>Robert James Miller Barkins</u>	6 <u>Edgar B. Wheeler</u>
7	7 <u>Butcher</u>	7 <u>Minister</u>	7 <u>Butcher</u>
8	8 <u>Mary Jane Sprague</u>	8 <u>Kane Maud Russell</u>	8 <u>Mary Annan</u>
9	9 <u>-</u>	9 <u>-</u>	9 <u>-</u>
10	10 <u>Paris Ont.</u>	10 <u>Leinday</u>	10 <u>Sagersall</u>
11	11 <u>-</u>	11 <u>May 20th 1903</u>	11 <u>Oct 20th 1897</u>
12	12 <u>-</u>	12 <u>-</u>	12 <u>-</u>
13	13 <u>-</u>	13 <u>-</u>	13 <u>-</u>
14	14 <u>-</u>	14 <u>-</u>	14 <u>-</u>
15	15 <u>Dr. Neff</u>	15 <u>Dr. Calverly</u>	15 <u>Dr. Neff</u>
16	16 <u>Sister</u>	16 <u>Father</u>	16 <u>Mame</u>
17	17 <u>Yes</u>	17 <u>Yes</u>	17 <u>No</u>
18	18 <u>Beard White</u>	18 <u>R. J. Mc Barkins</u>	18 <u>Mrs. J. D. Wheeler</u>
19	19 <u>Sagersall</u>	19 <u>Sagersall</u>	19 <u>Sagersall</u>
20	20 <u>June 2nd 1910</u>	20 <u>June 24th 1910</u>	20 <u>June 24th 1910</u>
21	21 <u>-</u>	21 <u>-</u>	21 <u>-</u>
1	1 <u>Danner Marion Cozz</u>	1 <u>Barley John Cameron</u>	1 <u>-</u>
2	2 <u>May 26th 1910</u>	2 <u>June 2nd 1910</u>	2 <u>-</u>
3	3 <u>Offord St</u>	3 <u>Offord St</u>	3 <u>If in a hospital give its name.</u>
4	4 <u>Female</u>	4 <u>Male</u>	4 <u>-</u>
5	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>-</u>
6	6 <u>Robert Alexander Danner</u>	6 <u>Oliver Cameron Barley</u>	6 <u>-</u>
7	7 <u>Merchant</u>	7 <u>Clerk</u>	7 <u>-</u>
8	8 <u>Cozz Holloway</u>	8 <u>Edith Maud Orance</u>	8 <u>-</u>
9	9 <u>-</u>	9 <u>-</u>	9 <u>-</u>
10	10 <u>Sagersall</u>	10 <u>West Offord</u>	10 <u>-</u>
11	11 <u>Oct 20th 1907</u>	11 <u>June 2nd 1908</u>	11 <u>-</u>
12	12 <u>-</u>	12 <u>-</u>	12 <u>-</u>
13	13 <u>-</u>	13 <u>-</u>	13 <u>-</u>
14	14 <u>-</u>	14 <u>-</u>	14 <u>-</u>
15	15 <u>Dr. Williams</u>	15 <u>Dr. Williams</u>	15 <u>-</u>
16	16 <u>Father</u>	16 <u>Father</u>	16 <u>-</u>
17	17 <u>Yes</u>	17 <u>Yes</u>	17 <u>-</u>
18	18 <u>R. A. Danner</u>	18 <u>O. C. Barley</u>	18 <u>-</u>
19	19 <u>Sagersall</u>	19 <u>Sagersall</u>	19 <u>-</u>
20	20 <u>June 2nd 1910</u>	20 <u>June 27th 1910</u>	20 <u>-</u>
21	21 <u>-</u>	21 <u>-</u>	21 <u>-</u>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1910

Given under my hand this 18th day of July A.D. 1910

W. A. Smith Division Registrar of Sagersall

* N. B. - The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.

BIRTHS

County of *Oxford*

Division of *Ingersoll*

	Surname first	Surname first	Surname first
1	What is the full name of child? <i>Theresa M. James Reynolds Pemberton</i>	1	What is the full name of child? <i>John Vernon</i>
2	When was the child born? <i>July 12th 1910</i>	2	When was the child born? <i>July 4th 1910</i>
3	Where was the child born? <i>Cherry St. Ingersoll</i>	3	Where was the child born? <i>Ballpark St. Ingersoll</i>
4	Male or Female? <i>Male</i>	4	Male or Female? <i>Male</i>
5	Are the parents married? <i>Yes</i>	5	Are the parents married? <i>Yes</i>
6	Full name of Father? <i>Frank Alfred H. Theekes</i>	6	Full name of Father? <i>Robert Terrence Pemberton</i>
7	Occupation of Father? <i>Right Watchman</i>	7	Occupation of Father? <i>Foot Maker</i>
8	Full Maiden Name of Mother? <i>Ernie Reynolds</i>	8	Full Maiden Name of Mother? <i>Lena Lena McCreary</i>
9	If she has been more than once married give names of former husband, or husbands.	9	If she has been more than once married give names of former husband, or husbands.
10	Where were the parents married? <i>Ireland</i>	10	Where were the parents married? <i>Hamilton</i>
11	When were they married? <i>July 9th 1907</i>	11	When were they married? <i>Dec 28th 1908</i>
12	If not married give full Name of Mother.	12	If not married give full Name of Mother.
13	Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13	Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.
14	What is her occupation?	14	What is her occupation?
15	Name of Physician attending. <i>Dr. Jeff</i>	15	Name of Physician attending. <i>Dr. Williams</i>
16	Your relation to child. <i>Father</i>	16	Your relation to child. <i>Mother</i>
17	Were you in house at time of Birth? <i>No</i>	17	Were you in house at time of Birth? <i>Yes</i>
18	Certified by <i>Frank A. H. Theekes</i>	18	Certified by <i>Mrs. Lena McCreary</i>
	Address <i>Ingersoll</i>		Address <i>Ingersoll</i>
	Date <i>August 1st 1910</i>		Date <i>Aug 5th 1910</i>
	Remarks		Remarks
1	What is the full name of child? <i>Smith Margaret Jean</i>	1	What is the full name of child? <i>McLennan Thomas Ralph</i>
2	When was the child born? <i>July 20th 1910</i>	2	When was the child born? <i>July 13th 1910</i>
3	Where was the child born? <i>Church St. Ingersoll</i>	3	Where was the child born? <i>Ballpark St. Ingersoll</i>
4	Male or Female? <i>Female</i>	4	Male or Female? <i>Male</i>
5	Are the parents married? <i>Yes</i>	5	Are the parents married? <i>Yes</i>
6	Full name of Father? <i>Clarence Henry Smith</i>	6	Full name of Father? <i>Thos. Rudenick McLennan</i>
7	Occupation of Father? <i>Clerk</i>	7	Occupation of Father? <i>Banker</i>
8	Full Maiden Name of Mother? <i>Mary Maude Snell</i>	8	Full Maiden Name of Mother? <i>Elizabeth Kate Halkinon</i>
9	If she has been more than once married give names of former husband, or husbands.	9	If she has been more than once married give names of former husband, or husbands.
10	Where were the parents married? <i>Exeter</i>	10	Where were the parents married?
11	When were they married? <i>Oct 1st 1907</i>	11	When were they married?
12	If not married give full Name of Mother.	12	If not married give full Name of Mother.
13	Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13	Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.
14	What is her occupation?	14	What is her occupation?
15	Name of Physician attending. <i>Dr. Williams</i>	15	Name of Physician attending. <i>Dr. Walker</i>
16	Your relation to child. <i>Father</i>	16	Your relation to child. <i>Grandfather</i>
17	Were you in house at time of Birth? <i>Yes</i>	17	Were you in house at time of Birth? <i>No</i>
18	Certified by <i>Clarence H. Smith</i>	18	Certified by <i>W. W. Whitteland</i>
	Address <i>Ingersoll</i>		Address <i>Ingersoll</i>
	Date <i>August 9th 1910</i>		Date <i>Aug 9th 1910</i>
	Remarks		Remarks
1	What is the full name of child? <i>Hagar Mary Alice</i>	1	What is the full name of child? <i>Murray Margaret Ethel</i>
2	When was the child born? <i>Aug 3rd 1910</i>	2	When was the child born? <i>Aug. 17th 1910</i>
3	Where was the child born? <i>Bong St. Ingersoll</i>	3	Where was the child born? <i>King St. Ingersoll</i>
4	Male or Female? <i>Female</i>	4	Male or Female? <i>Female</i>
5	Are the parents married? <i>Yes</i>	5	Are the parents married? <i>Yes</i>
6	Full name of Father? <i>Frederick L. Hagar</i>	6	Full name of Father? <i>William John Mc Murray</i>
7	Occupation of Father? <i>Foreman</i>	7	Occupation of Father? <i>Dentist</i>
8	Full Maiden Name of Mother? <i>Mary Louise Hamilton</i>	8	Full Maiden Name of Mother? <i>Mary Ethel Brock</i>
9	If she has been more than once married give names of former husband, or husbands.	9	If she has been more than once married give names of former husband, or husbands.
10	Where were the parents married? <i>Port Huron</i>	10	Where were the parents married? <i>London</i>
11	When were they married? <i>June 14th 1910</i>	11	When were they married? <i>Nov 1st 1905</i>
12	If not married give full Name of Mother.	12	If not married give full Name of Mother.
13	Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13	Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.
14	What is her occupation?	14	What is her occupation?
15	Name of Physician attending. <i>Dr. Williams</i>	15	Name of Physician attending. <i>Dr. Williams</i>
16	Your relation to child. <i>Father</i>	16	Your relation to child. <i>Father</i>
17	Were you in house at time of Birth? <i>Yes</i>	17	Were you in house at time of Birth? <i>Yes</i>
18	Certified by <i>Frederick L. Hagar</i>	18	Certified by <i>W. J. Mc Murray</i>
	Address <i>Ingersoll</i>		Address <i>Ingersoll</i>
	Date <i>Aug. 8th 1910.</i>		Date <i>August 17th 1910</i>
	Remarks		Remarks

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending *Sept 30th* 1910
Given under my hand this *20th* day of *Sept* Division Registrar of

BIRTHS

County of *Oxford*

Division of *Ingersoll*

	Surname first	Surname first	Surname first
What is the full name of child?	1. <i>Sumant Ralph Henry</i>	1. <i>Buck Lillian Pearl</i>	1. <i>Crooker George Stuart</i>
When was the child born?	2. <i>June 16th 1910</i>	2. <i>June 13th 1910</i>	2. <i>June 24th 1910</i>
Where was the child born? (Street number or Concession and Loc.)	3. <i>Clery St. Ingersoll</i>	3. <i>Delbut St. Ingersoll</i>	3. <i>Thomas St. Ingersoll</i>
Male or Female.	4. <i>Male</i>	4. <i>Female</i>	4. <i>Male</i>
Are the parents married?	5. <i>Yes</i>	5. <i>Yes</i>	5. <i>Yes</i>
Full name of Father.	6. <i>Ernest Ralph Sumant</i>	6. <i>Arthur Buck</i>	6. <i>Charles Hunter Crooker</i>
Occupation of Father?	7. <i>Laborer</i>	7. <i>Machinist</i>	7. <i>Mason</i>
Full Maiden Name of Mother.	8. <i>Hazel Jane Ingram</i>	8. <i>Sarah Edwards</i>	8. <i>Caroline Charlotte Elstone</i>
If she has been more than once married give names of former husband, or husbands.	9. <i>-</i>	9. <i>-</i>	9. <i>-</i>
Where were the parents married?	10. <i>Aymmer</i>	10. <i>Ingersoll</i>	10. <i>Woodstock</i>
When were they married?	11. <i>Sept 4th 1909.</i>	11. <i>Feb. 8th 1891</i>	11. <i>July 13th 1891.</i>
If not married give full Name of Mother.	12. <i>-</i>	12. <i>-</i>	12. <i>-</i>
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13. <i>-</i>	13. <i>-</i>	13. <i>-</i>
What is her occupation?	14. <i>-</i>	14. <i>-</i>	14. <i>-</i>
Name of Physician attending.	15. <i>Dr. Jeff</i>	15. <i>Dr. Colridge</i>	15. <i>Dr. Jeff</i>
Your relation to child.	16. <i>Mother</i>	16. <i>Mother</i>	16. <i>Father</i>
Were you in house at time of Birth?	17. <i>Yes</i>	17. <i>Yes</i>	17. <i>Yes</i>
Certified by	18. <i>Mrs. Sumant</i>	18. <i>Sarah Buck</i>	18. <i>Charles H. Crooker</i>
Address	<i>Ingersoll</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Date	<i>July 14th 1910.</i>	<i>July 14th 1910</i>	<i>July 18th 1910</i>
Remarks			

	Surname first	Surname first	Surname first
What is the full name of child?	1. <i>Lundass Roy de Kibben</i>	1. <i>Lymburne Ella Irene</i>	1. <i>Ludwig Thomas Theodore</i>
When was the child born?	2. <i>June 23rd 1910</i>	2. <i>July 1st 1910.</i>	2. <i>July 1st 1910</i>
Where was the child born? (Street number or Concession and Loc.)	3. <i>Dunes St. Ingersoll</i>	3. <i>King Hiram St. Ingersoll</i>	3. <i>King Hiram St. Ingersoll</i>
Male or Female.	4. <i>Male</i>	4. <i>Female</i>	4. <i>Male</i>
Are the parents married?	5. <i>Yes</i>	5. <i>Yes</i>	5. <i>Yes</i>
Full name of Father.	6. <i>Stephen Delbut Lundass</i>	6. <i>Frank Linton Lymburne</i>	6. <i>Lambert Ludwig.</i>
Occupation of Father?	7. <i>Machinist</i>	7. <i>Machinist.</i>	7. <i>Laborer</i>
Full Maiden Name of Mother.	8. <i>Irene Binbou</i>	8. <i>Lila Bell Loubary,</i>	8. <i>Lena Turnes</i>
If she has been more than once married give names of former husband, or husbands.	9. <i>-</i>	9. <i>-</i>	9. <i>-</i>
Where were the parents married?	10. <i>Ingersoll</i>	10. <i>Middleton</i>	10. <i>Stratford</i>
When were they married?	11. <i>Nov. 23rd 1903</i>	11. <i>Nov. 19th 1906.</i>	11. <i>July 10th 1902</i>
If not married give full Name of Mother.	12. <i>-</i>	12. <i>-</i>	12. <i>-</i>
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13. <i>-</i>	13. <i>-</i>	13. <i>-</i>
What is her occupation?	14. <i>-</i>	14. <i>-</i>	14. <i>-</i>
Name of Physician attending.	15. <i>Dr. Jeff</i>	15. <i>Dr. Jeff</i>	15. <i>Dr. Williams</i>
Your relation to child.	16. <i>Grandmother</i>	16. <i>Mother</i>	16. <i>Mother</i>
Were you in house at time of Birth?	17. <i>Yes</i>	17. <i>Yes</i>	17. <i>Yes.</i>
Certified by	18. <i>Jane Lundass</i>	18. <i>Mrs. F. Lymburne</i>	18. <i>L. Ludwig.</i>
Address	<i>Ingersoll</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Date	<i>July 18th 1910</i>	<i>July 28th 1910</i>	<i>July 30th 1910</i>
Remarks			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending *Sept 30th 1910*

Given under my hand this *10th* day of *October* A.D. 1910

Division Registrar of *Ingersoll*

BIRTHS

County of Oxford

Division of Ingersoll

	Surname first	Surname first	Surname first
What is the full name of child?	Watterworth Edith Lucile	Langford Arthur Dices	Robinson Gladys Marguerite
When was the child born?	Aug. 13 th 1910	July 30 th 1910	July 30 th 1910
Where was the child born? Street number or Concession and Lot.	King St. Ingersoll	James St. Ingersoll	James St. Ingersoll
Male or Female.	Female	male	female
Were the parents married?	yes	yes	yes
Full name of Father.	Samuel Huston Watterworth	J. C. Langford	Murley Chester Robinson
Occupation of Father?	Gentlemen	Schoolmaster	Cutter
Full Maiden Name of Mother.	Edith Leila Innes	Bertha Alexandra Dices	Annie Shelley.
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	East Oxford	Tottenham Ont.	Embrow
When were they married?	Aug. 11 th 1897.	July 24 th or 26 th 1905	June 19 th 1909
If not married give full Name of Mother.	-	-	-
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	Dr. Mc Kay.	Dr. Coleridge	Dr. Williams
Your relation to child.	father	father	Mother
Were you in house at time of Birth?	yes	yes	yes
Certified by	S. J. Watterworth	J. C. Langford.	Mrs. Murley Robinson
Address	Ingersoll	Ingersoll.	Ingersoll
Date	Aug. 30 th 1910	Aug. 20 th 1910	Sept 7 th 1910
Remarks			

	Surname first	Surname first	Surname first
What is the full name of child?	Jenkins William Herbert	Moore Joseph	Fitzmaurice Herbert William
When was the child born?	June 22 nd 1910	June 30 th 1910	June 25 th 1910
Where was the child born? Street number or Concession and Lot.	Thomas St. Ingersoll.	Victoria St. Ingersoll	Whiting St. Ingersoll.
Male or Female.	male	male	male
Were the parents married?	yes	yes	yes
Full name of Father.	Hugh Allan Jenkins	John Moore	Mr. William Fitzmaurice
Occupation of Father?	Foot make	Butcher	machinist
Full Maiden Name of Mother.	Maggie Bell Totten	Frances Humphrey	Lillie May Calles
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	Ingersoll	Ingersoll	Port Rowan
When were they married?	Dec. 27 th 1899.	July 24 th 1910	July 15 th 1903
If not married give full Name of Mother.	-	-	-
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	Dr. Mc Kay	Dr. Mc Kay	Dr. Coleridge
Your relation to child.	Mother	father	father
Were you in house at time of Birth?	yes	yes	yes
Certified by	Mrs. H. A. Jenkins	John Moore	J. H. Fitzmaurice
Address	Ingersoll	Ingersoll	Ingersoll.
Date	July 1 st 1910	July 9 th 1910	July 13 th 1910
Remarks			

BIRTHS

County of OxfordDivision of Ingersoll

	Surname first	Surname first	Surname first
What is the full name of child?	1. <u>Late John Alfred</u>	1. <u>Anney Ruth Allean</u>	1. <u>Bonesteel Marnal Oscar</u>
When was the child born?	2. <u>July 21st 1910</u>	2. <u>July 22nd 1910</u>	2. <u>August 7th 1910</u>
Where was the child born? Street number or Concession and Lot.	3. <u>Meritt St. Ingersoll</u>	3. <u>Cherry St. Ingersoll</u>	3. <u>King St. Ingersoll</u>
Male or Female.	4. <u>Male</u>	4. <u>Female</u>	4. <u>Male</u>
Are the parents married?	5. <u>Yes</u>	5. <u>Yes</u>	5. <u>Yes</u>
Full name of Father.	6. <u>John Late</u>	6. <u>Thos. George Anney</u>	6. <u>Walter Anson Bonesteel</u>
Occupation of Father?	7. <u>Laborer</u>	7. <u>Barber</u>	7. <u>Gen. Surgeon</u>
Full Maiden Name of Mother.	8. <u>Agnis Schell</u>	8. <u>Susie Lillywhite</u>	8. <u>Florence May Mitchell</u>
If she has been more than once married give names of former husband, or husbands.	9. <u>-</u>	9. <u>-</u>	9. <u>-</u>
Where were the parents married?	10. <u>United States</u>	10. <u>Kesler</u>	10. <u>Ingersoll</u>
When were they married?	11. <u>Mar. 17. 1905</u>	11. <u>May 15th 1899</u>	11. <u>Sept. 25th 1910</u>
If not married give full Name of Mother.	12. <u>-</u>	12. <u>-</u>	12. <u>-</u>
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13. <u>-</u>	13. <u>-</u>	13. <u>-</u>
What is her occupation?	14. <u>-</u>	14. <u>-</u>	14. <u>-</u>
Name of Physician attending.	15. <u>None</u>	15. <u>Dr. Cottridge</u>	15. <u>Dr. Williams</u>
Your relation to child.	16. <u>Mother</u>	16. <u>Mother</u>	16. <u>Father</u>
Were you in house at time of Birth?	17. <u>Yes</u>	17. <u>Yes</u>	17. <u>Yes</u>
Certified by	18. <u>Mrs. John Late</u>	18. <u>Mrs. Thos. George Anney</u>	18. <u>D. A. Bonesteel</u>
Address	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Date	<u>August 20th 1910</u>	<u>August 20th 1910</u>	<u>Aug. 24th 1910</u>
Remarks			
	Surname first	Surname first	Surname first
What is the full name of child?	1. <u>Elliott Edwin David</u>	1. <u>Orme Gladys May</u>	1. <u>McSherry Mary Louise</u>
When was the child born?	2. <u>Aug. 7th 1910</u>	2. <u>July 31st 1910</u>	2. <u>Aug. 7th 1910</u>
Where was the child born? Street number or Concession and Lot.	3. <u>Meritt St. Ingersoll</u>	3. <u>Meritt St. Ingersoll</u>	3. <u>Bell St. Ingersoll</u>
Male or Female.	4. <u>Male</u>	4. <u>Female</u>	4. <u>Female</u>
Are the parents married?	5. <u>Yes</u>	5. <u>Yes</u>	5. <u>Yes</u>
Full name of Father.	6. <u>Ernest Austin Elliott</u>	6. <u>Harold Harry Orme</u>	6. <u>Louis Ted McSherry</u>
Occupation of Father?	7. <u>Agent</u>	7. <u>Photographer</u>	7. <u>Driver</u>
Full Maiden Name of Mother.	8. <u>Snella Jane Stockford</u>	8. <u>Rose Elizabeth Williams</u>	8. <u>Mary Burns</u>
If she has been more than once married give names of former husband, or husbands.	9. <u>-</u>	9. <u>-</u>	9. <u>-</u>
Where were the parents married?	10. <u>Woodstock</u>	10. <u>Toronto</u>	10. <u>Ingersoll</u>
When were they married?	11. <u>Sept. 13th 1909</u>	11. <u>Oct. 1st 1909</u>	11. <u>Sept. 5th 1908</u>
If not married give full Name of Mother.	12. <u>-</u>	12. <u>-</u>	12. <u>-</u>
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13. <u>-</u>	13. <u>-</u>	13. <u>-</u>
What is her occupation?	14. <u>-</u>	14. <u>-</u>	14. <u>-</u>
Name of Physician attending.	15. <u>Dr. Jeff</u>	15. <u>Dr. Williams</u>	15. <u>Dr. McKay</u>
Your relation to child.	16. <u>Father</u>	16. <u>Mother</u>	16. <u>Father</u>
Were you in house at time of Birth?	17. <u>Yes</u>	17. <u>Yes</u>	17. <u>Yes</u>
Certified by	18. <u>Ernest Austin Elliott</u>	18. <u>Rose Elizabeth Orme</u>	18. <u>L. McSherry</u>
Address	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Date	<u>August 25th 1910</u>	<u>Aug. 29th 1910</u>	<u>Aug. 30th 1910</u>
Remarks			

BIRTHS

County of _____

Division of _____

	Surname first	Surname first	Surname first
1	Horton Helen Celine	Bryan Vera Edna	Selt Catherine
2	Aug 7 th 1910	Aug 18 th 1910	Aug 17 th 1910
3	Charles St. Jagersoll If in a hospital give its name.	Hamilton St. Jagersoll If in a hospital give its name.	Memphis If in a hospital give its name.
4	Female	Female	Female
5	Yes	Yes	Yes
6	Federick Roman Horton	William Bryan	Wander Brester Selt
7	Accountant	Labourer	Seaman
8	Gladys Cillene LaFare	Margaret Cameron	Jan Karlette Ryan
9	-	-	-
10	Hamilton	Lindsay	Jagersoll
11	Jan. 16 th 1907	July 21 st 1910	July 19 th 1900
12	-	-	-
13	-	-	-
14	-	-	-
15	Dr. Jeff	Dr. Jeff	Dr. Rogers
16	Father	Father	Father
17	Yes	Yes	Yes
18	L. H. Horton	Wm Bryan	W B Selt
19	Jagersoll	Jagersoll	Jagersoll
20	Sept 9 th 1910	Sept 12 th 1910	Sept 18 th 1910
1	Wendell John William	Wm Andrew Joseph	Clarence Clarence Minnie
2	Aug 20 th 1910	Sept 5 th 1910	Aug 24 th 1910
3	Charles St. Jagersoll If in a hospital give its name.	Charles St. Jagersoll If in a hospital give its name.	Memphis If in a hospital give its name.
4	Male	Male	Female
5	Yes	Yes	Yes
6	John Henry Wendell	John Henry Wynn	Clarence Cleelan
7	Boatmaker	Boatman	Boatman
8	Mary Ellen Head	Catherine Theresa Minard	Minnie Samface
9	-	-	-
10	Wendell	Jagersoll	England
11	June 15 th 1904	May 20 th 1906	Jan 26 th 1898
12	-	-	-
13	-	-	-
14	-	-	-
15	Dr. Jeff	Dr. Jeff	Dr. Jeff
16	Married	Married	Married
17	Yes	Yes	Yes
18	Mary Ellen Head	Catherine Wynn	Mrs. B. Cleelan
19	Jagersoll	Jagersoll	Jagersoll
20	Sept 11 th 1910	Sept 26 th 1910	Sept 24 th 1910

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1910

Given under my hand this _____ day of October A.D. 1910

BIRTHS

County of Jefferson

Division of Legislation

	Surname first	Surname first	Surname first
What is the full name of child?	1. Mead Dorothy Gene	Edy Joseph Edward	Menzie William Taylor
When was the child born? Where was the child born? Street number or Concession and Lot.	2 Dec 2nd 1910 Rice St 3 If in a hospital give its name Jefferson	2 New York 1910 William St 3 If in a hospital give its name Jefferson	2 Dec 4th 1910 Rice St 3 If in a hospital give its name Jefferson
Male or Female.	4 Female	4 Male	4 Male
Are the parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	6 Blang William Mead	6 William Edward Edy	6 William John Menzie
Occupation of Father?	7 Barber	7 Barber	7 Barber
Full Maiden Name of Mother.	8 Sarah Ann Franklin	8 Helen Charter	8 Elizabeth Manning Carterfield
If she has been more than once married give names of former husband, or husbands.	9 -	9 -	9 -
Where were the parents married?	10 England	10 Niagara Falls N.Y.	10 British Isles
When were they married?	11 Nov 11th 1907	11 April 2nd 1907	11 Nov 30th 1907
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attending.	15 Dr. Jeff	15 Dr. McKay	15 Dr. Jeff
Your relation to child.	16 Father	16 Father	16 Father
Were you in house at time of Birth?	17 No	17 No	17 No
Certified by	18 Blang W. Mead	18 W. E. Edy	18 W. J. Menzie
Address	Jefferson	Jefferson	Jefferson
Date	Dec 2nd 1910	Dec 2nd 1910	Dec 30th 1910
Remarks			
What is the full name of child?	14	1	1
When was the child born? Where was the child born? Street number or Concession and Lot.	2	2	2
Male or Female.	4	4	4
Are the parents married?	5	5	5
Full name of Father.	6	6	6
Occupation of Father?	7	7	7
Full Maiden Name of Mother.	8	8	8
If she has been more than once married give names of former husband, or husbands.	9	9	9
Where were the parents married?	10	10	10
When were they married?	11	11	11
If not married give full Name of Mother.	12	12	12
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13	13	13
What is her occupation?	14	14	14
Name of Physician attending.	15	15	15
Your relation to child.	16	16	16
Were you in house at time of Birth?	17	17	17
Certified by	18	18	18
Address			
Date			
Remarks			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1910
 Given under my hand this 11th day of Jan A.D. 1911
 Division Registrar of Jefferson

BIRTHS

County of *Jefferson*

Division of *Jagersall*

	Surname first	Surname first	Surname first
What is the full name of child?	<i>Wren Donald Carlin</i>	<i>Samuel Robert John</i>	<i>Danlen Keith MacLaren</i>
When was the child born?	<i>Sept 29th 1910</i>	<i>Sept 24th 1910</i>	<i>Sept 29th 1910</i>
Where was the child born? Street number or Concession and Lot.	<i>St. Luke St. Jagersall</i>	<i>Wierth St. Jagersall</i>	<i>St. Luke St. Jagersall</i>
Male or Female.	<i>Male</i>	<i>Male</i>	<i>Male</i>
Are the parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Full name of Father.	<i>Russell Donald Vree</i>	<i>Geo. Harrison Samuel</i>	<i>Francis Laitan</i>
Occupation of Father?	<i>Journalist</i>	<i>Farmer</i>	<i>Teacher</i>
Full Maiden Name of Mother.	<i>Corah Milow Dundas</i>	<i>Nellie Day</i>	<i>Janie Ruthen MacLaren</i>
If she has been more than once married give names of former husband, or husbands.			
Where were the parents married?	<i>Jagersall</i>	<i>England</i>	<i>Beagle Creek</i>
When were they married?	<i>Jan 1st 1910</i>	<i>Aug 24th 1902</i>	<i>June 25th 1906</i>
If not married give full Name of Mother.			
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.			
What is her occupation?			
Name of Physician attending.	<i>Dr. Veeff</i>	<i>Dr. Veeff</i>	<i>Dr. Rogers</i>
Your relation to child.	<i>Father</i>	<i>Father</i>	<i>Father</i>
Were you in house at time of Birth?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Certified by	<i>R. H. Vree</i>	<i>Geo. H. Samuel</i>	<i>F. Laitan</i>
Address	<i>Jagersall</i>	<i>Jagersall</i>	<i>Jagersall</i>
Date			
Remarks	<i>Oct 24th 1910</i>	<i>Oct 25th 1910</i>	<i>Nov 2nd 1910</i>
What is the full name of child?	<i>Maylan Edwin Elmsted</i>	<i>Reed Thomas C. 2</i>	<i>Clark Vera Ellen</i>
When was the child born?	<i>Oct 5th 1910</i>	<i>Oct 21st 1910</i>	<i>Oct 9th 1910</i>
Where was the child born? Street number or Concession and Lot.	<i>River St. Jagersall</i>	<i>Victoria St. Jagersall</i>	<i>St. Luke St. Jagersall</i>
Male or Female.	<i>Male</i>	<i>Male</i>	<i>Female</i>
Are the parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Full name of Father.	<i>George Taylor</i>	<i>Cyrus Reed</i>	<i>Albert Brown Clark</i>
Occupation of Father?	<i>Clothing Merchant</i>	<i>Farmer</i>	<i>Milk Dealer</i>
Full Maiden Name of Mother.	<i>Mary Edith Elmsted</i>	<i>Nellie Reed</i>	<i>Oliver Belle Kennedy</i>
If she has been more than once married give names of former husband, or husbands.			
Where were the parents married?	<i>St. Thomas</i>	<i> Dublin Ont</i>	<i>United States</i>
When were they married?	<i>April 16th 1907</i>	<i>Oct 7th 1905</i>	<i>Jan 25th 1905</i>
If not married give full Name of Mother.			
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.			
What is her occupation?			
Name of Physician attending.	<i>Dr. Cambridge</i>	<i>Dr. Campbell</i>	<i>Dr. Rogers</i>
Your relation to child.	<i>Father</i>	<i>Father</i>	<i>Mother</i>
Were you in house at time of Birth?	<i>Yes</i>	<i>Yes No</i>	<i>Yes</i>
Certified by	<i>George Taylor</i>	<i>Cyrus Reed</i>	<i>Mrs. Albert B. Clark</i>
Address	<i>Jagersall</i>	<i>Jagersall</i>	<i>Jagersall</i>
Date			
Remarks	<i>Nov 2nd 1910</i>	<i>Nov 5th 1910</i>	<i>Nov 9th 1910</i>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending

Given under my hand this

day of

Dec 31st

1910

A. D. 1911

Division Registrar of

BIRTHS

County of Alford

Division of Lingersall

SURNAMES FIRST		SURNAMES FIRST		SURNAMES FIRST	
1	What is the full name of child?	1	What is the full name of child?	1	What is the full name of child?
2	When was the child born? Street number or Concession and Lot.	2	When was the child born? Street number or Concession and Lot.	2	When was the child born? Street number or Concession and Lot.
3	If in a hospital give its name.	3	If in a hospital give its name.	3	If in a hospital give its name.
4	Male or Female.	4	Male or Female.	4	Male or Female.
5	Are the parents married?	5	Are the parents married?	5	Are the parents married?
6	Full name of Father.	6	Full name of Father.	6	Full name of Father.
7	Occupation of Father?	7	Occupation of Father?	7	Occupation of Father?
8	Full Maiden Name of Mother.	8	Full Maiden Name of Mother.	8	Full Maiden Name of Mother.
9	If she has been more than once married give names of former husband, or husbands.	9	If she has been more than once married give names of former husband, or husbands.	9	If she has been more than once married give names of former husband, or husbands.
10	When were the parents married?	10	When were the parents married?	10	When were the parents married?
11	If not married give full Name of Mother.	11	If not married give full Name of Mother.	11	If not married give full Name of Mother.
12	Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	12	Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	12	Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.
13	What is her occupation?	13	What is her occupation?	13	What is her occupation?
14	Name of Physician attending.	14	Name of Physician attending.	14	Name of Physician attending.
15	Your relation to child.	15	Your relation to child.	15	Your relation to child.
16	Were you in house at time of Birth?	16	Were you in house at time of Birth?	16	Were you in house at time of Birth?
17	Certified by	17	Certified by	17	Certified by
18	Address	18	Address	18	Address
19	Date	19	Date	19	Date
20	Remarks	20	Remarks	20	Remarks
1	What is the full name of child?	1	What is the full name of child?	1	What is the full name of child?
2	When was the child born? Street number or Concession and Lot.	2	When was the child born? Street number or Concession and Lot.	2	When was the child born? Street number or Concession and Lot.
3	If in a hospital give its name.	3	If in a hospital give its name.	3	If in a hospital give its name.
4	Male or Female.	4	Male or Female.	4	Male or Female.
5	Are the parents married?	5	Are the parents married?	5	Are the parents married?
6	Full name of Father.	6	Full name of Father.	6	Full name of Father.
7	Occupation of Father?	7	Occupation of Father?	7	Occupation of Father?
8	Full Maiden Name of Mother.	8	Full Maiden Name of Mother.	8	Full Maiden Name of Mother.
9	If she has been more than once married give names of former husband, or husbands.	9	If she has been more than once married give names of former husband, or husbands.	9	If she has been more than once married give names of former husband, or husbands.
10	When were the parents married?	10	When were the parents married?	10	When were the parents married?
11	If not married give full Name of Mother.	11	If not married give full Name of Mother.	11	If not married give full Name of Mother.
12	Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	12	Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	12	Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.
13	What is her occupation?	13	What is her occupation?	13	What is her occupation?
14	Name of Physician attending.	14	Name of Physician attending.	14	Name of Physician attending.
15	Your relation to child.	15	Your relation to child.	15	Your relation to child.
16	Were you in house at time of Birth?	16	Were you in house at time of Birth?	16	Were you in house at time of Birth?
17	Certified by	17	Certified by	17	Certified by
18	Address	18	Address	18	Address
19	Date	19	Date	19	Date
20	Remarks	20	Remarks	20	Remarks
1	What is the full name of child?	1	What is the full name of child?	1	What is the full name of child?
2	When was the child born? Street number or Concession and Lot.	2	When was the child born? Street number or Concession and Lot.	2	When was the child born? Street number or Concession and Lot.
3	If in a hospital give its name.	3	If in a hospital give its name.	3	If in a hospital give its name.
4	Male or Female.	4	Male or Female.	4	Male or Female.
5	Are the parents married?	5	Are the parents married?	5	Are the parents married?
6	Full name of Father.	6	Full name of Father.	6	Full name of Father.
7	Occupation of Father?	7	Occupation of Father?	7	Occupation of Father?
8	Full Maiden Name of Mother.	8	Full Maiden Name of Mother.	8	Full Maiden Name of Mother.
9	If she has been more than once married give names of former husband, or husbands.	9	If she has been more than once married give names of former husband, or husbands.	9	If she has been more than once married give names of former husband, or husbands.
10	When were the parents married?	10	When were the parents married?	10	When were the parents married?
11	If not married give full Name of Mother.	11	If not married give full Name of Mother.	11	If not married give full Name of Mother.
12	Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	12	Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	12	Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.
13	What is her occupation?	13	What is her occupation?	13	What is her occupation?
14	Name of Physician attending.	14	Name of Physician attending.	14	Name of Physician attending.
15	Your relation to child.	15	Your relation to child.	15	Your relation to child.
16	Were you in house at time of Birth?	16	Were you in house at time of Birth?	16	Were you in house at time of Birth?
17	Certified by	17	Certified by	17	Certified by
18	Address	18	Address	18	Address
19	Date	19	Date	19	Date
20	Remarks	20	Remarks	20	Remarks

BIRTHS

County of Alford

Division of Sugersale

	Surname first	Surname first	Surname first
What is the full name of child?	William Violet Cecile	Maere Edith Beare	Smith Robert Clifton
When was the child born?	Nov 2nd 1910	Oct 11th 1910	Nov 7th 1910
Where was the child born? Street number or Concession and Lot.	Living St Sugersale	Charles St Sugersale	Thames St Sugersale
Male or Female.	Female	Female	Male
Are the parents married?	Yes	Yes	Yes
Full name of Father.	Daniel McEhinns	Edward Maere Maere	Robert Edward Smith
Occupation of Father?	Wagon	Wagon	Seaman
Full Maiden Name of Mother.	Merce Core	Eliza Links	Charlotte Kelley
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	Sugersale	Sugersale	Sugersale
When were they married?	April 20th 1893	Feb 20th 1899	Dec 25th 1901
If not married give full Name of Mother.	-	-	-
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	Dr. Welf	Dr. Welf	Dr. Welf
Your relation to child.	Mother	Father	Father
Were you in house at time of Birth?	No	Yes	Yes
Certified by	James Hiver	E. J. Maere	Robert E. Smith
Address	Sugersale	Sugersale	Sugersale
Date	Nov 30th 1910	Nov 30th 1910	Dec 5th 1910
Remarks			
What is the full name of child?	Richardson Bruce William	Collins James Deanelet	Truin James Marshall
When was the child born?	Dec 11th 1910	Nov 2nd 1910	Nov 29th 1910
Where was the child born? Street number or Concession and Lot.	Charles St Sugersale	Charles St Sugersale	Charles St Sugersale
Male or Female.	Male	Male	Male
Are the parents married?	Yes	Yes	Yes
Full name of Father.	Robert W. Richardson	James Collins	Samuel Deanelet Truin
Occupation of Father?	Seaman	Teacher	Carpenter
Full Maiden Name of Mother.	Mary Charlotte Kibbie	Emma Jane Young	Emma Beary
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	Boris	Sugersale	Cleveland Ohio
When were they married?	Oct 1st 1906	June 2nd 1902	Jan 22nd 1903
If not married give full Name of Mother.	-	-	-
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	Dr. Williams	Dr. Welf	Dr. Welf
Your relation to child.	Father	Father	Father
Were you in house at time of Birth?	Yes	No	Yes
Certified by	Robt W. Richardson	James Collins	J. S. Truin
Address	Sugersale	Sugersale	Sugersale
Date	Dec 19th 1910	Dec 19th 1910	Dec 21st 1910
Remarks			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st A.D. 1911
 Given under my hand this 11th day of Jan
 Division Registrar 1911

BIRTHS

County of Jefferson

Division of Sugars

	Surname first	Surname first	Surname first
What is the full name of child?	<u>Robert John George</u>	<u>Donald Paul Baker</u>	<u>W. J. Bernhart</u>
When was the child born?	<u>Sept 12th 1910</u>	<u>Sept 16th 1910</u>	<u>Sept 10th 1910</u>
Where was the child born? Street number or Con- cession and Lot.	<u>11th St Hospital give its name</u>	<u>If in a hospital give its name</u>	<u>If in a hospital give its name</u>
Male or Female.	<u>Male</u>	<u>Female</u>	<u>Female</u>
Are the parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>Henry Satter</u>	<u>Thomas Paulink</u>	<u>William Henry McDermott</u>
Occupation of Father?	<u>Business</u>	<u>Carpenter</u>	<u>Chief Officer</u>
Full Maiden Name of Mother.	<u>Luenda Daniel</u>	<u>Estelle Bertha Steple</u>	<u>Kathleen Mary Bright</u>
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	<u>Sugars</u>	<u>Sugars</u>	<u>Chicago</u>
When were they married?	<u>Oct 20th 1908</u>	<u>April 5th 1905</u>	<u>April 20th 1903</u>
If not married give full Name of Mother.	-	-	-
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attend- ing.	<u>Dr. Rogers</u>	<u>Dr. McKay</u>	<u>Dr. McKay</u>
Your relation to child.	<u>Grandfather</u>	<u>Father</u>	<u>Father</u>
Were you in house at time of birth?	<u>No</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>John Daniel</u>	<u>Doc Paulink</u>	<u>Walter W. McDermott</u>
Address	<u>Sugars</u>	<u>Sugars</u>	<u>Sugars</u>
Date	<u>Oct 11th 1910</u>	<u>Oct 12th 1910</u>	<u>Oct 14th 1910</u>
Remarks			<u>Rich Barn</u>
What is the full name of child?	<u>Caroline Barbara Ward</u>	<u>Hongill Carl Foster</u>	<u>Lucretia Rosetta</u>
When was the child born?	<u>Sept 1st 1910</u>	<u>Sept 17th 1910</u>	<u>Sept 17th 1910</u>
Where was the child born? Street number or Con- cession and Lot.	<u>11th St Hospital give its name</u>	<u>If in a hospital give its name</u>	<u>If in a hospital give its name</u>
Male or Female.	<u>Male</u>	<u>Male</u>	<u>Female</u>
Are the parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>William Carvins</u>	<u>William David Hongill</u>	<u>William Smith</u>
Occupation of Father?	<u>Teacher</u>	<u>Carpenter</u>	<u>Engineer</u>
Full Maiden Name of Mother.	<u>Pauline Edwards</u>	<u>Edith May Foster</u>	<u>Rosetta Brown</u>
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	<u>Brownsville</u>	<u>Barford</u>	<u>England</u>
When were they married?	<u>Jan 28th 1899</u>	<u>May 10th 1907</u>	<u>Mar 10th 1903</u>
If not married give full Name of Mother.	-	-	-
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attend- ing.	<u>Dr. Rogers</u>	<u>Dr. McKay</u>	<u>Dr. Calbridge</u>
Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Mother</u>
Were you in house at time of birth?	<u>Yes</u>	<u>No</u>	<u>Yes</u>
Certified by	<u>W. Carvins</u>	<u>William David Hongill</u>	<u>Rosetta Smith</u>
Address	<u>Sugars</u>	<u>Sugars</u>	<u>Sugars</u>
Date	<u>Oct 14th 1910</u>	<u>Oct 19th 1910</u>	<u>Oct 20th 1910</u>
Remarks			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1910
 Given under my hand this 21st day of Nov A.D. 1910

BIRTHS

County of *Chittenden*

Division of *Sugerssee*

	Surname first	Surname first	Surname first
1	1. <i>William Westlake</i>	1. <i>Francis Bangfield</i>	1. <i>William Westlake</i>
2	2. <i>Dec 11th 1910</i>	2. <i>Dec 7th 1910</i>	2. <i>Dec 11th 1910</i>
3	3. <i>Cherry St Sugerssee</i>	3. <i>Cherry St Sugerssee</i>	3. <i>Cherry St Sugerssee</i>
4	4. <i>Male</i>	4. <i>Male</i>	4. <i>Male</i>
5	5. <i>Yes</i>	5. <i>Yes</i>	5. <i>Yes</i>
6	6. <i>Benjamin Westlake</i>	6. <i>Herbert Edgar Bangfield</i>	6. <i>Frederick William Keeler</i>
7	7. <i>Butcher</i>	7. <i>Engineer</i>	7. <i>Underwriter</i>
8	8. <i>Mary Beard</i>	8. <i>Mary Frances Smith</i>	8. <i>Dannie Beard</i>
9	9. <i>-</i>	9. <i>-</i>	9. <i>-</i>
10	10. <i>Sugerssee</i>	10. <i>Sugerssee</i>	10. <i>Wheatland</i>
11	11. <i>Oct 19th 1899</i>	11. <i>June 9th 1901</i>	11. <i>June 17th 1909</i>
12	12. <i>-</i>	12. <i>-</i>	12. <i>-</i>
13	13. <i>-</i>	13. <i>-</i>	13. <i>-</i>
14	14. <i>-</i>	14. <i>-</i>	14. <i>-</i>
15	15. <i>Dr. Williams</i>	15. <i>Dr. Calveridge</i>	15. <i>Dr. Calveridge</i>
16	16. <i>Father</i>	16. <i>Father</i>	16. <i>Father</i>
17	17. <i>Yes</i>	17. <i>Yes</i>	17. <i>Yes</i>
18	18. <i>B. B. McMillan</i>	18. <i>H. C. Bangfield</i>	18. <i>Frederick W. Keeler</i>
19	19. <i>Sugerssee</i>	19. <i>Sugerssee</i>	19. <i>Sugerssee</i>
20	20. <i>Jan 2nd 1911</i>	20. <i>Jan 9th 1911</i>	20. <i>Jan 10th 1911</i>
21	21. <i>-</i>	21. <i>-</i>	21. <i>-</i>
1	1. <i>May Bell</i>	1. <i>Alexander Henderson</i>	1. <i>Walter Thorne</i>
2	2. <i>Dec 13th 1910</i>	2. <i>Dec 25th 1910</i>	2. <i>Jan 4th 1911</i>
3	3. <i>Cherry St Sugerssee</i>	3. <i>Cherry St Sugerssee</i>	3. <i>Cherry St Sugerssee</i>
4	4. <i>Female</i>	4. <i>Male</i>	4. <i>Male</i>
5	5. <i>Yes</i>	5. <i>Yes</i>	5. <i>Yes</i>
6	6. <i>John Barclay</i>	6. <i>John Alexander Henderson</i>	6. <i>George Thorne</i>
7	7. <i>Machinist</i>	7. <i>Engineer</i>	7. <i>Merchant</i>
8	8. <i>Higgin May Bell</i>	8. <i>Lena Longman</i>	8. <i>Lydia Thorne</i>
9	9. <i>-</i>	9. <i>-</i>	9. <i>-</i>
10	10. <i>Wheatland</i>	10. <i>Yes</i>	10. <i>England</i>
11	11. <i>Apr 7th 1902</i>	11. <i>Jan 19th 1901</i>	11. <i>Aug 2d 1891</i>
12	12. <i>-</i>	12. <i>-</i>	12. <i>-</i>
13	13. <i>-</i>	13. <i>-</i>	13. <i>-</i>
14	14. <i>-</i>	14. <i>-</i>	14. <i>-</i>
15	15. <i>Dr. West</i>	15. <i>Dr. Calveridge</i>	15. <i>Dr. Calveridge</i>
16	16. <i>Father</i>	16. <i>Father</i>	16. <i>Father</i>
17	17. <i>Yes</i>	17. <i>Yes</i>	17. <i>Yes</i>
18	18. <i>John Barclay</i>	18. <i>John A. Henderson</i>	18. <i>W. Thorne</i>
19	19. <i>Sugerssee</i>	19. <i>Sugerssee</i>	19. <i>Sugerssee</i>
20	20. <i>Jan 8th 1911</i>	20. <i>Jan 11th 1911</i>	20. <i>Jan 12th 1911</i>
21	21. <i>-</i>	21. <i>-</i>	21. <i>-</i>

BIRTHS

County of Offord

Division of Sugersall

	Surname first	Surname first	Surname first
1 What is the full name of child?	Raymond William Roscoe	Rayburn Dorothy Marie	Dorrickle Lela
2 When was the child born?	Dec 15th 1910	Jan 3rd 1911	Jan 26th 1911
3 Where was the child born? Street number or Commission and Lot.	Albert St Sugersall	Victoria St Sugersall	Stall St Sugersall
4 Male or Female.	Male	Female	Female
5 Are the parents married?	Yes	Yes	Yes
6 Full name of Father.	Ray Eugene Baughner	William Rayburn	James Nathan Dorrickle
7 Occupation of Father?	Whittaker	Labourer	Labourer
8 Full Maiden Name of Mother.	Mildred Strande	Josephine Cook	Ada Ruth
9 If she has been more than once married give names of former husband, or husbands.	-	-	-
10 Where were the parents married?	Bramford	Leadbriki	Sugersall
11 When were they married?	Jan 1st 1908	Feb 1st 1903	Oct 23rd 1907
12 If not married give full name of Mother.	-	-	-
13 Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
14 What is her occupation?	-	-	-
15 Name of Physician attending.	Dr Rogers	Dr Williams	Dr Canfield
16 Your relation to child.	Father	Mother	Father
17 Were you in house at time of birth?	Yes	Yes	Yes
18 Certified by	Ray E Baughner	Mrs Rayburn	J. N. Dorrickle
Address	Sugersall	Sugersall	Sugersall
Date	Jan 17th 1911	Jan 30th 1911	Jan 30th 1911
Remarks			
1 What is the full name of child?	Bernice Margaret Helen	Maebear May Berlein	Oranck Wilbert John
2 When was the child born?	Dec 31st 1910	Jan 9th 1911	Jan 8th 1911
3 Where was the child born? Street number or Commission and Lot.	Wm. Warren St Sugersall	Canfield St Sugersall	Victoria St Sugersall
4 Male or Female.	Female	Female	Male
5 Are the parents married?	Yes	Yes	Yes
6 Full name of Father.	William James Bernice	of Berlein Maebear	John Coburn Oranck
7 Occupation of Father?	Farmer	Blacksmith	Care Worker
8 Full Maiden Name of Mother.	Bladys Mildred Blowers	Maud Matheus	Elizabeth Andrews
9 If she has been more than once married give names of former husband, or husbands.	-	-	-
10 Where were the parents married?	Bramford	Truced Out	Bramford
11 When were they married?	Apr 21st 1908	Nov 21st 1900	Dec 2nd 1907
12 If not married give full name of Mother.	-	-	-
13 Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
14 What is her occupation?	-	-	-
15 Name of Physician attending.	Dr West	Dr Rogers	Dr Cambridge
16 Your relation to child.	Father	Father	Father
17 Were you in house at time of birth?	No	Yes	Yes
18 Certified by	W. J. Bernice	J. Berlein Maebear	John Coburn Oranck
Address	Sugersall	Blisbriki	Sugersall
Date	Jan 30th 1911	Jan 2nd 1911	Jan 2nd 1911
Remarks			

BIRTHS

County of Offord

Division of Sugersall

	Surname first	Surname first	Surname first
What is the full name of child?	Bearsall Jean Elizabeth	Dunn Jane Michael	Weston Bunt Leith Franklin
When was the child born?	2 July 12th 1911	2 July 14th 1911	2 July 2nd 1911
Where was the child born? Street number or Concession and Lot.	8 In a hospital give its name Sugersall	8 In a hospital give its name Sugersall	8 In a hospital give its name Sugersall
Male or Female.	4 Female	4 Female	4 Male
Are the parents married?	6 Yes	6 Yes	6 Yes
Full name of Father.	6 John Bearsall	6 Frankham Dunn	6 George Weston
Occupation of Father?	7 Mechanic	7 Merchant	7 Mechanic
Full Maiden Name of Mother.	8 Clara Daniel	8 Isabel Marie Brown	8 Annie Amelia Crabb
If she has been more than once married give names of former husband, or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Sugersall	10 Dereham St	10 Sugersall
When were they married?	11 Oct 2nd 1907	11 July 2nd 1910	11 Sept 1st 1909
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attending.	16 Dr. Kelly	16 Dr. McKay	16 Dr. Rogers
Your relation to child.	18 Mother	18 Father	18 Father
Were you in house at time of Birth?	17 No	17 Yes	17 Yes
Certified by	18 John Bearsall	18 J. M. Dunn	18 George Weston
Address	Sugersall	Sugersall	Sugersall
Date	July 7th 1911	July 9th 1911	July 15th 1911
Remarks			

	Surname first	Surname first	Surname first
What is the full name of child?	Bettaek Frederick Sidney	Deekend Rose Evelyn	1 Gant
When was the child born?	2 July 21st 1911	2 July 27th 1911	2 July 25th 1911
Where was the child born? Street number or Concession and Lot.	8 In a hospital give its name Sugersall	8 In a hospital give its name Sugersall	8 In a hospital give its name Sugersall
Male or Female.	4 Male	4 Female	4 Male
Are the parents married?	6 Yes	6 Yes	6 Yes
Full name of Father.	6 James Bettaek	6 Francis Deekend	6 Alexander Gant
Occupation of Father?	7 Laborer	7 Laborer	7 Laborer
Full Maiden Name of Mother.	8 Ada French	8 Janet Bearsall	8 Margaret Jane Minar
If she has been more than once married give names of former husband, or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Sugersall	10 Sugersall	10 Sugersall
When were they married?	11 June 5th 1906	11 July 1st 1907	11 Don't know exact date
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attending.	16 Dr. Kelly	16 Dr. Cambridge	16 Dr. Langford
Your relation to child.	18 Father	18 Grandmother	18 Father
Were you in house at time of Birth?	17 Yes	17 Yes	17 Yes
Certified by	18 James Bettaek	18 Ellen Bearsall	18 Alex Gant
Address	Sugersall	Sugersall	Sugersall
Date	July 22nd 1911	July 28th 1911	July 27th 1911
Remarks			Bill Barr

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st

Given under my hand this 18th day of April A.D. 1911

Division Registrar of Sugersall

Subsidiary B.
B. - Record all still-births as births,
as well as deaths.

BIRTHS

County of Jefferson

Division of Dyersdale

	Surname first	Surname first	Surname first
What is the full name of child?	<u>Richard Henry</u>	<u>Richard Henry</u>	<u>Oliver Gladys Irene</u>
When was the child born?	<u>2 July 2nd 1911</u>	<u>2 July 2nd 1911</u>	<u>2 July 2nd 1911</u>
Where was the child born? Street number or Concession and Lot.	<u>Under St. Ignace</u>	<u>St Ignace</u>	<u>St Ignace</u>
3 If in a hospital give its name.	<u>Dyersdale</u>	<u>Dyersdale</u>	<u>Dyersdale</u>
Male or Female.	<u>Female</u>	<u>Female</u>	<u>Female</u>
Are the parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>Richard Lee Briggs</u>	<u>Richard Wiggerham</u>	<u>Matthew Herman Oliver</u>
Occupation of Father?	<u>Labourer</u>	<u>Briggs's Clerk</u>	<u>Barryman</u>
Full Maiden Name of Mother.	<u>Mary Reaney</u>	<u>Mabel Isabelle Greenwood</u>	<u>Ann Marie Barrett Brady</u>
If she has been more than once married give names of former husband, or husbands.	<u>-</u>	<u>-</u>	<u>-</u>
Where were the parents married?	<u>Switzerland</u>	<u>England</u>	<u>Dyersdale</u>
When were they married?	<u>May 17th 1895</u>	<u>April 24th 1910</u>	<u>May 8th 1906</u>
If not married give full Name of Mother.	<u>-</u>	<u>-</u>	<u>-</u>
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	<u>-</u>	<u>-</u>	<u>-</u>
What is her occupation?	<u>-</u>	<u>-</u>	<u>-</u>
Name of Physician attending.	<u>Dr. Kelly</u>	<u>Dr. Williams</u>	<u>Dr. Calveridge</u>
Your relation to child.	<u>mother</u>	<u>father</u>	<u>father</u>
Were you in house at time of birth?	<u>Yes</u>	<u>Yes</u>	<u>No</u>
Certified by	<u>Mary Briggs</u>	<u>Richard Wiggerham</u>	<u>M. J. Oliver</u>
Address	<u>Dyersdale</u>	<u>Dyersdale</u>	<u>Dyersdale</u>
Date	<u>Mar 2nd 1911</u>	<u>Mar 2nd 1911</u>	<u>Mar 4th 1911</u>
Remarks			
What is the full name of child?	<u>Bertinson Frank Edward</u>		
When was the child born?	<u>Mar 12th 1911</u>		
Where was the child born? Street number or Concession and Lot.	<u>Concession No. 10</u>		
3 If in a hospital give its name.	<u>Dyersdale</u>		
Male or Female.	<u>Male</u>		
Are the parents married?	<u>Yes</u>		
Full name of Father.	<u>Charles James Bertinson</u>		
Occupation of Father?	<u>Woods Miller</u>		
Full Maiden Name of Mother.	<u>Marie Millard</u>		
If she has been more than once married give names of former husband, or husbands.	<u>-</u>		
Where were the parents married?	<u>Dyersdale</u>		
When were they married?	<u>Oct 11th 1901</u>		
If not married give full Name of Mother.	<u>-</u>		
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	<u>-</u>		
What is her occupation?	<u>-</u>		
Name of Physician attending.	<u>Dr. Williams</u>		
Your relation to child.	<u>father</u>		
Were you in house at time of birth?	<u>Yes</u>		
Certified by	<u>C. J. Bertinson</u>		
Address	<u>Dyersdale</u>		
Date	<u>Mar 24th 1911</u>		
Remarks			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1911
Given under my hand this 1st day of April A.D. 1911

Roy alexander brookfield, edward brookfield, maria neal, roy mclean miller, thomas edgar moyer, ernest moyer, esther wilford, margoy grace stevens, william stevens, jane elizabeth garbutt, emma louise pellow, john albert pellow, mahaley seaton, etta janes, charles henry jones, alicia elizabeth houghton

BIRTHS

County of Essex

Division of Sugersall

	Surname First	Surname First	Surname First
1. What is the full name of child?	Brookfield Roy Alexander	Miller	Mayer Thomas Edgar
2. When was the child born?	Mar 11th 1911	April 5th 1911	Mar 16th 1911
3. Where was the child born? (Street number or Concession and Lot.)	William's Hospital	William's Hospital	William's Hospital
4. If in a hospital give the name of the hospital.	Sugersall	Sugersall	Sugersall
5. Male or Female.	Male	Male	Male
6. Are the parents married?	Yes	Yes	Yes
7. Full name of Father.	Edward Brookfield	Roy William Miller	Ernest Mayer
8. Occupation of Father.	Painter		Machinist
9. Full Maiden Name of Mother.	Eliza May Neel		Esther Wilford
10. If she has been more than once married give names of former husband, or husbands.	-	-	-
11. Where were the parents married?	Sarantia		Sugersall
12. When were they married?	July 26th 1910		Mar 1st 1908
13. If not married give full Name of Mother.	-	-	-
14. Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
15. What is her occupation?	-	-	-
16. Name of Physician attending.	Dr. Williams	Dr. Williams	Dr. Cambridge
17. Your relation to child.	Father	Father	Mother
18. Were you in house at time of Birth?	Yes	Yes	Yes
19. Certified by	Edward Brookfield	Roy William Miller	Ernest Mayer
20. Address	Sugersall	Sugersall	Sugersall
21. Date	April 1st 1911	April 5th 1911	April 16th 1911
22. Remarks		Still Born	
1. What is the full name of child?	Stevens Mary Grace	Bellaw Emma Louise	Jones Letta
2. When was the child born?	Apr 12th 1911	Mar 27th 1911	Apr 27th 1911
3. Where was the child born? (Street number or Concession and Lot.)	William's Hospital	Cathedral Ave	William's Hospital
4. If in a hospital give the name of the hospital.	Sugersall	Sugersall	Sugersall
5. Male or Female.	Female	Female	Female
6. Are the parents married?	Yes	Yes	Yes
7. Full name of Father.	William H. Stevens	John Albert Bellaw	Charles Henry Jones
8. Occupation of Father.	Merchant	Painter	Cement Worker
9. Full Maiden Name of Mother.	Jane Elizabeth Condit	Mahaley Denton	Esther Elizabeth Houghton
10. If she has been more than once married give names of former husband, or husbands.	-	-	-
11. Where were the parents married?	Sharnford	Sugersall	Sugersall
12. When were they married?	June 22nd 1898	Mar 12th 1907	1908
13. If not married give full Name of Mother.	-	-	-
14. Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
15. What is her occupation?	-	-	-
16. Name of Physician attending.	Dr. West	Dr. McKay	Dr. Cambridge
17. Your relation to child.	Father	Father	Father
18. Were you in house at time of Birth?	Yes	Yes	Yes
19. Certified by	W. H. Stevens	J. A. Bellaw	C. H. Jones
20. Address	Sugersall	Sugersall	Sugersall
21. Date	April 17th 1911	April 26th 1911	April 27th 1911
22. Remarks			Still Born

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1911
 Given under my hand this 29th day of July A.D. 1911
W. H. Stevens Division Registrar of Sugersall

BIRTHS

Margaret Cecelia Johnston, William Johnson, Margaret Ellen Waince, Macdonald Waince, Jessie Gordon Ross, Hattie Irene Paul, Ernest Paul, Florence Gertrude White, Doris Elizabeth Hutt, Hubert Erastus Hutt, Elizabeth Ann Stuart, John Henry Cleave, Annie Irwin, John Wesley Cannon, Cora May Grigg.

County of Wabash

Division of Sugersale

	Surname first	Surname first	Surname first
1. What is the full name of child?	James August Cecilia	William Donald Karlen	Paul Bessie Drew
2. When was the child born? When was the child born? Please specify in Outcomes and Sex.	April 4th 1911	April 21st 1911	April 21st 1911
3. If in a hospital give the name of hospital.	Sugersale	Sugersale	Sugersale
4. Male or Female.	Female	Male	Female
5. Are the parents married?	Yes	Yes	Yes
6. Full name of Father.	William Johnson	Macdonald Wallace	Ernest Arthur Paul
7. Occupation of Father?	Teacher	Teacher	Teacher
8. Full Maiden Name of Mother.	Margaret Ellen Minard	Jessie Gordon Ross	Margaret Cecelia White
9. If she has been more than once married give names of former husband, or husbands.	-	-	-
10. Where were the parents married?	Sugersale	Landers	Sugersale
11. When were they married?	April 14th 1906	April 20th 1904	Mar 25th 1904
12. If not married give full Name of Mother.	-	-	-
13. Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
14. What is her occupation?	-	-	-
15. Name of Physician attended.	Dr. Jeff	Dr. McKay	Dr. McKay
16. Your relation to child.	Mother	Father	Father
17. Were you in home at time of birth?	Yes	Yes	Yes
18. Certified by	Wm W Johnson	Wm Wallace	W A Paul
19. Address	Sugersale	Sugersale	Sugersale
20. Date	April 29th 1911	April 29th 1911	April 29th 1911
21. Remarks			
22. Surname first	Robert Louis Elizabeth	Blaine John Henry	Cannon John Wesley
23. When was the child born? When was the child born? Please specify in Outcomes and Sex.	April 4th 1911	April 14th 1911	May 13th 1911
24. If in a hospital give the name of hospital.	Sugersale	Sugersale	Sugersale
25. Male or Female.	Female	Male	Male
26. Are the parents married?	Yes	Yes	Yes
27. Full name of Father.	Robert Louis Keith	John Henry Blaine	John Wesley Cannon
28. Occupation of Father?	Teacher	Teacher	Teacher
29. Full Maiden Name of Mother.	Elizabeth Ann Black	Anna Drew	Cora May Briggs
30. If she has been more than once married give names of former husband, or husbands.	-	-	-
31. Where were the parents married?	Sugersale	Wabasha	Sugersale
32. When were they married?	Oct 25th 1906	May 11th 1908	Sept 9th 1904
33. If not married give full Name of Mother.	-	-	-
34. Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
35. What is her occupation?	-	-	-
36. Name of Physician attended.	Dr. Rager	Dr. Williams	Dr. Calverly
37. Your relation to child.	Father	Father	Father
38. Were you in home at time of birth?	Yes	Yes	Yes
39. Certified by	W L Keith	J H Blaine	J W Cannon
40. Address	Sugersale	Sugersale	Sugersale
41. Date	May 2nd 1911	May 14th 1911	May 13th 1911
42. Remarks			

June 30th 1911

Wabasha Division Registrar of Sugersale

Brands drew farewell, walace edward roy larvel, may ...
 mogredo, eugenia kennyon, alexander ramsay, effie weir, noran victoria ...
 marion karns, annie victoria smith, viola millicent moyer, leslie willfred moyer, ...
 mable daries, margaret irene karn, james karn, deliaj simmons

BIRTHS

County of Jefferson Division of Ingersoll

	Surname first	Surname first	Surname first
What is the full name of child?	1. <u>Samuel Francis Drew</u>	1. <u>William</u>	1. <u>Ramsay Alexander</u>
When was the child born?	2. <u>April 22nd 1911</u>	2. <u>May 14th 1911</u>	2. <u>May 14th 1911</u>
Where was the child born? Street number or Commission and Lot.	3. <u>Ingersoll</u>	3. <u>Ingersoll</u>	3. <u>Ingersoll</u>
Male or Female.	4. <u>Male</u>	4. <u>Female</u>	4. <u>Male</u>
Are the parents married?	5. <u>Yes</u>	5. <u>Yes</u>	5. <u>Yes</u>
Full name of Father.	6. <u>William Edward Ray Finney</u>	6. <u>Orville William</u>	6. <u>Alexander Ramsay</u>
Occupation of Father?	7. <u>Inspector</u>	7. <u>Machinist</u>	7. <u>Barber</u>
Full Maiden Name of Mother.	8. <u>May Stephens</u>	8. <u>Eugenia Kenyon</u>	8. <u>Effie Weir</u>
If she has been more than once married give names of former husband, or husbands.	9. <u>-</u>	9. <u>-</u>	9. <u>-</u>
Where were the parents married?	10. <u>Clara</u>	10. <u>Washburn</u>	10. <u>Washburn</u>
When were they married?	11. <u>Sept 19th 1906</u>	11. <u>May 24 1905</u>	11. <u>June 22nd 1904</u>
If not married give full Name of Mother.	12. <u>-</u>	12. <u>-</u>	12. <u>-</u>
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13. <u>-</u>	13. <u>-</u>	13. <u>-</u>
What is her occupation?	14. <u>-</u>	14. <u>-</u>	14. <u>-</u>
Name of Physician attending.	15. <u>Dr. Rogers</u>	15. <u>Dr. Williams</u>	15. <u>Dr. Weir</u>
Your relation to child.	16. <u>Father</u>	16. <u>Father</u>	16. <u>Father</u>
Were you in house at time of birth?	17. <u>Yes</u>	17. <u>Yes</u>	17. <u>Yes</u>
Certified by	18. <u>W. E. Finney</u>	18. <u>W. W. Rogers</u>	18. <u>A. Ramsay</u>
Address	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Date	<u>May 16th 1911</u>	<u>May 14th 1911</u>	<u>May 19th 1911</u>
Remarks	<u>-</u>	<u>See card</u>	<u>-</u>
What is the full name of child?	1. <u>Doris Sarah Deloria</u>	1. <u>Mary Kate Millment</u>	1. <u>Karn Margaret Drew</u>
When was the child born?	2. <u>April 28th 1911</u>	2. <u>May 14th 1911</u>	2. <u>April 29th 1911</u>
Where was the child born? Street number or Commission and Lot.	3. <u>Ingersoll</u>	3. <u>Ingersoll</u>	3. <u>Ingersoll</u>
Male or Female.	4. <u>Female</u>	4. <u>Female</u>	4. <u>Female</u>
Are the parents married?	5. <u>Yes</u>	5. <u>Yes</u>	5. <u>Yes</u>
Full name of Father.	6. <u>Wm. Milton Harris</u>	6. <u>Pauline Wilfred Meyer</u>	6. <u>James H. Karn</u>
Occupation of Father?	7. <u>Merchant</u>	7. <u>Machinist</u>	7. <u>Barber</u>
Full Maiden Name of Mother.	8. <u>Doris Deloria Smith</u>	8. <u>Annie Mable Cole</u>	8. <u>Delilah M. Simmons</u>
If she has been more than once married give names of former husband, or husbands.	9. <u>-</u>	9. <u>-</u>	9. <u>-</u>
Where were the parents married?	10. <u>Parauto</u>	10. <u>Washburn</u>	10. <u>Ingersoll</u>
When were they married?	11. <u>Aug 10th 1900</u>	11. <u>Aug 11th 1910</u>	11. <u>Mar 19th 1907</u>
If not married give full Name of Mother.	12. <u>-</u>	12. <u>-</u>	12. <u>-</u>
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13. <u>-</u>	13. <u>-</u>	13. <u>-</u>
What is her occupation?	14. <u>-</u>	14. <u>-</u>	14. <u>-</u>
Name of Physician attending.	15. <u>Dr. Williams</u>	15. <u>Dr. Weir</u>	15. <u>Dr. Rogers</u>
Your relation to child.	16. <u>Father</u>	16. <u>Sandwich</u>	16. <u>Mother</u>
Were you in house at time of birth?	17. <u>Yes</u>	17. <u>Yes</u>	17. <u>Yes</u>
Certified by	18. <u>W. M. Harris</u>	18. <u>Wm. F. Meyer</u>	18. <u>Wm. James H. Karn</u>
Address	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Date	<u>May 22nd 1911</u>	<u>May 27th 1911</u>	<u>May 29th 1911</u>
Remarks	<u>-</u>	<u>-</u>	<u>-</u>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1911

Given under my hand this 29th day of July A.D. 1911

W. A. Smith District Registrar of Ingersoll

BIRTHS

Maxwell Livingston Palmer, William John Palmer, William Isaac Spring, Edna, William Thomas Henry Eden, John Marshall Smith, Donald Smith, Edna, Jennie Evelyn Waterhouse, Robert William Waterhouse, May Little, Victoria May Skinner, Frank Skinner, Rosina Brittle Brittle, Hazel Maud Crane, John Crane, Ora May Case

County of Jefferson

Division of Virginia

	Surname first	Surname first	Surname first
1. What is the full name of child?	Summer August Benjamin Pittman	Eden Isaac Spring	Eden David Smith
2. When was the child born?	May 11th 1911	May 7th 1911	May 7th 1911
3. Where was the child born? If in a hospital give its name.	Cambridge St. Sugar Hill	Thomas St. Sugar Hill	Thomas St. Sugar Hill
4. Male or Female?	male	male	male
5. Are the parents married?	yes	yes	yes
6. Full name of Father.	John Francis Currey Summer	William Thomas Young Eden	William Thomas Henry Eden
7. Occupation of Father?	carpenter	Machinist	Machinist
8. Full Maiden Name of Mother.	Elizabeth May Pittman	Oliver Russell Smith	Oliver Russell Smith
9. If she has been more than once married give names of former husband, or husbands.	-	-	-
10. Where were the parents married?	Silver Spring	Sugar Hill	Sugar Hill
11. When were they married?	July 20th 1910	July 22 1909	July 2nd 1909
12. If not married give full name of Mother.	-	-	-
13. Is the single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
14. What is her occupation?	-	-	-
15. Name of Physician attending.	Dr. Calveridge	Dr. McKay	Dr. McKay
16. Your relation to child.	father	grandmother	grandmother
17. Were you in house at time of birth?	yes	yes	yes
18. Certified by	John Summer	Annie M. Smith	Annie M. Smith
19. Address	Sugar Hill	Sugar Hill	Sugar Hill
20. Date	June 5th 1911	June 7th 1911	June 7th 1911
21. Remarks			
1. What is the full name of child?	William Francis Evelyn	William Ireland May	Rosina George March
2. When was the child born?	May 13th 1911	May 27th 1911	May 22nd 1911
3. Where was the child born? If in a hospital give its name.	Cambridge St. Sugar Hill	Charles St. Sugar Hill	Charles St. Sugar Hill
4. Male or Female?	female	female	female
5. Are the parents married?	yes	yes	yes
6. Full name of Father.	Robert William Waterhouse	Frank Skinner	John Case
7. Occupation of Father?	merchant	Barman U.S.A.	Chaloner
8. Full Maiden Name of Mother.	Elizabeth May Little	Rosina Brittle	Orin May Case
9. If she has been more than once married give names of former husband, or husbands.	-	-	-
10. Where were the parents married?	Cambridge	Silver Spring	United States
11. When were they married?	July 11th 1907	Sept 13th 1906	May 15th 1900
12. If not married give full name of Mother.	-	-	-
13. Is the single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
14. What is her occupation?	-	-	-
15. Name of Physician attending.	Dr. Williams	Dr. Jeff	Dr. Jeff
16. Your relation to child.	father	mother	father
17. Were you in house at time of birth?	yes	yes	yes
18. Certified by	Robert Waterhouse	Mr. Skinner	John Case
19. Address	Sugar Hill	Sugar Hill	Sugar Hill
20. Date	June 13th 1911	June 15th 1911	June 22nd 1911
21. Remarks			

BIRTHS

Frankford Henry Hurd, Wesley Hurd, Annie Jane Smith, Nellie E. Wright, Rosa
 Frederick W. H. Mayberry, Percy Ross Mayberry, Florence M. Howard
 Paterson, Stewart Paterson, Leannet Adams, Frederick Morris Dollinger, Homer
 Dollinger, Vina Dorland, Estella Jean Brown, James Leroy Brown, Blanch Dundas
 Dunmass

County of Jefferson Division of Original

	Surname First	Surname First	Surname First
1 What is the full name of child?	Edward Frankford Hurd	Wright Nellie Ormud	Mayberry Frederick Keith
2 When was the child born?	May 26th 1911	June 26th 1911	June 26th 1911
3 Where was the child born? Street number or Concession and Lot.	Village of Sugermead	Village of Sugermead	Village of Sugermead
4 If in a hospital give its name.			
5 Male or Female.	Male	Female	Male
6 Are the parents married?	Yes	Yes	Yes
7 Full name of Father.	Wesley Hurd	R. M. Wright	Corey Ross Mayberry
8 Occupation of Father?	Butcher	Barman County Roads	Stephane Dupond
9 Full Maiden Name of Mother.	Ann Marie Hurd	Rosa Keelley	Florence Dunmass
10 If she has been more than once married give names of former husband, or husbands.			
11 Where were the parents married?	Sugermead	Richard W. Hurd	
12 When were they married?	Sept 2nd 1908	Springfield Ark	
13 If not married give full Name of Mother.		July 11th 1903	
14 Is she single or a Widow? If a widow state name, occupation, and date of husband's death.			
15 What is her occupation?			
16 Name of Physician attending.	Dr. W. G. Calender	Dr. McDonald	Dr. McKay
17 Your relation to child.	Mother	Partner	Partner
18 Were you in house at time of birth?	Yes	No	Yes
19 Certified by	Wesley Hurd	R. M. Wright	Corey Ross Mayberry
20 Address	Sugermead	Sugermead	Sugermead
21 Date	June 26th 1911	June 26th 1911	July 10th 1911
22 Remarks			

	Surname First	Surname First	Surname First
1 What is the full name of child?	Calman Howard Ceter	Dallinger Hubert Morris	Brown Estella Jean
2 When was the child born?	June 16th 1911	July 2nd 1911	July 11th 1911
3 Where was the child born? Street number or Concession and Lot.	Village of Sugermead	Village of Sugermead	Village of Sugermead
4 If in a hospital give its name.			
5 Male or Female.	Male	Male	Female
6 Are the parents married?	Yes	Yes	Yes
7 Full name of Father.	Howard Calman	Harold Dallinger	James Hubert Brown
8 Occupation of Father?	Calman	Machinist	Shoe Maker
9 Full Maiden Name of Mother.	Janet Adams	Alma Barlow	Blanch Dundas
10 If she has been more than once married give names of former husband, or husbands.			
11 Where were the parents married?	California	Saranto	
12 When were they married?	July 28th 1910	Nov 13th 1910	
13 If not married give full Name of Mother.			
14 Is she single or a Widow? If a widow state name, occupation, and date of husband's death.			
15 What is her occupation?			
16 Name of Physician attending.	Dr. McKay	Dr. McKay	Dr. McKay
17 Your relation to child.	Partner	Partner	Partner
18 Were you in house at time of birth?	Yes	Yes	Yes
19 Certified by	H. Calman	H. Dallinger	J. H. Brown
20 Address	Sugermead	Sugermead	Sugermead
21 Date	July 13th 1911	July 2nd 1911	July 21st 1911
22 Remarks		Hill Barn	Hill Barn

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending July 30th 1911
 Given under my hand this 21st day of Oct A.D. 1911
W. H. Dunmass
 District Registrar of Sugermead

*M. H. The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.

BIRTHS

County of Jefferson

Division of Independence

	Surname First	Surname First	Surname First
What is the full name of child?	Moore Marie Rowena	Edwards Gordon Thomas	Walker Edwin Katherine
When was the child born?	July 20th 1911	July 20th 1911	July 20th 1911
Where was the child born?	Independence	Independence	Independence
Male or Female.	Female	Male	Female
Are the parents married?	Yes	Yes	Yes
Full name of Father.	Richard J. Moore	Samuel Rogers Edwards	Harriett A. Walker
Occupation of Father?	Machinist	Machinist	Therapist
Full Maiden Name of Mother.	Elizabeth Ann Edwards	Mary Ann Edwards	Elizabeth Walker
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	Independence	Independence	Independence
When were they married?	July 25th 1901	11th Feb 1909	Dec 14th 1905
If not married give full Name of Mother.	-	-	-
Is she single or a Widow?	-	-	-
If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	Dr. H. H. Haff	Dr. Brewster	Dr. H. H. Haff
Your relation to child.	Mother	Father	Father
Were you in house at time of birth?	Yes	Yes	Yes
Certified by	Mary J. Moore	W. A. Edwards	W. A. Walker
Address	Independence	Independence	Independence
Date	Aug 10th 1911	Aug 10th 1911	Aug 11th 1911
Remarks			
What is the full name of child?	Frank Ellen Christine Rose	William Jackson Marley	Charles Darwin Violet Jean
When was the child born?	July 20th 1911	July 20th 1911	July 20th 1911
Where was the child born?	Independence	Independence	Independence
Male or Female.	Female	Male	Female
Are the parents married?	Yes	Yes	Yes
Full name of Father.	Frank Emmanuel Frank	John Edward William	Thomas Charles
Occupation of Father?	Superintendent	Banker	Banker
Full Maiden Name of Mother.	Barbara Ann Edwards	Kathleen Marie Smith	Violet Jean
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	Independence	England	England
When were they married?	2nd April 1901	2nd June 1901	27th July 1904
If not married give full Name of Mother.	-	-	-
Is she single or a Widow?	-	-	-
If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	Dr. H. H. Haff	Dr. H. H. Haff	Dr. H. H. Haff
Your relation to child.	Mother	Mother	Mother
Were you in house at time of birth?	Yes	Yes	Yes
Certified by	W. A. Frank	Mary J. William	Mrs. Violet Charles
Address	Independence	Independence	Independence
Date	Aug 24th 1911	Aug 24th 1911	Aug 24th 1911
Remarks			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th - 1911
 Given under my hand this 21st day of Oct A. D. 1911
W. A. Edwards Division Registrar of Independence

BIRTHS

William John Clayton, Florence Fay or Joseph Arthur Jones, Isabella Elizabeth Foster, Margaret Norton, Margaret Cole, Harry Cole, Margaret Ann, John Arnold Brown, James Leroy Brown, Blanch Dundas Fraser, Phoebe Alexina Gussler and Frederick Sultherland, Annie Pardoe, Rosetta Maud Purton, Charles Purton, Henry Stockwell.

County of Oxford Division of Sugarsall

	Surname First	Surname First	Surname First
What is the full name of child?	Clayton William John	Spencer John Anthony	Cole Margaret
When was the child born?	July 11th 1911	July 11th 1911	Aug 9th 1911
Where was the child born?	If in a hospital give the name of the hospital and Loc.	If in a hospital give the name of the hospital and Loc.	If in a hospital give the name of the hospital and Loc.
Male or Female?	Male	Male	Female
Are the parents married?	Yes	Yes	Yes
Full name of Father?	William Clayton	Richard Alexander Spencer	Henry Cole
Occupation of Father?	Labourer	Maritime	Labourer
Full Maiden Name of Mother?	Florence Taylor	Margaret Sherman	Margaret Cole
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	England	Sugarsall	Sugarsall
When were they married?	22nd April 1910	12th Aug 1902	11th Sept 1907
If not married give full name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	Dr Colveridge	Dr McKay	Dr McKay
Your relation to child.	Mother	Father	Mother
Were you in house at time of birth?	Yes	Yes	Yes
Certified by	Wm W Clayton	J J Foster	Margaret Cole
Address	Sugarsall	Sugarsall	Sugarsall
Date	Aug 24th 1911	Sept 2nd 1911	Sept 9th 1911
Remarks			
What is the full name of child?	Rodriguez Estelle	Procter Alarina	Burlan Rosetta Maud
When was the child born?	Aug 11th 1911	Aug 12th 1911	Aug 10th 1911
Where was the child born?	If in a hospital give the name of the hospital and Loc.	If in a hospital give the name of the hospital and Loc.	If in a hospital give the name of the hospital and Loc.
Male or Female?	Female	Female	Female
Are the parents married?	Yes	Yes	Yes
Full name of Father?	James McKay Brown	Richard W Burlanland	Charles Burlan
Occupation of Father?	Labourer	Sailor	Labourer
Full Maiden Name of Mother?	Blanch Dundas Fraser	Annie Pardoe	Emily Blackwell
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	Wales	Sugarsall	England
When were they married?	16th June 1907	17th Oct 1906	20th Aug 1903
If not married give full name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	Dr McKay	Dr McKay	Dr McKay
Your relation to child.	Father	Father	Mother
Were you in house at time of birth?	Yes	Yes	Yes
Certified by	J J Brown	R W Burlanland	Mr C Burlan
Address	Sugarsall	Sugarsall	Sugarsall
Date	Sept 10th 1911	Sept 11th 1911	Sept 12th 1911
Remarks			

BIRTHS

County of Orford

Division of Singersale

	Surname first	Surname first	Surname first
What is the full name of child?	<u>Sumphrey Olive Emma</u>	<u>Desmond Lawrence Marshall</u>	<u>Hampton William Archie</u>
When was the child born?	<u>2 June 20th 1911</u>	<u>2 Sept 20th 1911</u>	<u>2 June 20th 1911</u>
Where was the child born? Street number or Concession and Lot.	<u>Unrecorded</u>	<u>Unrecorded</u>	<u>Unrecorded</u>
3 If in a hospital give its name.	<u>Singersale</u>	<u>Singersale</u>	<u>Singersale</u>
Male or Female.	<u>Female</u>	<u>Male</u>	<u>Male</u>
Are the parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>John David Sumphrey</u>	<u>Walter James Desmond</u>	<u>Walker Oscar Hampton</u>
Occupation of Father?	<u>Barber</u>	<u>Mechanic</u>	<u>Miller</u>
Full Maiden Name of Mother.	<u>Elizabeth Parsons</u>	<u>Kula Elizabeth Ballou</u>	<u>Edith Maud Russell</u>
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	<u>East Orange</u>	<u>Singersale</u>	<u>East Orange</u>
When were they married?	<u>12th April 1909</u>	<u>9th July 1908</u>	<u>11th May 1908</u>
If not married give full Name of Mother.	-	-	-
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	<u>Dr. McKay</u>	<u>Dr. McKay</u>	<u>Dr. Rogers</u>
Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Mother</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>John D. Sumphrey</u>	<u>W. J. Desmond</u>	<u>Wm. W. Hampton</u>
Address	<u>Singersale</u>	<u>Singersale</u>	<u>Singersale</u>
Date	<u>Sept 21st 1911</u>	<u>Sept 27th 1911</u>	<u>Sept 20th 1911</u>
Remarks			

	Surname first	Surname first	Surname first
What is the full name of child?	1	1	1
When was the child born?	2	2	2
Where was the child born? Street number or Concession and Lot.	3	3	3
8 If in a hospital give its name.		8 If in a hospital give its name.	8 If in a hospital give its name.
Male or Female.	4	4	4
Are the parents married?	5	5	5
Full name of Father.	6	6	6
Occupation of Father?	7	7	7
Full Maiden Name of Mother.	8	8	8
If she has been more than once married give names of former husband, or husbands.	9	9	9
Where were the parents married?	10	10	10
When were they married?	11	11	11
If not married give full Name of Mother.	12	12	12
Is she single, or a Widow? If a widow state name, occupation, and date of husband's death.	13	13	13
What is her occupation?	14	14	14
Name of Physician attending.	15	15	15
Your relation to child.	16	16	16
Were you in house at time of Birth?	17	17	17
Certified by	18	18	18
Address			
Date			
Remarks			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1911

Given under my hand this 21st day of Oct A. D. 1911

Division Registrar of Births

BIRTHS

Edna Patricia Ows, Dennis Howe, Harry Curran, Ann Bernice Darling, Joseph Zurbigo, Effie Rachel Farncomb, George Schram, William Schram, Matilda Bellantone, William Thompson Talbot, William Lewis Talbot, Cora Louise Crockett, Elizabeth Hurst, Arthur Henry Hurst, Frances Smith, Helen Martha Mann, Charles Joseph Pellow, Margaret Jane Sadebauer

County of Jefferson

Division of Virginia

	Surname First	Surname First	Surname First
What is the full name of child?	George Main Betters	Charles Alvin Parnie	Behram George
When was the child born?	12th Oct 1911	14th Oct 1911	14th Nov 1911
Where was the child born? Street number or Old number and Loc.	Cherry St Suggs	Charles St Suggs	Cherry St Suggs
Sex of Child.	Male	Male	Male
Are the parents married?	Yes	Yes	Yes
Full name of Father.	Samuel Deane	Samuel Gurbidge	William Behram
Occupation of Father?	Miner	Butcher	Butcher
Full Maiden Name of Mother.	Mary Curran	Effie Rachel Farncomb	Matilda Bellantone
If she has been more than once married give names of former husband, or husbands.	-	-	-
When were the parents married?	Suggs	Waller St	London
When were they married?	30th Aug 1902	15 July 1906	6th June 1909
If not married give full name of Mother.	-	-	-
If the child is a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	Dr Rogers	Dr Hill	Dr Rogers
Your relation to child.	Father	Father	Father
Were you in house at time of birth?	Yes	Yes	Yes
Certified by	W Deane	S H Gurbidge	W Behram
Address	Suggs	Suggs	Suggs
Date	Nov 4th 1911	Nov 7th 1911	Nov 9th 1911
Remarks			
What is the full name of child?	Robert William Thompson	Benjamin Elizabeth	Belle Wilton Martha Marie
When was the child born?	2nd Oct 1911	12th Nov 1911	2nd Oct 1911
Where was the child born? Street number or Old number and Loc.	Franklin St Suggs	William St Suggs	Cherry St Suggs
Sex of Child.	Male	Female	Female
Are the parents married?	Yes	Yes	Yes
Full name of Father.	William Lewis Talbot	Arthur Henry Hurst	Charles North Bellon
Occupation of Father?	Merchant	Butcher	Butcher
Full Maiden Name of Mother.	Elizabeth Talbot	Frances E Smith	Margaret Jane Sadebauer
If she has been more than once married give names of former husband, or husbands.	-	-	-
When were the parents married?	Parish	London	London
When were they married?	11th June 1902	28th Nov 1910	19th June 1909
If not married give full name of Mother.	-	-	-
If the child is a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	Dr Hill	Dr Williams	Dr Rogers
Your relation to child.	Father	Father	Father
Were you in house at time of birth?	Yes	Yes	Yes
Certified by	W L Talbot	A H Hurst	Ch North
Address	Suggs	Suggs	Suggs
Date	Nov 15th 1911	Nov 14th 1911	Nov 22nd 1911
Remarks			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1911
 Given under my hand this 15th day of November A.D. 1911
 Division of Virginia

BIRTHS

County of Offard

Division of Sugersall

	Surname First	Surname First	Surname First
1. What is the full name of child?	Richardson Robert Gray	Sandwich Andrew Thomas	McMahon Mary Theresa
2. When was the child born?	13th Nov 1911	11th Nov 1911	16th Nov 1911
3. Where was the child born?	Ball St	Ann St	Ball St
4. Sex?	Male	Male	Female
5. Are the parents married?	Yes	Yes	Yes
6. Full name of Father?	Robert W Richardson	Thomas Sandwich	Kevin J McMahon
7. Occupation of Father?	Seamster	Carpenter	Brake
8. Full Maiden Name of Mother?	Emily Charlotte Ribble	Elizabeth Linda Staples	Mary Barnes
9. If she has been more than once married give names of former husband, or husbands.	-	-	-
10. Where were the parents married?	Doris Ave	Sugersall	Sugersall
11. When were they married?	1st Oct 1906	2nd April 1905	7th Sept 1907
12. If not married give full Name of Mother.	-	-	-
13. Is she single or a Widow?	-	-	-
14. If a widow state name, occupation, and date of husband's death.	-	-	-
15. What is her occupation?	-	-	-
16. Name of Physician attending?	Dr. Jeff	Dr. Williams	Dr. McKay
17. Your relation to child?	Father	Father	Father
18. Were you in house at time of birth?	Yes	Yes	Yes
19. Certified by	R. W Richardson	Thos. Sandwich	Thos. McMahon
20. Address	Sugersall	Sugersall	Sugersall
21. Date	Dec 4th 1911	Dec 9th 1911	Dec 9th 1911
22. Remarks			
1. What is the full name of child?	Elizabeth Helen Bealier	Rachel Florence Bealier	Rosevelt Kenneth Mitchell
2. When was the child born?	21st Nov 1911	20th Nov 1911	22nd Nov 1911
3. Where was the child born?	Victoria St	Theresa St	King St
4. Sex?	Female	Female	Male
5. Are the parents married?	Yes	Yes	Yes
6. Full name of Father?	William W. Elford	Bealier Rachel	William Owsen Roosevelt
7. Occupation of Father?	Baker	Mariner	Ret Surgeon
8. Full Maiden Name of Mother?	Charlotte Eliza Bealier	Mary High	Florence May Mitchell
9. If she has been more than once married give names of former husband, or husbands.	-	-	-
10. Where were the parents married?	Sugersall	Sugersall	Sugersall
11. When were they married?	20th June 1906	22nd June 1908	27th Sept 1907
12. If not married give full Name of Mother.	-	-	-
13. Is she single or a Widow?	-	-	-
14. If a widow state name, occupation, and date of husband's death.	-	-	-
15. What is her occupation?	-	-	-
16. Name of Physician attending?	Dr. Jeff	Dr. Williams	Dr. Williams
17. Your relation to child?	Father	Mother	Father
18. Were you in house at time of birth?	No	Yes	Yes
19. Certified by	W. W. Elford	Wm. B. Bealier	W. B. Bealier
20. Address	Sugersall	Sugersall	Sugersall
21. Date	Dec 11th 1911	Dec 19th 1911	Dec 20th 1911
22. Remarks			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1911
 Given under my hand this 11th day of Dec A.D. 1911
W. J. Gammitt Division Registrar of Sugersall

Month	Day	Address	Child by	Age of Child	Sex	Color	Weight	Length	Head	Birth	Remarks
Oct 20	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
Oct 15	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
Oct 10	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
Oct 5	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
Oct 1	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
Sept 25	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
Sept 20	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
Sept 15	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
Sept 10	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
Sept 5	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
Sept 1	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
Aug 25	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
Aug 20	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
Aug 15	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
Aug 10	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
Aug 5	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
Aug 1	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
July 25	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
July 20	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
July 15	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
July 10	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
July 5	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
July 1	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
June 25	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
June 20	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
June 15	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
June 10	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
June 5	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
June 1	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
May 25	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
May 20	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
May 15	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
May 10	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
May 5	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
May 1	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
April 25	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
April 20	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
April 15	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
April 10	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
April 5	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
April 1	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
March 25	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
March 20	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
March 15	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
March 10	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
March 5	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
March 1	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
February 25	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
February 20	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
February 15	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
February 10	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
February 5	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
February 1	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
January 25	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
January 20	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
January 15	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
January 10	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
January 5	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...
January 1	1911	Orange, Va.	Dr. W. H. ...	...	...	...	...	...	...	...	...

Paternal and maternal names of parents, names of child
 (libes, aurey, laurent, barker, george, barker, laura,
 ethel, laury)

BIRTHS

County of Jefferson

Division of Surgeons

	Surname First	Surname First	Surname First
1 What is the full name of child?	Robinson Florence Jean	Barker Audrey Harriet	1
2 When was the child born?	21st Dec 1911	11th Dec 1911	2
3 Where was the child born? (Name of street or Division and Loc.)	Charles St	Carnegie St	3 If in a hospital give its name.
4 Male or Female?	Female	Male	4
5 Are the parents married?	Yes	Yes	5
6 Full name of Father	William Robinson	Henry Albert Barker	6
7 Occupation of Father?	Rubber	Teacher	7
8 Full Name of Mother	Florence Abbott	Hannah Elizabeth Barker	8
9 If she has been more than once married give names of former husband, or husbands.	-	-	9
10 Where were the parents married?	Shenington	Trinity Episcopal Co	10
11 When were they married?	30th Dec 1902	21st Dec 1904	11
12 If not married give full name of Mother.	-	-	12
13 Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	13
14 What is her occupation?	-	-	14
15 Name of Physician attending.	D. Williams	D. McKay	15
16 Your relation to child.	Mother	Father	16
17 Were you in house at time of birth?	Yes	Yes	17
18 Certified by	Wm W Robinson	H. A. Barker	18
19 Address	Surgeons	Surgeons	
20 Date	Dec 21st 1911	Dec 21st 1911	
21 Remarks			

	Surname First	Surname First	Surname First
1 What is the full name of child?		1	1
2 When was the child born?		2	2
3 Where was the child born? (Name of street or Division and Loc.)		3 If in a hospital give its name.	3 If in a hospital give its name.
4 Male or Female?		4	4
5 Are the parents married?		5	5
6 Full name of Father		6	6
7 Occupation of Father?		7	7
8 Full Name of Mother		8	8
9 If she has been more than once married give names of former husband, or husbands.		9	9
10 Where were the parents married?		10	10
11 When were they married?		11	11
12 If not married give full name of Mother.		12	12
13 Is she single or a Widow? If a widow state name, occupation, and date of husband's death.		13	13
14 What is her occupation?		14	14
15 Name of Physician attending.		15	15
16 Your relation to child.		16	16
17 Were you in house at time of birth?		17	17
18 Certified by		18	18
19 Address			
20 Date			
21 Remarks			

Births
 as far as all still births as births
 as well as deaths.

BIRTHS

albert h. modern, emilia macy
 enright, norma elizabeth hart, john henry hart, amelia harris
 narold osborne smith, Percy Leroy Smith, Ethel Jane Longfield, Clifford
 Milton Stephenson, Mary Esther Graydon, Josephine Haines, Maria
 Haines, Mabel Schamburg Schramberg, Albert Francis Looney,
 Gertrude Simes

County of *Jefferson*

Division of *Waverly*

	Surname First	Surname First	Surname First
1 What is the full name of child?	<i>William Lawrence</i>	<i>Elizabeth Bligh</i>	<i>Donald Harold Osborn</i>
2 When was the child born?	<i>Jan 14th 1912</i>	<i>Jan 14th 1912</i>	<i>Jan 14th 1912</i>
3 Where was the child born? Street number or Concession and Loc.	<i>St. Joseph's Hospital Waverly</i>	<i>St. Joseph's Hospital Waverly</i>	<i>St. Joseph's Hospital Waverly</i>
4 Male or Female	<i>Male</i>	<i>Female</i>	<i>Male</i>
5 Are the parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
6 Full name of Father	<i>Arthur Leonard McNamee</i>	<i>John Henry Hart</i>	<i>Charles Ray Osborn</i>
7 Occupation of Father?	<i>Electrician</i>	<i>Electrician</i>	<i>Merchant</i>
8 Full Maiden Name of Mother	<i>William May Knight</i>	<i>Estelle Davis</i>	<i>Edith Jane Longfield</i>
9 If she has been more than once married give names of former husband, or husbands.	-	-	-
10 Where were the parents married?	<i>Chicago</i>	<i>England</i>	<i>Waverly</i>
11 When were they married?	<i>April 20th 1903</i>	<i>Jan 2nd 1904</i>	<i>Nov 4th 1908</i>
12 If not married give full Name of Mother	-	-	-
13 Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
14 What is her occupation?	-	-	-
15 Name of Physician attending.	<i>Dr. McKay</i>	<i>Dr. Rogers</i>	<i>Dr. Rogers</i>
16 Your relation to child.	<i>Father</i>	<i>Father</i>	<i>Father</i>
17 Were you in house at time of birth?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
18 Certified by	<i>Arthur L. McNamee</i>	<i>John H. Hart</i>	<i>Charles R. Osborn</i>
19 Address	<i>Waverly</i>	<i>Waverly</i>	<i>Waverly</i>
20 Date	<i>July 1st 1912</i>	<i>July 9th 1912</i>	<i>July 9th 1912</i>
21 Remarks	-	-	-
22 State if Twin, Triplet, Illegitimate or Still Birth.	-	-	-
1 What is the full name of child?	<i>William Miller</i>	<i>William Beeline</i>	<i>Frank</i>
2 When was the child born?	<i>Jan 14th 1912</i>	<i>July 2nd 1912</i>	<i>July 2nd 1912</i>
3 Where was the child born? Street number or Concession and Loc.	<i>St. Joseph's Hospital Waverly</i>	<i>St. Joseph's Hospital Waverly</i>	<i>St. Joseph's Hospital Waverly</i>
4 Male or Female	<i>Male</i>	<i>Female</i>	<i>Female</i>
5 Are the parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
6 Full name of Father	<i>Charles Miller Hansen</i>	<i>William Barnes</i>	<i>Arthur Francis Sackett</i>
7 Occupation of Father?	<i>Machinist</i>	<i>Bookbinder</i>	<i>Bookbinder</i>
8 Full Maiden Name of Mother	<i>May Esther Bayless</i>	<i>Mabel E. Chamberly</i>	<i>Katherine Simes</i>
9 If she has been more than once married give names of former husband, or husbands.	-	-	-
10 Where were the parents married?	<i>Camden</i>	<i>Waverly</i>	<i>Waverly</i>
11 When were they married?	<i>Jan 14th 1906</i>	<i>July 20th 1910</i>	<i>Nov 2nd 1902</i>
12 If not married give full Name of Mother	-	-	-
13 Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
14 What is her occupation?	-	-	-
15 Name of Physician attending.	<i>Dr. McKay</i>	<i>Dr. McKay</i>	<i>Dr. Williams</i>
16 Your relation to child.	<i>Father</i>	<i>Father</i>	<i>Father</i>
17 Were you in house at time of birth?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
18 Certified by	<i>Charles Miller Hansen</i>	<i>William Barnes</i>	<i>Arthur F. Sackett</i>
19 Address	<i>Waverly</i>	<i>Waverly</i>	<i>Waverly</i>
20 Date	<i>July 1st 1912</i>	<i>July 19th 1912</i>	<i>July 2nd 1912</i>
21 Remarks	-	-	-
22 State if Twin, Triplet, Illegitimate or Still Birth.	-	<i>Still born</i>	<i>Still born</i>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending *Jan 21st* 1912
 Given under my hand this *12th* day of *April* A.D. 1912
William Simes
 Division Registrar of *Waverly*

BIRTHS

Margaret Ann McPherson, John Patrick McPherson, Emma Ann McPherson, George Lee, Wong Wang Hee, Pauline Moore, John Joseph Moore, Frances Sully, Charles Frederick Goodwin, Arthur Goodwin, Mary Ann Dewitt, Edith May Todd, William Todd, Cecile Reardon, John Joseph Reardon, Charles John Reardon, Richard, Myrtle Edith Reardon

County of Alford

Division of Superior

	Surname First	Surname First	Surname First
What is the full name of child?	William Benjamin Jones	Geo. Belle	Maera Belle
When was the child born?	July 2nd 1912	July 2nd 1912	July 27th 1911
Where was the child born?	At a hospital give the name	At a hospital give the name	At a hospital give the name
Sex of Female	Female	Male	Male
Are the parents married?	Yes	Yes	Yes
Full name of Father	John Belle McPherson	George Lee	John Joseph Moore
Occupation of Father?	Byers Construction	Hamday	Butcher
Full Maiden Name of Mother	Lucy Ruth Dickson	Alvina Lee	Frances Ramsey
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	Superior	China	Superior
When were they married?	Oct 19th 1910	Oct 15th 1902	July 26th 1907
If not married give full name of Mother	-	-	-
Is the child of a Widow?	-	-	-
If a widow a wife name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending	Dr. W. Williams	Dr. Carridge	Dr. McKay
Your relation to child	Father	Father	Father
Were you in house at time of birth?	Yes	Yes	Yes
Certified by	J. O. McPherson	George Lee	John J. Moore
Address	Superior	Superior	Superior
Date	July 18th 1912	July 17th 1912	July 26th 1912
Remarks			
State if Twin, Triple, etc. give name of full birth.			
What is the full name of child?	William Charles Johnson	David Belle May	Richard James Morrison
When was the child born?	July 2nd 1912	July 2nd 1912	June 27th 1912
Where was the child born?	At a hospital give the name	At a hospital give the name	At a hospital give the name
Sex of Female	Male	Female	Female
Are the parents married?	Yes	Yes	Yes
Full name of Father	William Charles Johnson	William Henry Bell	John Dealey Richards
Occupation of Father?	Farmer	Farmer	Farmer
Full Maiden Name of Mother	Mary Jane Bell	Alvina Lee	Myrtle Edith Reardon
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	Monticello	Monticello	Monticello
When were they married?	Oct 9th 1908	Oct 14th 1907	Apr 7th 1907
If not married give full name of Mother	-	-	-
Is the child of a Widow?	-	-	-
If a widow a wife name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending	Dr. Bell	Dr. Bell	Dr. McKay
Your relation to child	Father	Father	Father
Were you in house at time of birth?	Yes	Yes	Yes
Certified by	W. C. Johnson	W. C. Bell	J. D. Richards
Address	Superior	Superior	Superior
Date	July 1st 1912	July 2nd 1912	July 26th 1912
Remarks			
State if Twin, Triple, etc. give name of full birth.			

BIRTHS

County of Jefferson

Division of Ingersoll

	Surname First	Surname First	Surname First
1. What is the full name of child?	Dorment Anthony Ray	Clarence Minnie Matilda	Julius Albert Henry
2. When was the child born?	July 16th 1912	1st Mar 1912	15th March 1912
3. Where was the child born? (If in a hospital give its name)		Ingersoll	Ingersoll
4. Male or Female?	Male	Female	Male
5. Are the parents married?	Yes	Yes	Yes
6. Full name of Father?	Ralph Dorment	John Henry Cleave	Alfred W. Fuller
7. Occupation of Father?		Bookbinder	Bookbinder
8. Full Maiden Name of Mother?	Wagon Ingersoll	Minie Irvine	Minie Elizabeth Cleave
9. If she has been more than once married give names of former husband, or husbands.	-	-	-
10. Where were the parents married?	Ingersoll	Washburn	England
11. When were they married?	24th Sept 1910	May 11th 1912	Mar 26th 1907
12. If not married give full name of Mother.	-	-	-
13. Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
14. What is her occupation?	-	-	-
15. Name of Physician attending.	Dr. Kelly	Dr. Carfield	Dr. Kelly
16. Your relation to child.	Father	Father	Father
17. Were you in house at time of birth?	Yes	Yes	Yes
18. Certified by	Ralph Dorment	John Henry Cleave	Alfred W. Fuller
19. Address	Ingersoll	Ingersoll	Ingersoll
20. Date	Apr 2nd 1912	Apr 11th 1912	Apr 11th 1912
21. Remarks			
22. State if Twin, Triplet, Illegitimate or Still Birth.			
1. What is the full name of child?	William John Elizabeth	Maude Elizabeth	Amelina Violet May
2. When was the child born?	15th March 1912	22nd March 1912	1st April 1912
3. Where was the child born? (If in a hospital give its name)	Ingersoll	Ingersoll	Ingersoll
4. Male or Female?	Female	Male	Female
5. Are the parents married?	Yes	Yes	Yes
6. Full name of Father?	Henry J. Currier	Wm. Elizabeth Taylor	John Amelina
7. Occupation of Father?	Machinist	Machinist	Engineer
8. Full Maiden Name of Mother?	Elizabeth B. Manning	Maude Elizabeth	Maude Elizabeth
9. If she has been more than once married give names of former husband, or husbands.	-	-	-
10. Where were the parents married?	Beachville	Beachville	Beachville
11. When were they married?	21st May 1892	2nd Oct 1901	May 16th 1896
12. If not married give full name of Mother.	-	-	-
13. Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
14. What is her occupation?	-	-	-
15. Name of Physician attending.	Dr. McKay	Dr. Carfield	None
16. Your relation to child.	Father	Father	Mother
17. Were you in house at time of birth?	Yes	Yes	Yes
18. Certified by	Elizabeth B. Manning	Wm. Elizabeth Taylor	John Amelina
19. Address	Ingersoll	Ingersoll	Ingersoll
20. Date	Apr 11th 1912	Apr 15th 1912	Apr 16th 1912
21. Remarks			
22. State if Twin, Triplet, Illegitimate or Still Birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1912

Given under my hand this 17th day of July A.D. 1912

Division Registrar of Births

*N.B.—The reference numbers relate to those found in Form 2 or 3, as an aid to searching.

BIRTHS

Carl and Karl, Archibald McKenzie Kerr, Doris Marie Seldon, George ...
 William Turner, Robert Oliver Jenkins, Hugh Allen Jenkins, Margaret ...
 Joseph Michael O'Dourke, Daniel O'Dourke, Eva Forrest, Adela May Young,
 William Arthur Young, Madge Bellairs, Robert Walk, William Walk, May Wood.

County of Alford

Division of Ingersoll

	Surname First	Surname First	Surname First
1. What is the full name of child?	1. <u>New Catherine</u>	1. <u>Banagy George</u>	1. <u>Jenkins Richard Oliver</u>
2. When was the child born?	2. <u>20th April 1912</u>	2. <u>20th April 1912</u>	2. <u>March 31st 1912</u>
3. Where was the child born? (House number or Convent and Loc.)	3. <u>Alford, Ingersoll</u>	3. <u>Alford, Ingersoll</u>	3. <u>Alford, Ingersoll</u>
4. Sex of Female?	4. <u>Female</u>	4. <u>Male</u>	4. <u>Male</u>
5. Are the parents married?	5. <u>Yes</u>	5. <u>Yes</u>	5. <u>Yes</u>
6. Full name of Father?	6. <u>Archibald McKenzie Kerr</u>	6. <u>George Banagy</u>	6. <u>Hugh Allen Jenkins</u>
7. Occupation of Father?	7. <u>Banker</u>	7. <u>Labourer</u>	7. <u>Mechanic</u>
8. Full Maiden Name of Mother?	8. <u>Edna Maria Bellair</u>	8. <u>William Turner</u>	8. <u>Margaret Bell Bellair</u>
9. If she has been more than once married give names of former husband, or husbands.	9. <u>-</u>	9. <u>-</u>	9. <u>-</u>
10. Where were the parents married?	10. <u>Ingersoll</u>	10. <u>England</u>	10. <u>Ingersoll</u>
11. When were they married?	11. <u>June 16th 1905</u>	11. <u>July 11th 1910</u>	11. <u>Oct 1907</u>
12. If not married give full name of Mother.	12. <u>-</u>	12. <u>-</u>	12. <u>-</u>
13. Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13. <u>-</u>	13. <u>-</u>	13. <u>-</u>
14. What is her occupation?	14. <u>-</u>	14. <u>-</u>	14. <u>-</u>
15. Name of Physician attending.	15. <u>Dr. Williams</u>	15. <u>Dr. Canfield</u>	15. <u>Dr. Williams</u>
16. Your relation to child.	16. <u>Father</u>	16. <u>Father</u>	16. <u>Father</u>
17. Were you in house at time of birth?	17. <u>Yes</u>	17. <u>Yes</u>	17. <u>Yes</u>
18. Certified by	18. <u>W. M. Kerr</u>	18. <u>Geo Banagy</u>	18. <u>W. A. Jenkins</u>
19. Address	19. <u>Alford, Ont.</u>	19. <u>Ingersoll</u>	19. <u>Ingersoll</u>
20. Date	20. <u>April 20th 1912</u>	20. <u>Apr 20th 1912</u>	20. <u>Apr 29th 1912</u>
21. Remarks			
22. State if Twin, Triplet, etc. (Indicate on Birth Certificate)			
1. What is the full name of child?	1. <u>Charles Joseph Michael</u>	1. <u>Young Edna May</u>	1. <u>Wallis Robert</u>
2. When was the child born?	2. <u>April 10th 1912</u>	2. <u>March 21st 1912</u>	2. <u>May 1st 1912</u>
3. Where was the child born? (House number or Convent and Loc.)	3. <u>Alford, Ingersoll</u>	3. <u>Alford, Ingersoll</u>	3. <u>Alford, Ingersoll</u>
4. Sex of Female?	4. <u>Male</u>	4. <u>Female</u>	4. <u>Male</u>
5. Are the parents married?	5. <u>Yes</u>	5. <u>Yes</u>	5. <u>Yes</u>
6. Full name of Father?	6. <u>Daniel Charles</u>	6. <u>William Arthur Young</u>	6. <u>William Wallis</u>
7. Occupation of Father?	7. <u>Agent</u>	7. <u>Butcher</u>	7. <u>Farmer</u>
8. Full Maiden Name of Mother?	8. <u>Anna Sherman</u>	8. <u>Mabel Stevens</u>	8. <u>May Brechin</u>
9. If she has been more than once married give names of former husband, or husbands.	9. <u>-</u>	9. <u>-</u>	9. <u>-</u>
10. Where were the parents married?	10. <u>Ingersoll</u>	10. <u>Ingersoll</u>	10. <u>Ingersoll</u>
11. When were they married?	11. <u>Sept 2nd 1907</u>	11. <u>May 23rd 1911</u>	11. <u>Oct 1st 1909</u>
12. If not married give full name of Mother.	12. <u>-</u>	12. <u>-</u>	12. <u>-</u>
13. Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13. <u>-</u>	13. <u>-</u>	13. <u>-</u>
14. What is her occupation?	14. <u>-</u>	14. <u>-</u>	14. <u>-</u>
15. Name of Physician attending.	15. <u>Dr. McKay</u>	15. <u>Dr. Williams</u>	15. <u>Dr. Rogers</u>
16. Your relation to child.	16. <u>Father</u>	16. <u>Mother</u>	16. <u>Father</u>
17. Were you in house at time of birth?	17. <u>Yes</u>	17. <u>Yes</u>	17. <u>Yes</u>
18. Certified by	18. <u>D. Charles</u>	18. <u>Wm A Young</u>	18. <u>Wm Wallis</u>
19. Address	19. <u>Ingersoll</u>	19. <u>Ingersoll</u>	19. <u>Ingersoll</u>
20. Date	20. <u>May 9th 1912</u>	20. <u>May 14th 1912</u>	20. <u>May 20th 1912</u>
21. Remarks			
22. State if Twin, Triplet, etc. (Indicate on Birth Certificate)			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1912
 Given under my hand this 13th day of July A.D. 1912
W. M. Kerr Division Registrar of Ingersoll

BIRTHS

David William Mead, George William Mead, Samuel George Mead, Emily Sarah Skinner, Helen Moffat, William Moffat, Annie Moffat, John Matheson, Sutherland, William Henry Sutherland, Charles Matheson, Robert Wigganham, Mabel Isabelle Greenwood, Carl Barnett, Murray, et al. Barnett.

County of Jefferson Division of Biological

	Surname First	Surname First	Surname First
1. What is the full name of child?	Michael William	Michael William	Moffatt William
2. When was the child born? When was the child born? When was the child born? When was the child born?	May 14th 1912	May 14th 1912	20th May 1912
3. If in a hospital give the name of hospital and Loc.	Engersall	Engersall	Engersall
4. Male or Female.	Male	Male	Female
5. Are the parents married?	Yes	Yes	Yes
6. Full name of Father?	Oliver William Mead	John Richard	William Moffatt
7. Occupation of Father?	Farmer	Barber	Electrician
8. Full Mother Name of Mother?	Marion Ann Sutherland	Emily Sarah Skinner	Ann Mabel Sutherland
9. If she has been more than once married give names of former husband, or husbands.	-	-	-
10. Where were the parents married?	England	England	Wiltshire
11. When were they married?	March 1st 1907	21st Sept. 1900	Sept. 18th 1896
12. If not married give full name of Mother.	-	-	-
13. Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
14. What is her occupation?	-	-	-
15. Name of Physician attending.	Dr. Cairfield	Dr. Jeff	Dr. McKay
16. Your relation to child.	Father	Mother	Mother
17. Were you in house at time of birth?	Yes	Yes	Yes
18. Certified by	W. Mead	John Richard	Mrs W. Moffatt
19. Address	Engersall	Engersall	Engersall
20. Date	June 7th 1912	June 10th 1912	June 20th 1912
21. Remarks			
22. State if Twin, Triplet, etc. or number in litter.			
1. What is the full name of child?	Richard John Matheson	Wigganham Donald Herbert	Murray Carl Barnett
2. When was the child born? When was the child born? When was the child born? When was the child born?	June 22nd 1912	June 12th 1912	June 2nd 1912
3. If in a hospital give the name of hospital and Loc.	Engersall	Engersall	Engersall
4. Male or Female.	Male	Male	Male
5. Are the parents married?	Yes	Yes	Yes
6. Full name of Father?	William James Sutherland	Herbert Wigganham	John James Murray
7. Occupation of Father?	Farmer	Clerk	Machinist
8. Full Mother Name of Mother?	Christine Matheson	Walter Sutherland	Edith Barnett
9. If she has been more than once married give names of former husband, or husbands.	-	-	-
10. Where were the parents married?	Chicago	England	West of Scotland
11. When were they married?	Aug 21st 1910	Apr 25th 1910	April 5th 1905
12. If not married give full name of Mother.	-	-	-
13. Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
14. What is her occupation?	-	-	-
15. Name of Physician attending.	Dr. Williams	Dr. Williams	Dr. Sutherland
16. Your relation to child.	Father	Father	Father
17. Were you in house at time of birth?	Yes	Yes	Yes
18. Certified by	W. Sutherland	W. Wigganham	Dr. Murray
19. Address	Engersall	Engersall	Engersall
20. Date	June 24th 1912	June 26th 1912	June 20th 1912
21. Remarks			
22. State if Twin, Triplet, etc. or number in litter.			

I hereby certify the foregoing to be the true and correct entries of all births returned to me for the quarter year ending June 30th 1912
 Given under my hand this 13th day of July A.D. 1912
W. Engersall District Registrar of Engersall

BIRTHS

Margaret Ann McDonald, David McDonald, James William Clark, Albert William Clark, Charles William Clark, Henry Henry Bowman, Thomas Macdonald, John William Bowman, John Bowman, James William King, William Richard King, Margaret Louisa King, Frank Sumner, Rosemary Dwyer

County of _____

Division of _____

	Surname First	Surname First	Surname First
What is the full name of child?	Margaret Caroline Clark Margaret Loney	Albert William Clark Albert William	Catherine Casper Bowman Catherine St. Augustin
When was the child born? When was the child born? Was it in a hospital give its name?	June 15 th 1912 St. Augustin	June 15 th 1912 St. Augustin	June 24 th 1912 St. Augustin
Age or Female	4 Female	4 Male	4 Female
Are the parents married?	Yes	Yes	Yes
Full name of Father	Danny Macneil	Albert Henry Clark	Harry Stanley Bowman
Occupation of Father?	Wind Clerk	Milk Man	Hardware Clerk
Full Maiden Name of Mother	Caroline Schasser	Amelia Kennedy	Louise Maud Ross
Has he been more than once married give names of former husband, or widows	-	-	-
Where were the parents married?	St. Alfred	Spain State	London
When were they married?	Sept 15 th 1911	Jan'y 15 th 1906	September 30 th 1909
If not married give full name of Mother	-	-	-
Is the single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending	Dr. Rogan	Dr. Williams	Dr. J. A. Neff
Your relation to child	Father	Father	Father
Were you in house at time of birth?	Yes	Yes	Yes
Certified by	D. Macneil	A. L. Clark	Harry Stanley Bowman
Address	Sugersall	Sugersall	Sugersall
Date	July 2 nd 1912	July 20 th 1912	July 25 th 1912
Remarks	-	-	-
State if Twin, Triple, etc. or still born.	-	-	-
Surname First	Surname First	Surname First	Surname First
What is the full name of child?	John Henry Dec Betchell John William Long	James William Long	Frank Skinner
When was the child born? When was the child born? Was it in a hospital give its name?	July 24 th 1912 St. Augustin	July 13 th 1912 St. Augustin	July 14 th 1912 St. Augustin
Age or Female	4 Male	4 Male	4 Male
Are the parents married?	Yes	Yes	Yes
Full name of Father	Henry Dec Betchell	William Richard Long	Frank Skinner
Occupation of Father?	Insurance Agent	Milk R. Employee	L.P.R. Section man
Full Maiden Name of Mother	Edna Pauline Trip	Margaret London	Rosina Brettell
Has he been more than once married give names of former husband, or widows	-	-	-
Where were the parents married?	Sugersall	Sugersall	London Oct
When were they married?	June 23 rd 1909	April 18 th 1911	September 13 th 1906
If not married give full name of Mother	-	-	-
Is the single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending	D. Sinclair, Woodstock	D. R. Williams	J. A. Neff
Your relation to child	Father	Aunt	Mother
Were you in house at time of birth?	Yes	Yes	Yes
Certified by	Henry Dec Betchell	Henry Mullins	Rosina Brettell
Address	Sugersall	Sugersall	Sugersall
Date	July 27 th 1912	July 27 th 1912	August 1 st 1912
Remarks	-	-	-
State if Twin, Triple, etc. or still born.	-	-	-

I hereby certify the foregoing to be the true and correct entries of all births returned to me for the quarter year ending Sept 30th 1912
 Given under my hand this 12th day of Sept A.D. 1912

 Division Registrar of Sugersall

The reference numbers relate to those found in Form 2 or 3, as an aid to searching.

BIRTHS

County of Suffolk

Division of Sugersale

	Surname first	Surname first	Surname first
1	Palmer Ruth Debbery	Walden Frances McKenzie	Sealihan Mary
2	July 9th 1912	July 6th 1912	Aug 1st 1912
3	100 St. James St. Sugersale	100 St. James St. Sugersale	100 St. James St. Sugersale
4	Female	Male	Female
5	Yes	Yes	Yes
6	John Palmer	Robert Seal	Frank Sealihan
7	Handyman	Machinist	Black
8	Edith Florence Wright	Isabella Daigher	Mary Delaney
9	-	-	-
10	England	Sugersale	Sugersale
11	Mar 24th 1901	Aug 25th 1912	Oct 12th 1912
12	-	-	-
13	-	-	-
14	-	-	-
15	Dr. Williams	Dr. Williams	Dr. McKay
16	Mother	Father	Father
17	Yes	Yes	No
18	Mrs J. Palmer	Robert Seal	F. Sealihan
19	Sugersale	Sugersale	Sugersale
20	Aug 5/12	Aug 6th 1912	Aug 1st 1912
21	-	-	-
22	-	-	-
23	-	-	-
24	-	-	-
25	-	-	-
26	-	-	-
27	-	-	-
28	-	-	-
29	-	-	-
30	-	-	-
31	-	-	-
32	-	-	-
33	-	-	-
34	-	-	-
35	-	-	-
36	-	-	-
37	-	-	-
38	-	-	-
39	-	-	-
40	-	-	-
41	-	-	-
42	-	-	-
43	-	-	-
44	-	-	-
45	-	-	-
46	-	-	-
47	-	-	-
48	-	-	-
49	-	-	-
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51	-	-	-
52	-	-	-
53	-	-	-
54	-	-	-
55	-	-	-
56	-	-	-
57	-	-	-
58	-	-	-
59	-	-	-
60	-	-	-
61	-	-	-
62	-	-	-
63	-	-	-
64	-	-	-
65	-	-	-
66	-	-	-
67	-	-	-
68	-	-	-
69	-	-	-
70	-	-	-
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74	-	-	-
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83	-	-	-
84	-	-	-
85	-	-	-
86	-	-	-
87	-	-	-
88	-	-	-
89	-	-	-
90	-	-	-
91	-	-	-
92	-	-	-
93	-	-	-
94	-	-	-
95	-	-	-
96	-	-	-
97	-	-	-
98	-	-	-
99	-	-	-
100	-	-	-

BIRTHS

County of ~~Orange~~ Division of Sugarsall

	Surname first	Surname first	Surname first
What is the full name of child?	George Leslie George	Kibbe Ellen	Walter Ernest Alexander
When was the child born?	July 19th 1912	Aug 10th 1912	July 20th 1912
Where was the child born?	Sugarsall	Sugarsall	Sugarsall
Street number or Concession and Lot.			
Male or Female.	Male	Female	Male
Are the parents married?	Yes	Yes	Yes
Full name of Father.	Henry Edward George	James Peter Kibbe	Charles William Walter
Occupation of Father?	Shipping Clerk	Labourer	Labourer
Full Maiden Name of Mother.	Maudie Bennett	Frederick Kibbe	Mary Ann Birchley
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	England	England	England
When were they married?	Apr 21st 1900	Dec 22nd 1900	Oct 14th 1900
If not married give full Name of Mother.	-	-	-
Is she single or a Widow?	-	-	-
If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	Dr. William Parker	Dr. Neff	Dr. Canfield
Your relation to child.	Father	Mother	Mother
Were you in house at time of Birth?	Yes	Yes	Yes
Certified by	H. C. George	Mrs. J. O. Kibbe	Mrs. E. J. Walter
Address	Sugarsall	Sugarsall	Sugarsall
Date	Aug 26/12	Aug 26/12	Aug 26/12
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			
What is the full name of child?	McDonald Helen	Smith Helen Roberts	Barker John Stanley
When was the child born?	July 24th 1912	Aug 2nd 1912	Aug 2nd 1912
Where was the child born?	Sugarsall	Sugarsall	Sugarsall
Street number or Concession and Lot.			
Male or Female.	Female	Female	Male
Are the parents married?	Yes	Yes	Yes
Full name of Father.	John Donald McDonald	James Clinton Smith	Barry Barker
Occupation of Father?	Physician	Machinist	Lab. Driver
Full Maiden Name of Mother.	Helen Calveridge	Mary Katherine Dickens	Annie May Camell
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	Sugarsall	St. Catharines	England
When were they married?	Sept 27th 1911	Sept 11th 1911	Sept 12th 1908
If not married give full Name of Mother.	-	-	-
Is she single or a Widow?	-	-	-
If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	Dr. Rayner	Dr. McDonald	Dr. Cairnie
Your relation to child.	Father	Mother	Sister
Were you in house at time of Birth?	Yes	Yes	Yes
Certified by	J. D. McDonald	Mrs. J. C. Smith	Walter Barker
Address	Sugarsall	Sugarsall	Sugarsall
Date	Aug 29th 1912	Aug 30th 1912	Aug 31st 1912
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th
 Given under my hand this 12th day of Oct A. D. 1912

W. B. Smith
 Division Registrar of Sugarsall

BIRTHS

Subordinate B.
 If it occurred all still-births or deaths,
 as well as deaths.

County of Jefferson

Division of Sevenside

	Surname first	Surname first	Surname first
What is the full name of child?	Miclaou Benjamin	Fisher Charles Maxwelle	Target
When was the child born? Where was the child born? Street number or Commission and Lot.	June 2nd 1912 Catherine St Sevenside	June 10th 1912 William St Sevenside	July 8th 1912 William St Sevenside
Male or Female.	Male	Male	Female
Are the parents married?	Yes	Yes	Yes
Full name of Father.	Benjamin Miclaou	Benjamin Charles Fisher	George Target
Occupation of Father?	Spuit Business	Painter	Carpenter
Full Maiden Name of Mother.	Rachel Wallace	Minnie Markesan	Martha Roberts
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	Lynden	Sevenside	Sevenside
When were they married?	Aug 2nd 1902	Aug 1st 1911	Mar 2nd 1909
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	Dr. Telf	Dr. Williams	Dr. Telf
Your relation to child.	Father	Aunt	Father
Were you in house at time of birth?	Yes	Yes	Yes
Certified by	Mrs. Miclaou	Mrs. Wallace	Mrs. Roberts
Address	Sevenside	Sevenside	Sevenside
Date	July 8th 1912	July 8th 1912	July 8th 1912
Remarks			Still Born
State if Twin, Triplet, Ill-gittinis or Still-birth.			Still Birth
What is the full name of child?	Donald King George	Ryan Sydney Sydney	Martin William Arthur
When was the child born? Where was the child born? Street number or Commission and Lot.	July 1st 1912 William St Sevenside	July 8th 1912 William St Sevenside	July 14th 1912 William St Sevenside
Male or Female.	Male	Male	Male
Are the parents married?	Yes	Yes	Yes
Full name of Father.	George Donald	William Ryan	William Martin
Occupation of Father?	Labourer		Labourer
Full Maiden Name of Mother.	Jennie Thompson	Elizabeth Bailey	Emily Annine Griffith
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	Sevenside	Sevenside	England
When were they married?	May 1st 1911	May 1st 1904	May 9th 1907
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	Dr. Telf	Dr. Rogers	Dr. Telf
Your relation to child.	Father	Father	Father
Were you in house at time of birth?	Yes	Yes	Yes
Certified by	Mrs. Donald	Mrs. Ryan	Mrs. Martin
Address	Sevenside	Sevenside	Sevenside
Date	July 8th 1912	July 8th 1912	July 13th 1912
Remarks			
State if Twin, Triplet, Ill-gittinis or Still-birth.	Still Birth	Still Born	

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1912

Given under my hand this 12th day of Oct A.D. 1912
 Division Registrar of Sevenside

BIRTHS

County of *Essex*Division of *Sugersall*

	Surname first	Surname first	Surname first
What is the full name of child?	<i>Shamilton Ernest Albert</i>	<i>Chamberlain Wilbert Melvin</i>	<i>Bambridge Mildred</i>
When was the child born?	<i>Aug 21st 1912</i>	<i>Aug 21st 1912</i>	<i>Aug 12th 1912</i>
Where was the child born? Street number or Concession and Lot.	<i>Alma St Sugersall</i>	<i>Alma St Sugersall</i>	<i>Alma St Sugersall</i>
Male or Female.	<i>Male</i>	<i>Male</i>	<i>Female</i>
Are the parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Full name of Father.	<i>George Albert Shamilton</i>	<i>Robert Vernon Chamberlain</i>	<i>John Edward Bambridge</i>
Occupation of Father?	<i>Mechanic</i>	<i>Lathe Maker</i>	<i>Mechanic</i>
Full Maiden Name of Mother.	<i>Hattie Rachel Knapp</i>	<i>Sara Melbary</i>	<i>Mildred Grace Wilbale</i>
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	<i>Sugersall</i>	<i>Hamilton</i>	<i>England</i>
When were they married?	<i>July 27th 1904</i>	<i>Dec 2nd 1907</i>	<i>Oct 21st 1909</i>
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	<i>Dr. Luntin</i>	<i>Dr. Williams</i>	<i>Dr. Neff</i>
Your relation to child.	<i>Father</i>	<i>Father</i>	<i>Mother</i>
Were you in house at time of Birth?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Certified by	<i>G. A. Shamilton</i>	<i>R. V. Chamberlain</i>	<i>Mrs. J. E. Bambridge</i>
Address	<i>Sugersall</i>	<i>Sugersall</i>	<i>Sugersall</i>
Date	<i>Sept 2nd 1912</i>	<i>Sept 6th 1912</i>	<i>Sept 10th 1912</i>
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			
	Surname first	Surname first	Surname first
What is the full name of child?	<i>Naylor Ruth Margaret</i>	<i>Beach Florence Caroline</i>	<i>Harris Mary Jean</i>
When was the child born?	<i>Aug 21st 1912</i>	<i>Aug 21st 1912</i>	<i>Aug 11th 1912</i>
Where was the child born? Street number or Concession and Lot.	<i>Alma St Sugersall</i>	<i>Alma St Sugersall</i>	<i>Alma St Sugersall</i>
Male or Female.	<i>Female</i>	<i>Female</i>	<i>Female</i>
Are the parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Full name of Father.	<i>George Naylor</i>	<i>George Henry Beach</i>	<i>Samuel Weston Harris</i>
Occupation of Father?	<i>Merchant</i>	<i>Salvager</i>	<i>Dry Goods Merchant</i>
Full Maiden Name of Mother.	<i>Margarette Almsted</i>	<i>Maud Olive Debusse</i>	<i>Anna Victoria Birch</i>
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	<i>St. Thomas</i>	<i>England</i>	<i>Canada</i>
When were they married?	<i>April 16th 1907</i>	<i>Dec 24th 1900</i>	<i>Aug 15th 1900</i>
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	<i>Dr. Calverly</i>	<i>Dr. McKay</i>	<i>Dr. Luntin</i>
Your relation to child.	<i>Father</i>	<i>Father</i>	<i>Father</i>
Were you in house at time of Birth?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Certified by	<i>Mrs. Naylor</i>	<i>Mrs. H. Beach</i>	<i>G. M. Harris</i>
Address	<i>Sugersall</i>	<i>Sugersall</i>	<i>Sugersall</i>
Date	<i>Sept 11th 1912</i>	<i>Sept 12th 1912</i>	<i>Sept 13th 1912</i>
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending *Sept 30th*
 Given under my hand this *12th* day of *Oct* A.D. 1912
W. W. Sugersall
 Division Registrar of *Sugersall*

BIRTHS

Printed and published by the Division of Registrar General, Government of Ontario, Toronto, Ontario, Canada.

County of Jefferson Division of Jefferson

	Surname first.	Surname first.	Surname first.
What is the full name of child?	<u>Hambert Rachel Alice</u>	<u>Beak Delight May</u>	<u>Barger Alice</u>
When was the child born?	<u>Aug 19th 1912</u>	<u>Sept 20th 1912</u>	<u>Sept 11th 1912</u>
Where was the child born? Street number or Concession and Lot.	<u>Jefferson</u>	<u>Jefferson</u>	<u>Jefferson</u>
3 If in a hospital give its name.			
Male or Female.	<u>Female</u>	<u>Female</u>	<u>Female</u>
Are the parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>William Frank Hambert</u>	<u>Orney Beak</u>	<u>Henry Harry Barger</u>
Occupation of Father?	<u>Labourer</u>	<u>Farmer</u>	<u>Farmer</u>
Full Maiden Name of Mother.	<u>Rachel Elizabeth</u>	<u>Ordence Elizabeth Grant</u>	<u>Wendell Ellen Roberts</u>
If she has been more than once married give names of former husband, or husbands.			
Where were the parents married?	<u>England</u>		<u>Jefferson</u>
When were they married?			<u>Sept 1st 1909</u>
If not married give full Name of Mother.			
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.			
What is her occupation?			
Name of Physician attending.		<u>Dr. Turner</u>	<u>Dr. Turnbull</u>
Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Mother</u>
Were you in house at time of birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>W. F. Hambert</u>	<u>Orney Beak</u>	<u>Henry Harry Barger</u>
Address	<u>Jefferson</u>	<u>Jefferson</u>	<u>Jefferson</u>
Date	<u>Sept 19th 1912</u>	<u>Sept 25th 1912</u>	<u>Sept 11th 1912</u>
Remarks			
State if Twin, Triplet, Illigitimate or Still-birth.			
1* What is the full name of child?		1	1
2 When was the child born?		2	2
3 Where was the child born? Street number or Concession and Lot.		3 If in a hospital give its name.	3 If in a hospital give its name.
4 Male or Female.		4	4
5 Are the parents married?		5	5
6 Full name of Father.		6	6
7 Occupation of Father?		7	7
8 Full Maiden Name of Mother.		8	8
9 If she has been more than once married give names of former husband, or husbands.		9	9
10 Where were the parents married?		10	10
11 When were they married?		11	11
12 If not married give full Name of Mother.		12	12
13 Is she single or a Widow? If a widow state name, occupation, and date of husband's death.		13	13
14 What is her occupation?		14	14
15 Name of Physician attending.		15	15
16 Your relation to child.		16	16
17 Were you in house at time of birth?		17	17
18 Certified by		18	18
Address			
Date			
Remarks			
State if Twin, Triplet, Illigitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1912

Given under my hand this 12th day of Oct A.D. 1912

W. F. Hambert Division Registrar of Jefferson

BIRTHS

County of Jeffery Division of Sungress

	Surname first	Surname first	Surname first
What is the full name of child?	<u>Esther Helen Lethbridge</u>	<u>Robert Charles Bruce Albert</u>	<u>Winifred Marion Evelyn</u>
When was the child born?	<u>Sept 14th 1912</u>	<u>Sept 12th 1912</u>	<u>Oct 19th 1912</u>
Where was the child born?	<u>Street number or Concession and Lot.</u>	<u>Street number or Concession and Lot.</u>	<u>Street number or Concession and Lot.</u>
Male or Female.	<u>Female</u>	<u>Female</u>	<u>Female</u>
Are the parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>William Leslie</u>	<u>Frank Albert Peck</u>	<u>Freeman McBright</u>
Occupation of Father?	<u>Machinist</u>	<u>Machinist</u>	<u>Business College, Driveway</u>
Full Maiden Name of Mother.	<u>Margaret Charlotte</u>	<u>Minnie Thompson</u>	<u>Mary Elizabeth Bergart</u>
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	<u>Sungress</u>	<u>Sungress</u>	<u>Sungress</u>
When were they married?	<u>Aug 12th 1902</u>	<u>Aug 15th 1911</u>	<u>May 10th 1901</u>
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	<u>Dr. McKay</u>	<u>Dr. McKay</u>	<u>Dr. Williams</u>
Your relation to child.	<u>Father</u>	<u>Mother</u>	<u>Father</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>William Leslie</u>	<u>Wm. A. Peck</u>	<u>F. M. McBright</u>
Address	<u>Sungress</u>	<u>Sungress</u>	<u>Sungress</u>
Date	<u>Oct 2nd 1912</u>	<u>Nov 1st 1912</u>	<u>Nov 9th 1912</u>
Remarks			
State if Twin, Triplet, Illigimate or Still-birth.			
What is the full name of child?	<u>Baseline Emily Anne</u>	<u>Edna Russell Burgess</u>	<u>Mayberry George Fern</u>
When was the child born?	<u>Oct 16th 1912</u>	<u>Oct 20th 1912</u>	<u>Oct 22nd 1912</u>
Where was the child born?	<u>Street number or Concession and Lot.</u>	<u>Street number or Concession and Lot.</u>	<u>Street number or Concession and Lot.</u>
Male or Female.	<u>Female</u>	<u>Male</u>	<u>Male</u>
Are the parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>Robert S. Casselton</u>	<u>Ray Edward Cole</u>	<u>Charles McKay Mayberry</u>
Occupation of Father?	<u>Labourer</u>	<u>Machinist</u>	<u>Electrician</u>
Full Maiden Name of Mother.	<u>Katie Mahony</u>	<u>Elizabeth Bell</u>	<u>Cora Ethel Fern</u>
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	<u>Carleton Place</u>	<u>Sungress</u>	<u>Sungress</u>
When were they married?	<u>June 14th 1901</u>	<u>Jan 20th 1911</u>	<u>Oct 30th 1911</u>
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	<u>Dr. McKay</u>	<u>Dr. Cameron</u>	<u>Dr. Williams & Cameron</u>
Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Father</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>R. S. Casselton</u>	<u>R. E. Cole</u>	<u>Chas. W. Mayberry</u>
Address	<u>Sungress</u>	<u>Sungress</u>	<u>Sungress</u>
Date	<u>Nov 9th 1912</u>	<u>Nov 16th 1912</u>	<u>Nov 19th 1912</u>
Remarks			
State if Twin, Triplet, Illigimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1912
 Given under my hand this 9th day of January A.D. 1913
Wm. A. Peck
 Division Registrar of Sungress

*N.B.—The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.

BIRTHS

County of Jefferson

Division of Sugarsale

	Surname first	Surname first	Surname first
What is the full name of child?	Watson Ralph James	Breakfield Myrtle Rose	Target Alice
When was the child born?	Sept 8th 1912	Sept 27th 1912	Sept 14th 1912
Where was the child born? Street number or Con- cession and Lot.	Henry St Sugarsale	Charles St Sugarsale	Wendell Road Sugarsale
Male or Female.	Male	Female	Female
Are the parents married?	Yes	Yes	Yes
Full name of Father.	James Watson	Edward Breakfield	George Henry Target
Occupation of Father?	Sailor	Sabarer	Fireman
Full Maiden Name of Mother.	Annie Black	May Neil	Martha Ellen Roberts
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	Marshall	Sarauto	Sugarsale
When were they married?	Aug 15th 1907	July 26th 1910	Nov 27th 1910
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attend- ing.	Dr. Monday	Dr. Kelly	Dr. Coleridge
Your relation to child.	Father	Father	Mother
Were you in house at time of birth?	Yes	Yes	Yes
Certified by	James Watson	Edward Breakfield	Mrs. J. H. Roberts
Address	Sugarsale	Sugarsale	Sugarsale
Date	Oct 8th 1912	Oct 10th 1912	Oct 11th 1912
Remarks			
State if Twin, Triplet, Ille- gitimate or Still-birth.			
	Surname first	Surname first	Surname first
What is the full name of child?	Jordan W. John Henry	Fleming Arthur George	Cragg Charles William
When was the child born?	Oct 6th 1912	Oct 15th 1912	Oct 6th 1912
Where was the child born? Street number or Con- cession and Lot.	Henry St Sugarsale	Concession Sugarsale	Henry St Sugarsale
Male or Female.	Male	Male	Male
Are the parents married?	Yes	Yes	Yes
Full name of Father.	William John Jordan	Courtney Fleming	William Edward Cragg
Occupation of Father?	Blacksmith	Farmer	Beam-keeper
Full Maiden Name of Mother.	Esther Anne Jones	Edith May Colley	Martha Margaret Wilson
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	Sugarsale	Sugarsale	Sugarsale
When were they married?	Jan 1st 1907	Aug 15th 1911	Sept 12th 1911
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attend- ing.	Dr. Counter	Dr. Kelly	Dr. Williams
Your relation to child.	Father	Father	Father
Were you in house at time of birth?	Yes	Yes	Yes
Certified by	W. J. Jordan	Courtney Fleming	W. E. Cragg
Address	Sugarsale	Sugarsale	Sugarsale
Date	Oct 15th 1912	Oct 16th 1912	Oct 2nd 1912
Remarks			
State if Twin, Triplet, Ille- gitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1912
Given under my hand this 9th day of January A.D. 1913
Division Registrar of Sugarsale

The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.

BIRTHS

marquerte
 en saint victor
 en saint victor
 en saint victor

County of Alford

Division of Sugarsville

	Surname first	Surname first	Surname first
What is the full name of child?	Shank-Walter Stanley	Smith-Marguerite	Smith-Charles May
When was the child born?	Nov 21st 1912	Nov 26th 1912	Nov 22nd 1912
Where was the child born? Street number or Con- cession and Loc.	3 If in a hospital give its name Sugarsville	3 If in a hospital give its name Sugarsville	3 If in a hospital give its name Sugarsville
Male or Female.	4 Male	4 Female	4 Female
Are the parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	John Francis Shank	John Smith	William Smith
Occupation of Father?	7 Mechanic	7 Wm Smith	7 Cauler
Full Maiden Name of Mother.	Elizabeth Kate Young	Estelle Brown	Viola Elizabeth Gilbert
If she has been more than once married give names of former husband, or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Sugarsville	10 England	10 England
When were they married?	11 Oct 7th 1912	11 Nov 10th 1902	11 July 10th 1909
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attend- ing.	15 Dr Rogers	15 Dr Neff	15 Dr Williams
Your relation to child.	16 Mother	16 Mother	16 Father
Were you in house at time of Birth?	17 Yes	17 Yes	17 Yes
Certified by	18 Mrs J F Shank	18 Mrs W Smith	18 William Smith
Address	Sugarsville	Sugarsville	Sugarsville
Date	Dec 9th 1912	Dec 16th 1912	Dec 17/12
Remarks			
State if Twin, Triplet, Ille- gitimate or Still-birth			

	Surname first	Surname first	Surname first
What is the full name of child?	Leanne Gertrude Theodora	Robinson-Felicia John	Meyer Robert Arthur
When was the child born?	Nov 24th 1912	Nov 21st 1912	Dec 19th 1912
Where was the child born? Street number or Con- cession and Loc.	3 If in a hospital give its name Sugarsville	3 If in a hospital give its name Sugarsville	3 If in a hospital give its name Sugarsville
Male or Female.	4 Female	4 Male	4 Male
Are the parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	Amos Kent Gleason	Felicia Robinson	George Arthur Meyer
Occupation of Father?	7 Barber	7 Italian	7 Can Operate
Full Maiden Name of Mother.	Anna Gertrude Campbell	Felicia Neumann	Marjorie Mouton
If she has been more than once married give names of former husband, or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Saratoga	10 Buffalo	10 Sugarsville
When were they married?	11 June 14th 1911	11 July 2nd 1912	11 Oct 14th 1909
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attend- ing.	15 Dr Williams	15 Dr Williams	15 Dr Williams
Your relation to child.	16 Father	16 Father	16 Father
Were you in house at time of Birth?	17 Yes	17 Yes	17 Yes
Certified by	18 C K Gleason	18 John Robinson	18 R Meyer
Address	Sugarsville	Sugarsville	Sugarsville
Date	Dec 19th 1912	Dec 19th 1912	Dec 19th 1912
Remarks			
State if Twin, Triplet, Ille- gitimate or Still-birth			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1912

Given under my hand this 9th day of January A.D. 1913

W B Smith Division Registrar of Sugarsville

BIRTHS

County of Jefferson Division of Sugarsale

	Surname first.	Surname first.	Surname first.
What is the full name of child?	<u>Kamberg Rebecca</u>	<u>Billy George Harold</u>	<u>Stymaine Chauncy Derwood</u>
When was the child born?	<u>Oct 25th 1912</u>	<u>Oct 27th 1912</u>	<u>Oct 25th 1912</u>
Where was the child born?	<u>Wilmington</u>	<u>Wilmington</u>	<u>Wilmington</u>
Street, number or Concession and Lot.	<u>1111</u>	<u>1111</u>	<u>1111</u>
If in a hospital give its name.	<u>Sugarsale</u>	<u>Sugarsale</u>	<u>Sugarsale</u>
Male or Female.	<u>Female</u>	<u>Male</u>	<u>Male</u>
Are the parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>Joseph Kamberger</u>	<u>Henry Henry Billy</u>	<u>James W. Stymaine</u>
Occupation of Father?	<u>Machinist</u>	<u>Teacher</u>	<u>Machinist</u>
Full Maiden Name of Mother.	<u>Bertha Maylan</u>	<u>Opus Myrtle Watson</u>	<u>Ellen May Lewis</u>
If she has been more than once married give names of former husband, or husbands.	<u>-</u>	<u>-</u>	<u>-</u>
Where were the parents married?	<u>Silsbury</u>	<u>Octon Ont.</u>	<u>St Paul</u>
When were they married?	<u>Oct 22nd 1901</u>	<u>July 12th 1910</u>	<u>July 15th 1903</u>
If not married give full Name of Mother.	<u>-</u>	<u>-</u>	<u>-</u>
Is she single or a Widow?	<u>-</u>	<u>-</u>	<u>-</u>
If a widow state name, occupation, and date of husband's death.	<u>-</u>	<u>-</u>	<u>-</u>
What is her occupation?	<u>-</u>	<u>-</u>	<u>-</u>
Name of Physician attending.	<u>Dr. Williams</u>	<u>Dr. Huff</u>	<u>Dr. Rogers</u>
Your relation to child.	<u>Mother</u>	<u>Father</u>	<u>Father</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>Mr. J. Kamberger</u>	<u>H. H. Billy</u>	<u>W. Stymaine</u>
Address	<u>Sugarsale</u>	<u>Sugarsale</u>	<u>Sugarsale</u>
Date	<u>Nov 2nd 1912</u>	<u>Nov 2nd 1912</u>	<u>Nov 25th 1912</u>
Remarks			

	Surname first.	Surname first.	Surname first.
What is the full name of child?	<u>Belle Margaret Rose</u>	<u>Dunlop Annie Davis</u>	<u>Deulin John Joseph</u>
When was the child born?	<u>Oct 19th 1912</u>	<u>Nov 2nd 1912</u>	<u>Oct 30th 1912</u>
Where was the child born?	<u>Wilmington</u>	<u>Wilmington</u>	<u>Wilmington</u>
Street, number or Concession and Lot.	<u>1111</u>	<u>1111</u>	<u>1111</u>
If in a hospital give its name.	<u>Sugarsale</u>	<u>Sugarsale</u>	<u>Sugarsale</u>
Male or Female.	<u>Female</u>	<u>Female</u>	<u>Male</u>
Are the parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>E. W. Ballou</u>	<u>Edgar Dunlop</u>	<u>John Charles Deulin</u>
Occupation of Father?	<u>-</u>	<u>Barber</u>	<u>Machinist</u>
Full Maiden Name of Mother.	<u>-</u>	<u>Mary Elizabeth Johnston</u>	<u>Oliver Shearer</u>
If she has been more than once married give names of former husband, or husbands.	<u>-</u>	<u>-</u>	<u>-</u>
Where were the parents married?	<u>-</u>	<u>London</u>	<u>Sugarsale</u>
When were they married?	<u>-</u>	<u>June 4th 1906</u>	<u>Nov 6th 1911</u>
If not married give full Name of Mother.	<u>-</u>	<u>-</u>	<u>-</u>
Is she single or a Widow?	<u>-</u>	<u>-</u>	<u>-</u>
If a widow state name, occupation, and date of husband's death.	<u>-</u>	<u>-</u>	<u>-</u>
What is her occupation?	<u>-</u>	<u>-</u>	<u>-</u>
Name of Physician attending.	<u>-</u>	<u>Dr. Rogers</u>	<u>Dr. McKay</u>
Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Father</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>E. W. Ballou</u>	<u>E. Dunlop</u>	<u>J. C. Deulin</u>
Address	<u>Sugarsale</u>	<u>Sugarsale</u>	<u>Sugarsale</u>
Date	<u>Nov 25th 1912</u>	<u>Nov 26th 1912</u>	<u>Nov 29th 1912</u>
Remarks	<u>Parents left town.</u>		
State if Twin, Triplet, Illegitimate or Still-birth.	<u>All the information I could get</u>		

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31 1912
 Given under my hand this 25th day of November A.D. 1912
W. H. Smith Division Registrar of Sugarsale

BIRTHS

County of Jefferson Division of St. Louis

	Surname first	Surname first	Surname first
1 What is the full name of child?	1 <u>Nunn Edward Leo</u>	1 <u>Kennedy John Edmund</u>	1
2 When was the child born?	2 <u>Nov 29th 1912</u>	2 <u>Nov 29th 1912</u>	2
3 Where was the child born? Street number or Concession and Loc.	3 <u>Charles St.</u>	3 <u>Thomas St.</u>	3 If in a hospital give its name.
4 Male or Female.	4 <u>Male</u>	4 <u>Male</u>	4
5 Are the Parents married?	5 <u>Yes</u>	5 <u>Yes</u>	5
6 Full name of Father.	6 <u>John Cecil Nunn</u>	6 <u>Thomas Kennedy Kennedy</u>	6
7 Occupation of Father?	7 <u>Butcher</u>	7 <u>Home Surgeon</u>	7
8 Full Maiden Name of Mother.	8 <u>Catherine Minard</u>	8 <u>Robert Winifred Conn.</u>	8
9 If she has been more than once married give names of former husband or husbands.	9 -	9 -	9
10 Where were the parents married?	10 <u>St. Louis</u>	10 <u>Detroit Mich.</u>	10
11 When were they married?	11 <u>May 20th 1906</u>	11 <u>June 21st 1910</u>	11
12 If not married give full Name of Mother.	12 -	12 -	12
13 Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13
14 What is her occupation?	14 -	14 -	14
15 Name of Physician attending.	15 <u>Dr. Kelly</u>	15 <u>Dr. Williams</u>	15
16 Your relation to child.	16 <u>Mother</u>	16 <u>Grandmother</u>	16
17 Were you in house at time of Birth?	17 <u>Yes</u>	17 <u>Yes</u>	17
18 Certified by	18 <u>Mrs J.C. Nunn</u>	18 <u>Mrs John Kennedy</u>	18
Address	<u>St. Louis</u>	<u>St. Louis</u>	
Date	<u>Dec 26th 1912</u>	<u>Dec 26th 1912</u>	
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			
19 What is the full name of child?	19	19	19
20 When was the child born?	20	20	20
21 Where was the child born? Street number or Concession and Loc.	21 If in a hospital give its name.	21 If in a hospital give its name.	21 If in a hospital give its name.
22 Male or Female.	22	22	22
23 Are the Parents married?	23	23	23
24 Full name of Father.	24	24	24
25 Occupation of Father?	25	25	25
26 Full Maiden Name of Mother.	26	26	26
27 If she has been more than once married give names of former husband or husbands.	27	27	27
28 Where were the parents married?	28	28	28
29 When were they married?	29	29	29
30 If not married give full Name of Mother.	30	30	30
31 Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	31	31	31
32 What is her occupation?	32	32	32
33 Name of Physician attending.	33	33	33
34 Your relation to child.	34	34	34
35 Were you in house at time of Birth?	35	35	35
36 Certified by	36	36	36
Address			
Date			
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1912

Given under my hand this 9th day of January A.D. 1913
W.B. Sullivan Division Registrar of St. Louis

BIRTHS

Helen marjorie humpheys, john david humpheys, alice may mayberry, ross mayberry, florence thompson, mabel annie taylor, clara dierlaum, christina nora anderson, alexander anderson, martha pauline knight, alfred knight, hecetta spinlove, agnes leon anderson, thompson, maud litus

County of Alameda Division of San Joaquin

	Surname first	Surname first	Surname first
What is the full name of child?	Humphrey Helen Mayjorie	Mayberry Elizabeth	Taylor Mabel Annie
When was the child born?	2 Dec 3rd 1912	2 Dec 14th 1912	2 Dec 21st 1912
Where was the child born? Street number or Concession and Lot.	Cherry St 8 If in a hospital give its name	Carriage Shop St 8 If in a hospital give its name	Cherry St 8 If in a hospital give its name
Male or Female.	4 Female	4 Female	4 Female
Are the Parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	John David Humphrey	Ross Mayberry	William Henry Taylor
Occupation of Father?	7 Barber	7 Selfsame	7 Clerk
Full Maiden Name of Mother.	Alice May Rousseau	Martha Thompson	Clara Dierlaum
If she has been more than once married give names of former husband or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Berk Beale	10 Stanford	10 Chelsey
When were they married?	11 April 12th 1909	11 Nov 24th 1905	11 June 21st 1911
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attending.	15 Dr. Williams	15 Dr. Kelly	15 Dr. Williams
Your relation to child.	16 Father	16 Father	16 Father
Were you in house at time of Birth?	17 Yes	17 Yes	17 Yes
Certified by	18 John D. Humphrey	18 Ross Mayberry	18 W. H. Taylor
Address	2 Sugerale	2 Sugerale	2 Sugerale
Date	Jan 1st 1913	Jan 1st 1913	Jan 1st 1913
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			
What is the full name of child?	Anderson Christina Ann	Knight Martha Caroline	Marrison Agnes Beane
When was the child born?	2 Dec 24th 1912	2 Jan 21st 1913	2 Dec 24th 1912
Where was the child born? Street number or Concession and Lot.	Cherry St 8 If in a hospital give its name	Cherry St 8 If in a hospital give its name	Cherry St 8 If in a hospital give its name
Male or Female.	4 Female	4 Female	4 Female
Are the Parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	Alexander Anderson	Alfred Knight	Angus Marrison
Occupation of Father?	7 Wheel-washer	7 Machinist	7 Painter
Full Maiden Name of Mother.	8 Isabelle Laite	8 Hecetta Spinlove	8 Maud Litus
If she has been more than once married give names of former husband or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Saranto	10 Saranto	10 Sugerale
When were they married?	11 July 27th 1912	11 Jan 29th 1907	11 Dec 24th 1909
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attending.	15 Dr. McKay	15 Dr. Kelly	15 Dr. Cawter
Your relation to child.	16 Father	16 Father	16 Father
Were you in house at time of Birth?	17 Yes	17 Yes	17 Yes
Certified by	18 A. Anderson	18 Alfred Knight	18 Angus Marrison
Address	2 Sugerale	2 Sugerale	2 Sugerale
Date	Jan 21st 1913	Jan 22nd 1913	Jan 24th 1913
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1913

Given under my hand this 12th day of April A.D. 1913
W. B. Smith Division Registrar of Sugerale

*N.B.—The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.

BIRTHS

County of Jefferson Division of Greenville

	Surname First	Surname First	Surname First
What is the full name of child?	Budgey Margaret Helena	Dunn Margaret Leahell	Foster Maryory Elene
When was the child born?	Jan 14th 1913	Jan 19th 1912	Feb 24th 1913
Where was the child born? Street number or Con- cession and Lot.	11th St If in a hospital give its name	11th St If in a hospital give its name	11th St If in a hospital give its name
Male or Female.	Female	Female	Female
Are the Parents married?	Yes	Yes	Yes
Full name of Father.	Edward James Budgey	Thomas Earl Dunn	Wilson Dwight Foster
Occupation of Father?	Machinist	Merchant	Chemical Operator
Full Maiden Name of Mother.	Helena Lee	Leahell Brown	Elisbeth Mary Manning
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	England	Silsanburg	Canada
When were they married?	June 14th 1900	July 2nd 1910	June 5th 1912
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attend- ing.	Dr. Canfield	Dr. Williams	Dr. Lebridge
Your relation to child.	Mother	Father	Father
Were you in house at time of Birth?	Yes	Yes	Yes
Certified by	Wm. O. Budgey	J. H. Dunn	W. D. Foster
Address	Greenville	Greenville	Greenville
Date	July 17th 1913	July 10th 1913	Mar 14th 1913
Remarks			
State if Twin, Triplet, Ille- gitimate or Still-birth.			
What is the full name of child?	Balter George Knipe	Warton Deane Edmund James	Kealey Arthur Henry Wilson
When was the child born?	Jan 22nd 1913	Feb 19th 1913	Feb 19th 1912
Where was the child born? Street number or Con- cession and Lot.	11th St If in a hospital give its name	11th St If in a hospital give its name	11th St If in a hospital give its name
Male or Female.	Male	Male	Male
Are the Parents married?	Yes	Yes	Yes
Full name of Father.	George Walter	George Franklin Warton	Arthur Henry Ray Kealey
Occupation of Father?	Labourer	Machinist	Labourer
Full Maiden Name of Mother.	Henrietta Isabel Daniels	Anna Alberta Crabb	Marion Elizabeth Ann Target
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	Greenville	Greenville	England
When were they married?	Oct 23rd 1903	Sept 1st 1909	Jan 29th 1911
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attend- ing.	Dr. Rogers	Dr. Williams	Dr. Telf
Your relation to child.	Grandfather	Father	Grandmother
Were you in house at time of Birth?	No	Yes	Yes
Certified by	J. H. Daniels	Wm. Warton	Edigo Target
Address	Greenville	Greenville	Greenville
Date	July 21st 1913	July 24th 1913	Mar 15th 1913
Remarks			
State if Twin, Triplet, Ille- gitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1913
Given under my hand this 12th day of Apr A.D. 1913
Division Registrar of Greenville

Subclass 11
Record all still births as births
as well as deaths.

BIRTHS

maud prouse, gordon william
maudie hobson, beatrice lewis

County of Offord Division of Sugersall

	Surname First	Surname First	Surname First
What is the full name of child?	<u>Maude May</u>	<u>Stephanie Davidson</u>	<u>Beatrice Lewis</u>
When was the child born?	<u>Apr 25th 1913</u>	<u>Mar 4th 1913</u>	<u>Mar 2nd 1913</u>
Where was the child born? Street number or Concession and Lot.	<u>King St Sugersall</u>	<u>Contending St Sugersall</u>	<u>Carroll St Sugersall</u>
Male or Female.	<u>Female</u>	<u>Male</u>	<u>Female</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>Ben Cameron Bailey</u>	<u>George Richardson Stephenson</u>	<u>Alfred Charles Lewis</u>
Occupation of Father?	<u>Clerk</u>	<u>Mechanic</u>	<u>Labourer</u>
Full Maiden Name of Mother.	<u>Edith Maud Drouse</u>	<u>Maud Matilda Harrison</u>	<u>Genevieve May Kaye</u>
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	<u>West Offord</u>	<u>Sugersall</u>	<u>Sugersall</u>
When were they married?	<u>June 2nd 1905</u>	<u>Dec 21st 1904</u>	<u>Oct 22nd 1912</u>
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	<u>Dr Williams</u>	<u>Dr Jeff</u>	<u>Dr Cameron</u>
Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Mother</u>
Were you in house at time of Birth?	<u>No</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>Ed Bailey</u>	<u>H. A. Stephenson</u>	<u>Mrs W. C. Lewis</u>
Address	<u>Sugersall</u>	<u>Sugersall</u>	<u>Sugersall</u>
Date	<u>Mar 5th 1913</u>	<u>Mar 17th 1913</u>	<u>Mar 26th 1913</u>
Remarks			
State if Twin, Triplet, Stillmate or Still-birth.			
	Surname First	Surname First	Surname First
What is the full name of child?	<u>Barclay Leonard John</u>		
When was the child born?	<u>Mar 15th 1913</u>		
Where was the child born? Street number or Concession and Lot.	<u>Thames St Sugersall</u>		
Male or Female.	<u>Male</u>		
Are the Parents married?	<u>Yes</u>		
Full name of Father.	<u>Leonard Jeff Barclay</u>		
Occupation of Father?	<u>Reverend</u>		
Full Maiden Name of Mother.	<u>Rose Chippindale</u>		
If she has been more than once married give names of former husband or husbands.	-		
Where were the parents married?	<u>Stratford</u>		
When were they married?	<u>Apr 16th 1912</u>		
If not married give full Name of Mother.	-		
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-		
What is her occupation?	-		
Name of Physician attending.	<u>Dr Cameron</u>		
Your relation to child.	<u>Uncle</u>		
Were you in house at time of Birth?	<u>Yes</u>		
Certified by	<u>Mrs E. Barclay</u>		
Address	<u>Sugersall</u>		
Date	<u>Mar 26th 1913</u>		
Remarks			
State if Twin, Triplet, Stillmate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1913
 (Given under my hand this 12th day of Apr A.D. 1913
W. W. W. W. Division Registrar of Sugersall

BIRTHS

Schedule B.
N.B.—Record all still-births as births,
as well as deaths.

County of Oregon

Division of Lugersall

	Surname first.	Surname first.	Surname first.
What is the full name of child?	<u>Estlin Morgan Dispart</u>	<u>Raye Edward Walter</u>	<u>Reverus Harold</u>
When was the child born?	<u>Feb 2nd 1913</u>	<u>Mar 2nd 1913</u>	<u>Mar 13th 1913</u>
Where was the child born? Street number or Con- cession and Lot.	<u>Thames St</u>	<u>Memphis</u>	<u>Thames St</u>
3 If in a hospital give its name	<u>Lugersall</u>	<u>Lugersall</u>	<u>Lugersall</u>
Male or Female.	4 <u>Female</u>	4 <u>Male</u>	4 <u>Male</u>
Are the Parents married?	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>Yes</u>
Full name of Father.	<u>Harvill R. Foster</u>	<u>Edward Raye</u>	<u>Stanley Gleason</u>
Occupation of Father?	7 <u>Photographer</u>	7 <u>laborer</u>	7 <u>laborer</u>
Full Maiden Name of Mother.	<u>Lois W. Mayberry</u>	<u>Willa Deems</u>	<u>Willa Dittus</u>
If she has been more than once married give names of former husband or husbands.	9 -	9 -	9 -
Where were the parents married?	10 <u>Lugersall</u>	10 <u>England</u>	10 <u>London</u>
When were they married?	11 <u>Dec 1911</u>	11 <u>May 1910</u>	11 <u>June 29th 1912</u>
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attending.	15 <u>Dr. Neff</u>	15 <u>Dr. Confield</u>	15 <u>Dr. Neff</u>
Your relation to child.	16 <u>Father</u>	16 <u>Mother</u>	16 <u>Father</u>
Were you in house at time of Birth?	17 <u>Yes</u>	17 <u>Yes</u>	17 <u>Yes</u>
Certified by	18 <u>Dr. Foster</u>	18 <u>Mrs. Edward Raye</u>	18 <u>Stanley Gleason</u>
Address	<u>Lugersall</u>	<u>Lugersall</u>	<u>Lugersall</u>
Date	<u>Apr 7th 1913</u>	<u>Apr 5th 1913</u>	<u>Apr 9th 1913</u>
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			
What is the full name of child?	<u>Beatrice Mary Ann</u>	<u>Lee Ralph</u>	<u>Hammond Kirk Key</u>
When was the child born?	<u>Apr 6th 1913</u>	<u>Apr 27th 1913</u>	<u>Mar 12th 1913</u>
Where was the child born? Street number or Con- cession and Lot.	<u>Thames St</u>	<u>Thames St</u>	<u>Memphis</u>
3 If in a hospital give its name	<u>Lugersall</u>	<u>Lugersall</u>	<u>Lugersall</u>
Male or Female.	4 <u>Female</u>	4 <u>Male</u>	4 <u>Male</u>
Are the Parents married?	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>Yes</u>
Full name of Father.	<u>Charles Beat</u>	6 <u>George Lee</u>	6 <u>George Hammond</u>
Occupation of Father?	7 <u>mechanic</u>	7 <u>laundry</u>	7 <u>laborer</u>
Full Maiden Name of Mother.	<u>Myrtle Phillips</u>	<u>Wang Lee</u>	<u>Mellie Key</u>
If she has been more than once married give names of former husband or husbands.	9 -	9 -	9 -
Where were the parents married?	10 <u>Lugersall</u>	10 <u>China</u>	10 <u>England</u>
When were they married?	11 <u>July 2nd 1912</u>	11 <u>Oct 12th 1902</u>	11 <u>June 18th 1904</u>
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attending.	15 <u>Dr. Conner</u>	15 <u>Dr. Williams</u>	15 <u>Dr. Williams</u>
Your relation to child.	16 <u>Father</u>	16 <u>Father</u>	16 <u>Mother</u>
Were you in house at time of Birth?	17 <u>Yes</u>	17 <u>Yes</u>	17 <u>Yes</u>
Certified by	18 <u>Dr. Beat</u>	18 <u>Mrs. Lee</u>	18 <u>Mrs. Mellie Hammond</u>
Address	<u>Lugersall</u>	<u>Lugersall</u>	<u>Lugersall</u>
Date	<u>Apr 10th 1913</u>	<u>Apr 10th 1913</u>	<u>Apr 12th 1913</u>
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1913
Given under my hand this 9th day of July A.D. 1913

BIRTHS

County of Oldsail

Division of Sagersaal

	Surname first	Surname first	Surname first
What is the full name of child?	<u>Parceles, Eva Margaret</u>	<u>Barthine, John Arthur</u>	<u>Wallace, Ivan Elizabeth</u>
When was the child born?	<u>Dec 2nd 1912</u>	<u>Dec 2nd 1912</u>	<u>Dec 2nd 1912</u>
Where was the child born? Street number or Concession and Lot.	<u>Merid St</u>	<u>King William St</u>	<u>Reed St</u>
Male or Female.	4 <u>Female</u>	4 <u>Male</u>	4 <u>Female</u>
Are the Parents married?	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>Yes</u>
Full name of Father.	<u>John Belcher Parceles</u>	<u>Arthur James Bartley</u>	<u>MacDonald Wallace</u>
Occupation of Father?	7 <u>Blacksmith</u>	7 <u>Blacksmith</u>	7 <u>Clerk</u>
Full Maiden Name of Mother.	<u>Elizabeth Wallace</u>	<u>Mary Beale</u>	<u>Jessie Ross</u>
If she has been more than once married give names of former husband or husbands.	9 <u>-</u>	9 <u>-</u>	9 <u>-</u>
Where were the parents married?	10 <u>Saranto</u>	10 <u>Sagersaal</u>	10 <u>Sagersaal</u>
When were they married?	11 <u>Dec 23rd 1908</u>	11 <u>June 27th 1906</u>	11 <u>Apr 20th 1907</u>
If not married give full Name of Mother.	12 <u>-</u>	12 <u>-</u>	12 <u>-</u>
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	18 <u>-</u>	18 <u>-</u>	18 <u>-</u>
What is her occupation?	14 <u>-</u>	14 <u>-</u>	14 <u>-</u>
Name of Physician attending.	16 <u>Dr. Hoff</u>	16 <u>Dr. Hoff</u>	16 <u>Dr. Williams</u>
Your relation to child.	10 <u>Father</u>	16 <u>Father</u>	16 <u>Father</u>
Were you in house at time of Birth?	17 <u>Yes</u>	17 <u>Yes</u>	17 <u>Yes</u>
Certified by	18 <u>J. J. Parceles</u>	18 <u>Mrs. J. Beale</u>	18 <u>Miss Wallace</u>
Address	<u>Sagersaal</u>	<u>Sagersaal</u>	<u>Sagersaal</u>
Date	<u>Apr 14th 1913</u>	<u>Apr 15th 1913</u>	<u>Apr 14th 1913</u>
Remarks			
State if Twin, Triplet, Illegitimate or Still-Birth.			

	Surname first	Surname first	Surname first
What is the full name of child?	<u>Hipperson, George Albert</u>	1 <u>Sumner, David William</u>	<u>Walker, Michael Maude</u>
When was the child born?	2 <u>March 22nd 1912</u>	2 <u>Apr 2nd 1912</u>	2 <u>April 1st 1912</u>
Where was the child born? Street number or Concession and Lot.	3 <u>Merid St</u>	3 <u>King William St</u>	3 <u>Merid St</u>
Male or Female.	4 <u>Male</u>	4 <u>Male</u>	4 <u>Female</u>
Are the Parents married?	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>Yes</u>
Full name of Father.	<u>George William Hipperson</u>	<u>William Edwin Sumner</u>	<u>William George Walker</u>
Occupation of Father?	7 <u>Labourer</u>	7 <u>Merchant</u>	7 <u>Labourer</u>
Full Maiden Name of Mother.	<u>Edith Brown</u>	<u>Blairie Beaydair</u>	<u>Bessie Holmes</u>
If she has been more than once married give names of former husband or husbands.	9 <u>-</u>	9 <u>-</u>	9 <u>-</u>
Where were the parents married?	10 <u>England</u>	10 <u>Sagersaal</u>	10 <u>Sagersaal</u>
When were they married?	11 <u>Mar 2nd 1910</u>	11 <u>June 2nd 1908</u>	11 <u>June 2nd 1912</u>
If not married give full Name of Mother.	12 <u>-</u>	12 <u>-</u>	12 <u>-</u>
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	18 <u>-</u>	18 <u>-</u>	18 <u>-</u>
What is her occupation?	14 <u>-</u>	14 <u>-</u>	14 <u>-</u>
Name of Physician attending.	16 <u>Dr. Williams</u>	16 <u>Dr. Campbell</u>	16 <u>Dr. Hoff</u>
Your relation to child.	18 <u>Father</u>	16 <u>Father</u>	16 <u>Father</u>
Were you in house at time of Birth?	17 <u>Yes</u>	17 <u>Yes</u>	17 <u>Yes</u>
Certified by	18 <u>Mrs. G. W. Hipperson</u>	18 <u>Wm. Sumner</u>	18 <u>Mrs. W. G. Walker</u>
Address	<u>Sagersaal</u>	<u>Sagersaal</u>	<u>Sagersaal</u>
Date	<u>Apr 21st 1913</u>	<u>Apr 2nd 1913</u>	<u>May 5th 1913</u>
Remarks			
State if Twin, Triplet, Illegitimate or Still-Birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1913

Given under my hand this 9th day of April A.D. 1913

Division Registrar of Sagersaal

BIRTHS

County of Jefferson Division of Jagersville

	Surname First	Surname First	Surname First
What is the full name of child?	<u>Maylan Kathleen</u>	<u>Heallands Helen Catherine</u>	<u>Craig Frances George</u>
When was the child born?	<u>Apr 22nd 1913</u>	<u>Apr 17th 1913</u>	<u>Mar 2nd 1913</u>
Where was the child born? Street number or Con- cession and Lot.	<u>Westerly St</u>	<u>Centerburg St</u>	<u>Westerly St</u>
3 If in a hospital give its name	<u>Jagersville</u>	<u>Jagersville</u>	<u>Jagersville</u>
Male or Female.	<u>Female</u>	<u>Female</u>	<u>Male</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>Osam Andrew Taylor</u>	<u>Henry James Heallands</u>	<u>Arthur Wakefield Craig</u>
Occupation of Father?	<u>Seamster</u>	<u>Seamster</u>	<u>Machinist</u>
Full Maiden Name of Mother.	<u>Mable Alice Spencer</u>	<u>Ettie May Appleton</u>	<u>Rosa Underhill</u>
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	<u>Jagersville</u>	<u>West Jeffers</u>	<u>Jagersville</u>
When were they married?	<u>June 12th 1912</u>	<u>Apr 19th 1898</u>	<u>Oct 12th 1904</u>
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	<u>Dr Neff</u>	<u>Dr Rogers</u>	<u>Dr Neff</u>
Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Father</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>O. S. Taylor</u>	<u>H. J. Heallands</u>	<u>W. Craig</u>
Address	<u>Jagersville</u>	<u>Jagersville</u>	<u>Jagersville</u>
Date	<u>May 8th 1913</u>	<u>May 10th 1913</u>	<u>May 10th 1913</u>
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			
What is the full name of child?	<u>Johnnie Lavene Allison</u>	<u>Schraw Nellie Gladys</u>	<u>Burder Maude Davis Eileen</u>
When was the child born?	<u>Apr 15th 1913</u>	<u>April 22nd 1913</u>	<u>May 12th 1913</u>
Where was the child born? Street number or Con- cession and Lot.	<u>William St</u>	<u>Ohio Street</u>	<u>Westerly St</u>
3 If in a hospital give its name	<u>Jagersville</u>	<u>Jagersville</u>	<u>Jagersville</u>
Male or Female.	<u>Male</u>	<u>Female</u>	<u>Female</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>William John Johnnie</u>	<u>William H. Schraw</u>	<u>William Edward Burder</u>
Occupation of Father?	<u>Machinist</u>	<u>Machinist</u>	<u>Draper</u>
Full Maiden Name of Mother.	<u>Annie Alline Ray</u>	<u>Mathilda Ballantyne</u>	<u>Annie May Harris</u>
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	<u>Wellington Co.</u>	<u>Louden, Ont</u>	<u>Burham Sp</u>
When were they married?	<u>Apr 9th 1897</u>	<u>June 5. 1900</u>	<u>Dec 17th 1899</u>
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	<u>Dr Carter</u>	<u>Dr Carter</u>	<u>Dr Rogers</u>
Your relation to child.	<u>Sister</u>	<u>Father</u>	<u>Father</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>Annie Myrtle Johnnie</u>	<u>William H. Schraw</u>	<u>W. Burder</u>
Address	<u>Jagersville</u>	<u>Jagersville</u>	<u>Jagersville</u>
Date	<u>May 12/13</u>	<u>May 12/13</u>	<u>May 18th 1913</u>
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1913
Given under my hand this 9th day of July A.D. 1913

Division Registrar of Jagersville

BIRTHS

County of Jefferson

Division of Lingersall

	Surname first	Surname first	Surname first
What is the full name of child?	Summerfield Helma Elina	Byatt Helma Irene	Waines David Saffel
When was the child born?	May 12th 1913	May 21st 1913	May 21st 1913
Where was the child born? Street number or Con- cession and Lot.	Charlottesville 8 If in a hospital give its name Lingersall	Wells St 8 If in a hospital give its name Lingersall	Wells St 8 If in a hospital give its name Lingersall
Male or Female.	Female	Female	Male
Are the Parents married?	Yes	Yes	Yes
Full name of Father.	James Summerfield	Eric William Byatt	Martin Waines
Occupation of Father?	Carpenter	Seaman	Machinist
Full Maiden Name of Mother.	Hena May Pearce	Agnes Daisy	Mabel Eichenberg
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	Lingersall	Wassleben	Lingersall
When were they married?	Sept 17th 1911	Apr 20th 1912	Aug 20th 1910
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attend- ing.	Dr. Campbell	Dr. Kelly	Dr. Williams
Your relation to child.	Father	Father	Father
Were you in house at time of Birth?	Yes	Yes	Yes
Certified by	J. Summerfield	E. W. Byatt	Martin Waines
Address	Paroutford	Lingersall	Lingersall
Date	May 16th 1913	May 16th 1913	May 21st 1913
Remarks			
State if Mono, Triplet, Ple- gitimate or Still-birth.			

	Surname first	Surname first	Surname first
What is the full name of child?	Chamber Hilda Rose May	Healy Doris Ethel	Kinday James Whitford
When was the child born?	May 15th 1913	April 20th 1913	Apr 24th 1913
Where was the child born? Street number or Con- cession and Lot.	Wells St 8 If in a hospital give its name Lingersall	Wassleben 8 If in a hospital give its name Lingersall	Wells St 8 If in a hospital give its name Lingersall
Male or Female.	Female	Female	Male
Are the Parents married?	Yes	Yes	Yes
Full name of Father.	Thomas Whit Chamber	Frederic William Healy	William Kinday
Occupation of Father?	Seaman	Underwriter	Seaman
Full Maiden Name of Mother.	Hellie Sharp	Gannie Bond Westlake	Rose Whitford
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	England	Wassleben	Wassleben
When were they married?	Aug 27th 1894	June 17th 1900	July 4th 1913
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attend- ing.	Dr. Kelly	Dr. Calveridge	Dr. Kelly
Your relation to child.	Mother	Father	Mother
Were you in house at time of Birth?	Yes	Yes	Yes
Certified by	Mrs. J. W. Chamber	Edith Healy	Mrs. W. Kinday
Address	Lingersall	Lingersall	Lingersall
Date	May 21st 1913	May 21st 1913	May 21st 1913
Remarks			
State if Mono, Triplet, Ple- gitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1913
 Given under my hand this 9th day of July A.D. 1913
 Division Registrar of Lingersall

*N.B.—The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.

BIRTHS

County of Alford Division of Sugarsale

	Surname first	Surname first	Surname first
What is the full name of child?	1 <u>Wm. Roy Wm. James Marley</u>	1 <u>Caultin James Anderson Dundas</u>	1
When was the child born?	2 <u>May 30th 1913</u>	2 <u>May 29th 1913</u>	2
Where was the child born? Street number or Concession and Lot.	3 <u>King St</u> 3 If in a hospital give its name <u>Sugarsale</u>	3 <u>Dundas St</u> 3 If in a hospital give its name <u>Sugarsale</u>	3 If in a hospital give its name.
Male or Female.	4 <u>Male</u>	4 <u>Male</u>	4
Are the Parents married?	5 <u>Yes</u>	5 <u>Yes</u>	5
Full name of Father.	6 <u>James Leslie Huntley</u>	6 <u>James Anderson Caultin</u>	6
Occupation of Father?	7 <u>Machinist</u>	7 <u>Manufactures</u>	7
Full Maiden Name of Mother.	8 <u>Elizabeth Ann Ramsburgh</u>	8 <u>Elizabeth M. Dundas</u>	8
If she has been more than once married give names of former husband or husbands.	9 -	9 -	9
Where were the parents married?	10 <u>Paris</u>	10 <u>Sugarsale</u>	10
When were they married?	11 <u>Jan 22nd 1903</u>	11 <u>Oct 26th 1902</u>	11
If not married give full Name of Mother.	12 -	12 -	12
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13
What is her occupation?	14 -	14 -	14
Name of Physician attending.	15 <u>Dr. Rogers</u>	15 <u>Dr. Walker</u>	15
Your relation to child.	16 <u>Father</u>	16 <u>Father</u>	16
Were you in house at time of Birth?	17 <u>Yes</u>	17 <u>Yes</u>	17
Certified by	18 <u>J. S. Huntley</u>	18 <u>Anderson Caultin</u>	18
Address	<u>Sugarsale</u>	<u>Sugarsale</u>	
Date	<u>June 30th 1913</u>	<u>June 30th 1913</u>	
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

	Surname first	Surname first	Surname first
What is the full name of child?	1 <u>Mary Margaret Evelyn Hoar</u>	1	1
When was the child born?	2 <u>June 11 - 1913</u>	2	2
Where was the child born? Street number or Concession and Lot.	3 <u>Crampton</u> 3 If in a hospital give its name	3 If in a hospital give its name.	3 If in a hospital give its name.
Male or Female.	4 <u>Female</u>	4	4
Are the Parents married?	5 <u>Yes</u>	5	5
Full name of Father.	6 <u>Isaac Newton Hoar</u>	6	6
Occupation of Father?	7 <u>Farmer</u>	7	7
Full Maiden Name of Mother.	8 <u>Rosa Anderson</u>	8	8
If she has been more than once married give names of former husband or husbands.	9	9	9
Where were the parents married?	10 <u>Bathford Sask</u>	10	10
When were they married?	11 <u>June 19th 1908</u>	11	11
If not married give full Name of Mother.	12	12	12
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13	13	13
What is her occupation?	14	14	14
Name of Physician attending.	15 <u>Dr. Neff</u>	15	15
Your relation to child.	16 <u>Father</u>	16	16
Were you in house at time of Birth?	17 <u>Yes</u>	17	17
Certified by	18 <u>Isaac Newton Hoar</u>	18	18
Address	<u>Crampton</u>		
Date	<u>July 9th 1913</u>		
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1913

Given under my hand this 9th day of July A.D. 1913
W. B. Huntley Division Registrar of Sugarsale

BIRTHS

Schedule A.
N.B.—Record all still births as births,
as well as deaths.

County of Jefferson

Division of Jagersdale

	Surname first.	Surname first.	Surname first.
What is the full name of child?	Calverley James Charles	Haenschel Margarete Victoria	Field Boris Irene
When was the child born?	May 24th 1913	May 24th 1913	May 14th 1913
Where was the child born? Street number or Concession and Lot.	11 If in a hospital give its name Jagersdale	8 If in a hospital give its name Jagersdale	7 If in a hospital give its name Jagersdale
Male or Female.	4 Male	4 Female	4 Female
Are the Parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	James James Calverley	John Anthony Haenschel	William Henry Field
Occupation of Father?	Physician	Coal Worker	Cham Representative
Full Maiden Name of Mother.	Frances Cecilia Abelia	Maria Barbara Rust	Marion Margaret Smith
If she has been more than once married give names of former husband or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Stratford	10 Detroit Mich	10 Calgary
When were they married?	11 Oct 27th 1908	11 May 4th 1908	11 Aug 5th 1910
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attending.	15 Dr. Willford	15 Dr. Carver	15 Dr. Williams
Your relation to child.	16 Father	16 Father	16 Father
Were you in house at time of Birth?	17 Yes	17 Yes	17 Yes
Certified by	18 J. Calverley	18 John A. Haenschel	18 W. H. Field
Address	Jagersdale	Jagersdale	Saskatoon
Date	June 2nd 1913	June 2nd 1913	June 2nd 1913
Remarks			
State if Twin, Triplet, Placental or Still-birth.			
What is the full name of child?	Miller M. Andrew	Miller Martine Pearl	Craker Estella May
When was the child born?	June 1st 1913	May 24th 1913	June 10th 1913
Where was the child born? Street number or Concession and Lot.	3 If in a hospital give its name Jagersdale	8 If in a hospital give its name Jagersdale	7 If in a hospital give its name Jagersdale
Male or Female.	4 Male	4 Female	4 Female
Are the Parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	Thomas M. Beecher	John James Miller	Stanley Rossignol Craker
Occupation of Father?	Teacher	Machinist	Machinist
Full Maiden Name of Mother.	Margaret Lane	Oliver Maud Smith	Annie Larrant
If she has been more than once married give names of former husband or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Stratford	10 Jagersdale	10 Windsor
When were they married?	11 June 2nd 1908	11 Jan 1st 1901	11 Nov 2nd 1902
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attending.	15 Dr. Rogers	15 Dr. Helf	15 Dr. Helf
Your relation to child.	16 Mother	16 Father	16 Mother
Were you in house at time of Birth?	17 Yes	17 Yes	17 Yes
Certified by	18 Mrs. M. M. Beecher	18 J. J. Miller	18 Mrs. S. R. Craker
Address	Jagersdale	Jagersdale	Jagersdale
Date	June 19th 1913	June 21st 1913	June 26th 1913
Remarks			
State if Twin, Triplet, Placental or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1913

Given under my hand this 9th day of July A.D. 1913
M. Smith
Division Registrar Jagersdale

BIRTHS

County of Jefferson Division of Ingersoll

	Surname first.	Surname first.	Surname first.
What is the full name of child?	<u>Sillett Helen May</u>	<u>Maere Bernard</u>	<u>Catterson Cathell McManis</u>
When was the child born?	<u>July 6th 1913</u>	<u>July 16th 1913</u>	<u>July 13th 1913</u>
Where was the child born? Street number or Con- cession and Lot.	<u>Ingersoll</u>	<u>Wells St Ingersoll</u>	<u>Wells St Ingersoll</u>
8 If in a hospital give its name			
Male or Female.	<u>Female</u>	<u>Male</u>	<u>Female</u>
4			
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
5			
Full name of Father.	<u>William John Sillett</u>	<u>John Maere</u>	<u>Stewart Catterson</u>
6			
Occupation of Father?	<u>Labourer</u>	<u>Butcher</u>	<u>Driver</u>
7			
Full Maiden Name of Mother.	<u>Helen May Leigh</u>	<u>Frances Murphy</u>	<u>Janet Wilson</u>
8			
If she has been more than once married give names of former husband or husbands.	<u>-</u>	<u>-</u>	<u>-</u>
9			
Where were the parents married?	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Scotland</u>
10			
When were they married?	<u>1911</u>	<u>July 24th 1907</u>	<u>July 28th 1909</u>
11			
If not married give full Name of Mother.	<u>-</u>	<u>-</u>	<u>-</u>
12			
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	<u>-</u>	<u>-</u>	<u>-</u>
13			
What is her occupation?	<u>-</u>	<u>-</u>	<u>-</u>
14			
Name of Physician attend- ing.	<u>Dr. Cameron</u>	<u>Dr. McKay</u>	<u>Dr. Kelly</u>
15			
Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Father</u>
16			
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
17			
Certified by	<u>W. J. Sillett</u>	<u>J. Maere</u>	<u>Stewart Catterson</u>
18			
Address	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
19			
Date	<u>July 14th 1913</u>	<u>Aug 7th 1913</u>	<u>Aug 6th 1913</u>
20			
Remarks			
21			
State if Twin, Triplet, Ille- gitimate or Still-birth.			
22			
	SURNAME first.	SURNAME first.	SURNAME first.
What is the full name of child?	<u>Bayne Frances Herbert</u>	<u>Cray Donald</u>	<u>Weeks Katherine</u>
23			
When was the child born?	<u>July 24th 1913</u>	<u>July 24th 1913</u>	<u>July 24th 1913</u>
24			
Where was the child born? Street number or Con- cession and Lot.	<u>Wells St Ingersoll</u>	<u>Wells St Ingersoll</u>	<u>Wells St Ingersoll</u>
25			
8 If in a hospital give its name			
Male or Female.	<u>Male</u>	<u>Male</u>	<u>Female</u>
4			
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
5			
Full name of Father.	<u>William Bayne</u>	<u>John Robert Cray</u>	<u>Frank Weeks</u>
6			
Occupation of Father?	<u>Mechanic</u>	<u>Mechanic</u>	<u>Mechanic</u>
7			
Full Maiden Name of Mother.	<u>Angela Margaret Clear</u>	<u>Sarah Dilling</u>	<u>Annie Reynolds</u>
8			
If she has been more than once married give names of former husband or husbands.	<u>-</u>	<u>-</u>	<u>-</u>
9			
Where were the parents married?	<u>Ingersoll</u>	<u>England</u>	<u>England</u>
10			
When were they married?	<u>Nov 4th 1912</u>	<u>Nov 7th 1906</u>	<u>1906</u>
11			
If not married give full Name of Mother.	<u>-</u>	<u>-</u>	<u>-</u>
12			
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	<u>-</u>	<u>-</u>	<u>-</u>
13			
What is her occupation?	<u>-</u>	<u>-</u>	<u>-</u>
14			
Name of Physician attend- ing.	<u>Dr. Williamson</u>	<u>Dr. Colbridge</u>	<u>Dr. Williamson</u>
15			
Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Father</u>
16			
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
17			
Certified by	<u>William Bayne</u>	<u>John Cray</u>	<u>Frank Weeks</u>
18			
Address	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
19			
Date	<u>Aug 9/13</u>	<u>Aug 9/13</u>	<u>Aug 9th 1913</u>
20			
Remarks			
21			
State if Twin, Triplet, Ille- gitimate or Still-birth.			
22			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1913

Given under my hand this 10th day of Oct A.D. 1913
W. J. Sillett Division Registrar of Ingersoll

BIRTHS

Schedule 2.
 To be filled out with births as births,
 as well as deaths.

County of Alford

Division of Sugarsale

	Surname first	Surname first	Surname first
What is the full name of child?	<u>Kreeneau, Harold William</u>	<u>Allen, Frances Elizabeth</u>	<u>Debay, Margaret Edna</u>
When was the child born?	<u>July 2nd 1913</u>	<u>July 10th 1912</u>	<u>July 2nd 1913</u>
Where was the child born? Street number or Concession and Lot.	<u>Home St</u>	<u>Cherry St</u>	<u>Home St</u>
8 If in a hospital give its name	<u>Signature</u>	<u>Signature</u>	<u>Signature</u>
Male or Female.	<u>Male</u>	<u>Female</u>	<u>Female</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>William Lane Kreeneau</u>	<u>Harbert Charles Fuller</u>	<u>Stephen Debay</u>
Occupation of Father?	<u>Business</u>	<u>Carpenter</u>	<u>Machinist</u>
Full Maiden Name of Mother.	<u>Maynard Annie Wright</u>	<u>Annie Wright</u>	<u>Clara Mary Pearson</u>
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	<u>Keamington</u>	<u>Wales</u>	<u>England</u>
When were they married?	<u>April 1910</u>	<u>April 5th 1907</u>	<u>May 6th 1906</u>
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	<u>Dr. Jeff</u>	<u>Dr. Jeff</u>	<u>Dr. Williams</u>
Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Father</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>W. Kreeneau</u>	<u>H. C. Fuller</u>	<u>S. Debay</u>
Address	<u>Sugarsale</u>	<u>Sugarsale</u>	<u>Sugarsale</u>
Date	<u>Aug 15th 1913</u>	<u>Aug 15th 1912</u>	<u>Aug 15th 1913</u>
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			
What is the full name of child?	<u>Mullin</u>	<u>Markham, Walter Bernard</u>	<u>Lease, Helen Elizabeth</u>
When was the child born?	<u>July 10th 1913</u>	<u>July 19th 1913</u>	<u>June 14th 1913</u>
Where was the child born? Street number or Concession and Lot.	<u>Home St</u>	<u>Home St</u>	<u>Home St</u>
8 If in a hospital give its name	<u>Signature</u>	<u>Signature</u>	<u>Signature</u>
Male or Female.	<u>Male</u>	<u>Male</u>	<u>Female</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>Samuel Mullin</u>	<u>Walter Markham</u>	<u>Abraham Lease</u>
Occupation of Father?	-	<u>Seaman</u>	<u>Team Manager</u>
Full Maiden Name of Mother.	<u>Marian Leach</u>	<u>Leticia Hale</u>	<u>Helen Elizabeth Marshall</u>
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	<u>Wales</u>	<u>Wales</u>	<u>Wales</u>
When were they married?	<u>Sept 19th 1909</u>	<u>Oct 19th 1909</u>	<u>June 4th 1907</u>
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	<u>Dr. Campbell</u>	<u>Dr. Williams</u>	<u>Dr. Williams</u>
Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Father</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>W. Mullin</u>	<u>W. Markham</u>	<u>A. Lease</u>
Address	<u>Sugarsale</u>	<u>Sugarsale</u>	<u>Sugarsale</u>
Date	<u>Aug 15th 1913</u>	<u>Aug 19th 1913</u>	<u>Aug 29th 1913</u>
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1913
 Given under my hand this 19th day of Oct A.D. 1913
W. Kreeneau
 Division Registrar of Sugarsale

N.B.—The reference numbers relate to those found in Form 2 or 8, as an aid to transcribing.

BIRTHS

County of Jefferson Division of Engersall

	Surname first.	Surname first.	Surname first.
What is the full name of child?	<u>Cattrell</u> <u>Francis Lawrence</u>	<u>Hard</u> <u>Grace May</u>	<u>Butler</u> <u>James Alexander</u>
When was the child born?	<u>July 1st 1913</u>	<u>June 17th 1913</u>	<u>July 14th 1913</u>
Where was the child born? Street number or Con- cession and Lot.	<u>Wells St.</u> 8 If in a hospital give its name <u>Engersall</u>	<u>Wells St.</u> 8 If in a hospital give its name <u>Engersall</u>	<u>Wells St.</u> 8 If in a hospital give its name <u>Engersall</u>
Male or Female.	4 <u>Male</u>	4 <u>Female</u>	4 <u>Male</u>
Are the Parents married?	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>Yes</u>
Full name of Father.	<u>Francis Lawrence Cattrell</u>	<u>Abelley David</u>	<u>Alexander Butler</u>
Occupation of Father?	<u>Labourer</u>	<u>Labourer</u>	<u>Machinist</u>
Full Maiden Name of Mother.	<u>Elizabeth Caroline</u>	<u>Annie Jane Smith</u>	<u>Martha Ann Burrows</u>
If she has been more than once married give names of former husband or husbands.	9 <u>-</u>	9 <u>-</u>	9 <u>-</u>
Where were the parents married?	10 <u>England</u>	10 <u>Engersall</u>	10 <u>Engersall</u>
When were they married?	11 <u>July 2nd 1911</u>	11 <u>Sept 2nd 1905</u>	11 <u>Apr 5th 1905</u>
If not married give full Name of Mother.	12 <u>-</u>	12 <u>-</u>	12 <u>-</u>
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 <u>-</u>	13 <u>-</u>	13 <u>-</u>
What is her occupation?	14 <u>None</u>	14 <u>-</u>	14 <u>-</u>
Name of Physician attend- ing.	15 <u>None</u>	15 <u>Dr. Jeff</u>	15 <u>Dr. Williams</u>
Your relation to child.	16 <u>Mother</u>	16 <u>Mother</u>	16 <u>Father</u>
Were you in house at time of Birth?	17 <u>Yes</u>	17 <u>Yes</u>	17 <u>Yes</u>
Certified by	18 <u>Wm. J. Cattrell</u>	18 <u>Mrs. Mary Hard</u>	18 <u>John Butler</u>
Address	<u>Engersall</u>	<u>Engersall</u>	<u>Engersall</u>
Date	<u>July 11th 1913</u>	<u>July 12th 1913</u>	<u>July 14th 1913</u>
Remarks			
State if Twin, Triplet, Dis- tillmate or Still-birth.			

	Surname first.	Surname first.	Surname first.
What is the full name of child?	<u>Clair</u> <u>Frankie Stanley</u>	<u>Elizabeth</u> <u>James William</u>	<u>Mullins</u> <u>William Mary</u>
When was the child born?	<u>June 1st 1913</u>	<u>June 2nd 1913</u>	<u>July 10th 1913</u>
Where was the child born? Street number or Con- cession and Lot.	<u>Wells St.</u> 8 If in a hospital give its name <u>Engersall</u>	<u>Wells St.</u> 8 If in a hospital give its name <u>Engersall</u>	<u>Wells St.</u> 8 If in a hospital give its name <u>Engersall</u>
Male or Female.	4 <u>Male</u>	4 <u>Male</u>	4 <u>Female</u>
Are the Parents married?	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>Yes</u>
Full name of Father.	<u>William John Clair</u>	<u>Ray Culp</u>	<u>Thomas Peter Mullins</u>
Occupation of Father?	<u>Labourer</u>	<u>Carriage</u>	<u>Freight Clerk</u>
Full Maiden Name of Mother.	<u>Gennie Taylor</u>	<u>Charles James Fresh</u>	<u>William Hamilton</u>
If she has been more than once married give names of former husband or husbands.	9 <u>-</u>	9 <u>-</u>	9 <u>-</u>
Where were the parents married?	10 <u>Engersall</u>	10 <u>Carl Beckwith</u>	10 <u>Engersall</u>
When were they married?	11 <u>Mar 15th 1903</u>	11 <u>Sept 12th 1911</u>	11 <u>June 6th 1912</u>
If not married give full Name of Mother.	12 <u>-</u>	12 <u>-</u>	12 <u>-</u>
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 <u>-</u>	13 <u>-</u>	13 <u>-</u>
What is her occupation?	14 <u>-</u>	14 <u>-</u>	14 <u>-</u>
Name of Physician attend- ing.	15 <u>Dr. McKay</u>	15 <u>Dr. Cameron</u>	15 <u>Dr. Cameron</u>
Your relation to child.	16 <u>Mother</u>	16 <u>Mother</u>	16 <u>Mother</u>
Were you in house at time of Birth?	17 <u>Yes</u>	17 <u>Yes</u>	17 <u>Yes</u>
Certified by	18 <u>W. J. Clair</u>	18 <u>W. R. Culp</u>	18 <u>William Mullins</u>
Address	<u>Engersall</u>	<u>Engersall</u>	<u>Engersall</u>
Date	<u>July 17th 1913</u>	<u>July 14th 1913</u>	<u>July 19th 1913</u>
Remarks			
State if Twin, Triplet, Dis- tillmate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30 1913 :

Given under my hand this 15th day of Oct A.D. 1913
Division Registrar of Engersall

N.B.—The reference numbers relate to those found in Form 2 or 3 as an aid to transcription.

BIRTHS

Record all still births as births, as well as deaths.

County of Offord Division of Sagersall

	Surname first	Surname first	Surname first
What is the full name of child?	1 Skinner Mary	1 Day Olive Belle	Carson William Henry
When was the child born?	2 Sept 12th 1913	2 Sept 20th 1913	2 Aug 27th 1913
Where was the child born? Street number or Concession and Lot.	3 Charles St Sagersall	3 Charles St Sagersall	3 If in a hospital give its name Sagersall
Male or Female.	4 Female	4 Female	4 Male
Are the Parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	6 Frank Skinner	6 Arthur Day	6 Richard Carson
Occupation of Father?	7 Station Man	7 Barrow Maker	7 Carpenter
Full Maiden Name of Mother.	8 Rose Bettle	8 Olive Belle Blake	8 Annie Daymond
If she has been more than once married give names of former husband or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Hamilton	10 Sagersall	10 Sagersall
When were they married?	11 Sept 13th 1906	11 May 20th 1912	11 1908
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attending.	15 Dr. Neff	15 Dr. Coulter	15 Dr. Coulter
Your relation to child.	16 Father	16 Father	16 Father
Were you in house at time of Birth?	17 Yes	17 Yes	17 Yes
Certified by	18 Frank Skinner	18 Arthur Day	18 Richard Carson
Address	Sagersall	Sagersall	Sagersall
Date	Sept 12th 1913	Sept 20th 1913	Sept 20th 1913
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			
What is the full name of child?	1 Kerr James Allan	2 Scott James Alfred	3 Cole Mary Ellen
When was the child born?	2 July 26th 1913	2 Sept 19th 1913	2 Aug 30th 1913
Where was the child born? Street number or Concession and Lot.	3 Charles St Sagersall	3 If in a hospital give its name Sagersall	3 Charles St Sagersall
Male or Female.	4 Male	4 Male	4 Female
Are the Parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	6 William James Kerr	6 Guy Scott	6 Harry Cole
Occupation of Father?	7 Merchant	7 Mechanic	7 Tailor
Full Maiden Name of Mother.	8 Eleanor Marshall	8 Bessie O'Rourke	8 Margaret Ball
If she has been more than once married give names of former husband or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Hamilton	10 Hamilton	10 Sagersall
When were they married?	11 Mar 16th 1904	11 1911	11 Sept 14th 1907
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attending.	15 Dr. Neff	15 Dr. Coulter	15 Dr. Neff
Your relation to child.	16 Father	16 Father	16 Father
Were you in house at time of Birth?	17 Yes	17 Yes	17 Yes
Certified by	18 W. J. Kerr	18 Guy Scott	18 Harry Cole
Address	Sagersall	Sagersall	Sagersall
Date	Sept 22nd 1913	Sept 24th 1913	Sept 24th 1913
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1913
 Given under my hand this 10th day of Oct A.D. 1913

W. J. Kerr
 Division Registrar of Sagersall

*N.B.—The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.

BIRTHS

N.B.—Record all still births as births, as well as deaths.

Edward
Mary, Louis
Sheldon.

County of Offord

Division of Sugersall

	Surname First	Surname First	Surname First
What is the full name of child?	McKay Donald Henry	Vincent Leslie Edward	McSherry George Michael
When was the child born?	2 Sept 2nd 1913	2 Sept 2nd 1913	2 Sept 2nd 1913
Where was the child born? Street number or Concession and Lot	1 Kings Avenue St. Sugersall	3 If in a hospital give its name Sugersall	3 If in a hospital give its name Sugersall
Male or Female	4 Male	4 Male	4 Male
Are the Parents married?	5 Yes	5 Yes	5 Yes
Full name of Father	Henry Russell McKay	Edwin Randall Vincent	David Frederick McSherry
Occupation of Father?	Electrician	Labourer	Labourer
Full Maiden Name of Mother	Alice Maud Crane	Maria May Lindsay	Mary Jane Burns
If she has been more than once married give names of former husband or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Sugersall	10 Sugersall	10 Sugersall
When were they married?	11 January 1913	11 Nov 21st 1912	11 Sept 7th 1908
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attending.	15 Dr. McKay	15 Dr. Rogers	15 Dr. McKay
Your relation to child.	16 Grandmother	16 Father	16 Father
Were you in house at time of Birth?	17 Yes	17 Yes	17 Yes
Certified by	18 Mrs. D. McKay	18 G. R. Vincent	18 G. J. McSherry
Address	19 Sugersall	19 Sugersall	19 Sugersall
Date	20 Sept 2nd 1913	20 Sept 2nd 1913	20 Sept 2nd 1913
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

	Surname First	Surname First	Surname First
What is the full name of child?	Sheldon Fred Anthony		
When was the child born?	2 Sept 2nd 1913		
Where was the child born? Street number or Concession and Lot	3 Kings Avenue St. Sugersall	3 If in a hospital give its name.	3 If in a hospital give its name.
Male or Female	4 Male	4	4
Are the Parents married?	5 Yes	5	5
Full name of Father	Frederick Joseph Sheldon	6	6
Occupation of Father?	7 Milk Maker	7	7
Full Maiden Name of Mother	8 Violet Bailey	8	8
If she has been more than once married give names of former husband or husbands.	9 -	9	9
Where were the parents married?	10 Sugersall	10	10
When were they married?	11 Oct 12th 1912	11	11
If not married give full Name of Mother.	12 -	12	12
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13	13
What is her occupation?	14 -	14	14
Name of Physician attending.	15 Dr. McKay	15	15
Your relation to child.	16 Father	16	16
Were you in house at time of Birth?	17 Yes	17	17
Certified by	18 F. J. Sheldon	18	18
Address	19 Sugersall		
Date	20 Sept 30th 1913		
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending
 Given under my hand this _____ day of _____ A.D. 1913
 Division Registrar of _____

*N.B.—The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.

BIRTHS

Albert Hurren, Ethel
Lora A. Zabel

County of Jefferson

Division of Ingersoll

	Surname first.	Surname first.	Surname first.
What is the full name of child?	Fuller George Fred	Norman William Albert	Butler Cecil Harold
When was the child born?	Sept 20th 1913	Sept 11th 1913	Sept 4th 1913
Where was the child born? Street number or Con- cession and Lot.	See 4th	See 4th	See 4th
Male or Female.	Male	Male	Male
Are the Parents married?	Yes	Yes	Yes
Full name of Father.	Frederic James Fuller	William Norman	Erwin Butler
Occupation of Father?	Teacher	Labourer	Farmer
Full Maiden Name of Mother.	Bertha Barlow	Kathleen Eleanor Page	Edna May Harris
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	England	Ingersoll	Ingersoll
When were they married?	1902	Nov 26th 1912	June 1st 1910
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attend- ing.	Dr. Lumbler	Dr. Huff	Dr. Huff
Your relation to child.	Father	Mother	Father
Were you in house at time of Birth?	Yes	Yes	Yes
Certified by	J. J. Fuller	Mrs. W. M. Norman	Erwin Butler
Address	Ingersoll	Ingersoll	Ingersoll
Date	Oct 6th 1913	Oct 7th 1913	Oct 10th 1913
Remarks			
State if Twin, Triplet, Ille- gitimate or Still-birth.			

	Surname first.	Surname first.	Surname first.
What is the full name of child?	Winnable Doris Elizabeth	W. M. Miller Deborah Annetta	Kelly Albert Christie
When was the child born?	Sept 24th 1913	Sept 13th 1913	Sept 4th 1913
Where was the child born? Street number or Con- cession and Lot.	See 4th	See 4th	See 4th
Male or Female.	Female	Male	Male
Are the Parents married?	Yes	Yes	No
Full name of Father.	James William Winnable	Benjamin Alexander Miller	John Christie
Occupation of Father?	Owner	Butcher	Chair maker
Full Maiden Name of Mother.	Ada Butt	Mary Beard	Myrtle Kelly
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	Ingersoll	Ingersoll	not married
When were they married?	May 4th 1911	Oct 19th 1899	-
If not married give full Name of Mother.	-	-	Myrtle Kelly
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	single
What is her occupation?	-	-	-
Name of Physician attend- ing.	Dr. Cambridge	Dr. Lumbler	Dr. Rogers
Your relation to child.	Father	Father	Mother
Were you in house at time of Birth?	Yes	Yes	Yes
Certified by	J. W. Winnable	B. D. Miller	Myrtle Kelly
Address	Ingersoll	Ingersoll	See 4th
Date	Oct 10th 1913	Oct 11th 1913	Oct 11th 1913
Remarks			Legitimate
State if Twin, Triplet, Ille- gitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1913 day of January AD 1914

Division Registrar of Ingersoll

*N.B.—The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.

BIRTHS

County of Jefferson

Division of Lugersville

	Surname first	Surname first	Surname first
What is the full name of child?	Richard Davis Irene	Wade Elizabeth Isabella	Myers Davis Marie
When was the child born?	Sept 17th 1913	Sept 28th 1913	Aug 30th 1913
Where was the child born?	Ringlet	Ringlet	Wardensburg, West Va
Street number or Concession and Lot.	3 If in a hospital give its name Lugersville	3 If in a hospital give its name Lugersville	3 If in a hospital give its name Lugersville
Male or Female.	4 Female	4 Female	4 Female
Are the Parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	Henry W. Richard	Robert Wade	Russell Myers
Occupation of Father?	Blacksmith	Mechanic	Auto Brewer
Full Maiden Name of Mother.	Allie B. Balkin	Isabelle Hughes	Rosa Lemiskey
If she has been more than once married give names of former husband or husbands.	0 -	9 -	9 -
Where were the parents married?	10 Mitchell	10 Lugersville	10 Hamilton
When were they married?	11 Dec 2nd 1914	11 Jan 29th 1912	11 Oct 1909
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attending.	15 Dr. Rogers	15 Dr. McKay	15 Dr. McKay
Your relation to child.	16 Father	16 Father	16 Father
Were you in house at time of Birth?	17 No	17 Yes	17 Yes
Certified by	18 H. W. Richard	18 Robert Wade	18 Russell Myers
Address	Lugersville	Lugersville	Hamilton Ave.
Date	Oct 17th 1913	Oct 24th 1913	Oct 24th 1913
Remarks			

	Surname first	Surname first	Surname first
What is the full name of child?	George Catherine Bernece	Johnnie Violet May	James Nelson William
When was the child born?	Oct 19th 1913	Sept 27th 1913	Mar 13th 1913
Where was the child born?	Ringlet	Ringlet	Ringlet
Street number or Concession and Lot.	8 If in a hospital give its name Lugersville	8 If in a hospital give its name Lugersville	8 If in a hospital give its name Lugersville
Male or Female.	4 Female	4 Female	4 Male
Are the Parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	John Edgar Morgan	Bert Johnstone	Charles Henry Jones
Occupation of Father?	Superintendent	Butcher	Cement worker
Full Maiden Name of Mother.	Anna Jones	Essie Williams	Oliver Elizabeth Thompson
If she has been more than once married give names of former husband or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Lugersville	10 Saranota	10 Lugersville
When were they married?	11 Sept 17th 1907	11 Jan 1st 1913	11 Jan 1st 1904
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attending.	15 Dr. Williams	15 Dr. Terrell	15 Dr. Kemp
Your relation to child.	16 Father	16 Mother	16 Father
Were you in house at time of Birth?	17 Yes	17 Yes	17 Yes
Certified by	18 J. Edgar Morgan	18 Mrs. Bert Johnstone	18 Charles H. Jones
Address	Lugersville	Lugersville	Lugersville
Date	Nov 5th 1913	Nov 22nd 1913	Nov 24th 1913
Remarks			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1913
 Given under my hand this 5th day of January A.D. 1914

H. W. Richard
 Division Registrar of Lugersville

BIRTHS

County of Jefferson

Division of Virginia

	Surname first	Surname first	Surname first
1. What is the full name of child?	McNemett, Thomas Alcala	Davidson, Ernest Albert	Downing, John Grant
2. When was the child born?	Oct 21st 1913	Oct 27th 1913	Oct 20th 1913
3. Where was the child born? Street number or Concession and Lot.	Jefferson	Jefferson	Jefferson
4. Male or Female.	Female	Male	Male
5. Are the Parents married?	Yes	Yes	Yes
6. Full name of Father.	Albert Henry McNemett	Robert Albert Davidson	John Eugene Downing
7. Occupation of Father?	Carpenter	Teacher	Time Keeper
8. Full Maiden Name of Mother.	Kathleen Mary Knight	Rachel Davidson	Margaret May McVee
9. If she has been more than once married give names of former husband or husbands.	-	-	-
10. Where were the parents married?	Chicago	Detroit Mich	Lincoln Ave. Out
11. When were they married?	Apr 20th 1903	June 29th 1907	Apr 6th 1910
12. If not married give full Name of Mother.	-	-	-
13. Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
14. What is her occupation?	-	-	-
15. Name of Physician attending.	Dr. McKay	Dr. Cantler	Dr. Drake
16. Your relation to child.	Father	Father	Father
17. Were you in house at time of Birth?	Yes	Yes	Yes
18. Certified by	D. H. McNemett	W. B. Davidson	J. G. Downing
19. Address	Jefferson	Jefferson	Jefferson
20. Date	Nov 23rd 1913	Nov 26th 1913	Nov 27th 1913
21. Remarks			
22. State if Twin, Triplet, Illegitimate or Still-birth.			
1. What is the full name of child?	Bellon Kathleen Marie	Brown Ray Carl Charles	Langfield Clarence William
2. When was the child born?	Nov 1st 1913	Nov 1st 1913	Nov 27th 1913
3. Where was the child born? Street number or Concession and Lot.	Jefferson	Jefferson	Jefferson
4. Male or Female.	Female	Male	Male
5. Are the Parents married?	Yes	Yes	Yes
6. Full name of Father.	William Bellon	Charles Henry Brown	Christian Lee Langfield
7. Occupation of Father?	Machinist	Butcher	Machinist
8. Full Maiden Name of Mother.	Marion Jones	Marion Bellon	Margaret Amelia Atkins
9. If she has been more than once married give names of former husband or husbands.	-	-	-
10. Where were the parents married?	Kanuch	England	Jefferson
11. When were they married?	May 1st 1907	Nov 21st 1908	Dec 21st 1910
12. If not married give full Name of Mother.	-	-	-
13. Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
14. What is her occupation?	-	-	-
15. Name of Physician attending.	Dr. Williams	Dr. Kelly	Dr. Williams
16. Your relation to child.	Father	Sister	Father
17. Were you in house at time of Birth?	Yes	Yes	Yes
18. Certified by	W. B. Bellon	Margie Brown	C. B. Langfield
19. Address	Jefferson	Jefferson	Jefferson
20. Date	Nov 26th 1913	Nov 29th 1913	Dec 20th 1913
21. Remarks			
22. State if Twin, Triplet, Illegitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1913
Given under my hand this 21st day of January A.D. 1914
Division Registrar of Jefferson

*N.B.—The reference numbers relate to those found in Form 2 or 3, as an aid in transcribing.

BIRTHS

N.B.—Record all still births as births, as well as deaths.

County of Windsor Division of Sagersall

	Surname first	Surname first	Surname first
1 What is the full name of child?	Haughton Gordon James	Smith William	Wagner John Frederick
2 When was the child born?	Nov 2nd 1913	Nov 25th 1913	Dec 14th 1913
3 Where was the child born? Street number or Concession and Lot.	Home St Sagersall	Grand St Sagersall	Windsor Sagersall
4 Male or Female.	Male	Male	Male
5 Are the Parents married?	Yes	Yes	Yes
6 Full name of Father.	Ernest William Haughton	Samuel James Smith	Frederic Kevin Wagner
7 Occupation of Father?	Painter	Painter	Contractor
8 Full Maiden Name of Mother.	Mrs Elizabeth Besagge	Elizabeth Stevens	Mary Annice Hamilton
9 If she has been more than once married give names of former husband or husbands.	-	-	-
10 Where were the parents married?	Windsor Ont	England	Cast Kew Ont
11 When were they married?	July 15th 1910	Mar 22nd 1909	June 11th 1906
12 If not married give full Name of Mother.	-	-	-
13 Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
14 What is her occupation?	-	-	-
15 Name of Physician attending.	Dr. Rogers	Dr. Kelly	Dr. Williams
16 Your relation to child.	Father	Father	Father
17 Were you in house at time of Birth?	Yes	Yes	Yes
18 Certified by	E. W. Haughton	J. G. Smith	J. G. Wagner
Address	Sagersall	Sagersall	Sagersall
Date	Dec 1st 1913	Dec 1st 1913	Dec 6th 1913
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

	Surname first	Surname first	Surname first
1 What is the full name of child?	Kearney Henry William	Keelihan James Francis	Kidd John Phymon Spittal
2 When was the child born?	Dec 1st 1913	Nov 11th 1913	Dec 2nd 1913
3 Where was the child born? Street number or Concession and Lot.	Windsor Sagersall	Windsor Sagersall	Charles St Sagersall
4 Male or Female.	Male	Male	Female
5 Are the Parents married?	Yes	Yes	Yes
6 Full name of Father.	Henry William Kearney	Frank John Keelihan	Daniel Cameron Kidd
7 Occupation of Father?	Machinist	Beer	Machinist
8 Full Maiden Name of Mother.	William Turner	Mary Elizabeth Delaney	Abelha S Spittal
9 If she has been more than once married give names of former husband or husbands.	-	-	-
10 Where were the parents married?	England	Sagersall	Sagersall
11 When were they married?	Nov 24th 1906	Oct 12th 1911	July 6th 1913
12 If not married give full Name of Mother.	-	-	-
13 Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
14 What is her occupation?	-	-	-
15 Name of Physician attending.	Dr. Williams	Dr. McKay	Dr. Cameron
16 Your relation to child.	Father	Father	Father
17 Were you in house at time of Birth?	Yes	Yes	Yes
18 Certified by	H. W. Kearney	J. G. Keelihan	D. C. Kidd
Address	Sagersall	Sagersall	Sagersall
Date	Dec 9th 1913	Dec 9th 1913	Dec 15th 1913
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1913

Given under my hand this 5th day of January A.D. 1914
W. A. Smith
 Division Registrar of Sagersall

N.B.—The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.

BIRTHS

County of Essex Division of Sugarsville

	Surname First	Surname First	Surname First
What is the full name of child?	Stephenson Julia Henri May	Stacey Ethel	Coake Doris Mabel
When was the child born?	Nov 11th 1913	Nov 29th 1913	Dec 2nd 1913
Where was the child born? Street number or Concession and Lot.	3 If in a hospital give its name Sugarsville	8 If in a hospital give its name Sugarsville	3 If in a hospital give its name Sugarsville
Male or Female	Female	Female	Female
Are the Parents married?	Yes	Yes	Yes
Full name of Father.	Charles William Stephenson	Frank Stacey	Harry Coake
Occupation of Father?	Seaman	Seaman	Machinist
Full Maiden Name of Mother.	Mary Esther Bradley	Elizabeth Krifer	Ethel Elizabeth Brown
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	Canada	England	England
When were they married?	Jan 10th 1905	1910	Oct 4th 1909
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	Dr. Veff	Dr. Cambridge	Dr. Cambridge
Your relation to child.	Mother	Father	Father
Were you in house at time of Birth?	Yes	Yes	Yes
Certified by	Wm. W. Stephenson	Frank Stacey	Harry Coake
Address	Sugarsville	Sugarsville	Sugarsville
Date	Dec 24th 1913	Dec 24th 1913	Dec 29th 1913
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

	Surname First	Surname First	Surname First
What is the full name of child?	Colliatt Harold Barkin	Barker Wilfred John	
When was the child born?	Dec 9th 1913	Dec 14th 1913	
Where was the child born? Street number or Concession and Lot.	3 If in a hospital give its name Sugarsville	3 If in a hospital give its name Sugarsville	3 If in a hospital give its name.
Male or Female	Male	Male	
Are the Parents married?	Yes	Yes	
Full name of Father.	Ernest Colliatt	Thomas William Barker	
Occupation of Father?	Agent	Farmer	
Full Maiden Name of Mother.	Anna Lou Blackford	Edna Phillips	
If she has been more than once married give names of former husband or husbands.	-	-	
Where were the parents married?	Washington	Sugarsville	
When were they married?	Sept 13th 1909	Oct 26th 1906	
If not married give full Name of Mother.	-	-	
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	
What is her occupation?	-	-	
Name of Physician attending.	Dr. Veff	Dr. Veff	
Your relation to child.	Father	Father	
Were you in house at time of Birth?	Yes	Yes	
Certified by	Ernest Colliatt	Wm. W. Barker	
Address	Sugarsville	Sugarsville	
Date	Dec 29th 1913	Dec 29th 1913	
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1913
 Given under my hand this 5th day of January A.D. 1914
Wm. W. Barker Division Registrar of Sugarsville

82 D The reference numbers relate to those found in Form 2 or 3 as an aid to transcribing.

BIRTHS

County of Alford Division of Sugarsall

	SURNAME FIRST	SURNAME FIRST	SURNAME FIRST
What is the full name of child?	<u>Beath Norma Irene</u>	<u>Cowell Albert</u>	<u>Randolph Edna Mary Ann</u>
When was the child born?	<u>Dec 25th 1913</u>	<u>Jan 15th 1914</u>	<u>Dec 25th 1913</u>
Where was the child born?	<u>Alford Hospital</u>	<u>Alford Hospital</u>	<u>Alford Hospital</u>
Street number or Concession and Lot.	<u>3</u>	<u>8</u>	<u>8</u>
Male or Female.	<u>Female</u>	<u>Male</u>	<u>Female</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>Beryl Beath</u>	<u>Joseph C. Cowell</u>	<u>William James Randolph</u>
Occupation of Father?	<u>Self Maker</u>	<u>Labourer</u>	<u>Shipper</u>
Full Maiden Name of Mother.	<u>Elizabeth Elizabeth Beath</u>	<u>Alice Cooper</u>	<u>Edith Regina Edmonds</u>
If she has been more than once married give names of former husband or husbands.	<u>-</u>	<u>-</u>	<u>-</u>
Where were the parents married?	<u>Sugarsall</u>	<u>England</u>	<u>England</u>
When were they married?	<u>June 30th 1909</u>	<u>Mar 30th 1908</u>	<u>Mar 15th 1913</u>
If not married give full Name of Mother.	<u>-</u>	<u>-</u>	<u>-</u>
Is she single or a Widow?	<u>-</u>	<u>-</u>	<u>-</u>
If a widow state name, occupation, and date of husband's death.	<u>-</u>	<u>-</u>	<u>-</u>
What is her occupation?	<u>-</u>	<u>-</u>	<u>-</u>
Name of Physician attending.	<u>Dr. Williams</u>	<u>Dr. Carmlin</u>	<u>Dr. Neff</u>
Your relation to child.	<u>Father</u>	<u>Mother</u>	<u>Mother</u>
Were you in house at time of Birth?	<u>No</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>Beryl Beath</u>	<u>Edna C. Cooper, Nurse</u>	<u>Mrs W J Randolph</u>
Address	<u>Sugarsall</u>	<u>Sugarsall</u>	<u>Sugarsall</u>
Date	<u>Jan 26th 1914</u>	<u>Jan 26th 1914</u>	<u>Jan 26th 1914</u>
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

	SURNAME FIRST	SURNAME FIRST	SURNAME FIRST
What is the full name of child?	<u>Edna Margaret Elizabeth</u>	<u>Edna Edna Selena</u>	<u>Edna Edna Rose</u>
When was the child born?	<u>Jan 25th 1914</u>	<u>Jan 25th 1914</u>	<u>Jan 15th 1914</u>
Where was the child born?	<u>Alford St</u>	<u>Alford St</u>	<u>Alford St</u>
Street number or Concession and Lot.	<u>3</u>	<u>8</u>	<u>8</u>
Male or Female.	<u>Female</u>	<u>Female</u>	<u>Female</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>Edward C. Edna</u>	<u>Edward C. Edna</u>	<u>Edna C. Edna</u>
Occupation of Father?	<u>Machinist</u>	<u>Machinist</u>	<u>Machinist</u>
Full Maiden Name of Mother.	<u>Margaret Edna Reinke</u>	<u>Margaret Edna Reinke</u>	<u>Rosa Mewowsky</u>
If she has been more than once married give names of former husband or husbands.	<u>-</u>	<u>-</u>	<u>-</u>
Where were the parents married?	<u>Alford</u>	<u>Alford</u>	<u>Alford</u>
When were they married?	<u>June 4th 1913</u>	<u>June 4th 1913</u>	<u>Jan 4th 1904</u>
If not married give full Name of Mother.	<u>-</u>	<u>-</u>	<u>-</u>
Is she single or a Widow?	<u>-</u>	<u>-</u>	<u>-</u>
If a widow state name, occupation, and date of husband's death.	<u>-</u>	<u>-</u>	<u>-</u>
What is her occupation?	<u>-</u>	<u>-</u>	<u>-</u>
Name of Physician attending.	<u>Dr. Carmlin</u>	<u>Dr. Carmlin</u>	<u>Dr. Carmlin</u>
Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Father</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>E. C. Edna</u>	<u>E. C. Edna</u>	<u>Edna C. Edna</u>
Address	<u>Sugarsall</u>	<u>Sugarsall</u>	<u>Sugarsall</u>
Date	<u>Jan 31st 1914</u>	<u>Jan 31st 1914</u>	<u>July 2nd 1914</u>
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.	<u>Single</u>	<u>Single</u>	<u>Single</u>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1914

Given under my hand this 6th day of April A.D. 1914
 Division Registrar of Sugarsall

BIRTHS

County of Orange Division of Sarasota

	Surname First	Surname First	Surname First
What is the full name of child?	Butler Dorothy M	Prank Mary Germaine	Stephens Henry
When was the child born?	Jan 22nd 1914	Jan 22nd 1914	July 16th 1914
Where was the child born? Street number or Concession and Lot.	Chickadee Hospital 8 If in a hospital give its name	Chickadee Hospital 8 If in a hospital give its name	8 If in a hospital give its name
Male or Female.	Female	Female	Male
Are the Parents married?	Yes	Yes	Yes
Full name of Father.	Benjamin W. Butler	Donnie Prankie	Francis Wesley Stephens
Occupation of Father?	Farmer	Agent	Machinist
Full Maiden Name of Mother.	Edith E. Millman	Anna Germaine	Agnes Mabel Seluward
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	Kendall out	Sarasota	Sarasota
When were they married?	Oct 22nd 1910	Sept 2nd 1907	1901
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	Dr. Williams	Dr. W. W. Rogers	Dr. Rogers
Your relation to child.	Nurse	Father	Father
Were you in house at time of Birth?	Yes	Yes	Yes
Certified by	Edith E. Millman	Donnie Prankie	Henry Stephens
Address	Sarasota	Sarasota	Sarasota
Date	July 16th 1914	July 16th 1914	July 17th 1914
Remarks			Still born
State if Twin, Triplet, Placental or Still-birth.			
What is the full name of child?	Belle Charles John	Sherran Edward Vincent	Walterhouse Vera Madeline
When was the child born?	July 20th 1914	June 19th 1914	April 18th 1914
Where was the child born? Street number or Concession and Lot.	8 If in a hospital give its name	8 If in a hospital give its name	8 If in a hospital give its name
Male or Female.	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
Full name of Father.	Walter John Whitehouse	Henry Edgar Sherran	Samuel Whitehouse
Occupation of Father?	Male	Shoemaker	Machinist
Full Maiden Name of Mother.	Yes	Charlotte Miller	Minnie Bell Taylor
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	Kendall	Kendall	Kendall
When were they married?	June 14th 1909	July 20th 1906	Dec 16th 1912
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	Dr. Rogers	Dr. Williams	Dr. Williams
Your relation to child.	Father	Father	Mother
Were you in house at time of Birth?	Yes	Yes	Yes
Certified by	W. J. Whitehouse	H. E. Sherran	W. J. Whitehouse
Address	Sarasota	Sarasota	Sarasota
Date	July 19th 1914	July 20th 1914	July 26th 1914
Remarks			
State if Twin, Triplet, Placental or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1914
 Given under my hand this 6th day of April A.D. 1914
W. J. Whitehouse
 Division Registrar of Sarasota

*N.B.—The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.

BIRTHS

County of Alford

Division of Suzerance

	Surname First	Surname First	Surname First
What is the full name of child?	<u>Richardson Marion Jean</u>	<u>Clark Melba Leta</u>	<u>Caterson Gladys Irene</u>
When was the child born?	<u>Mar 1st 1914</u>	<u>Jan 20th 1914</u>	<u>July 7th 1914</u>
Where was the child born? Street number or Concession and Lot.	<u>If in a hospital give its name and number</u>	<u>Concession St. If in a hospital give its name and number</u>	<u>If in a hospital give its name and number</u>
Male or Female.	<u>Female</u>	<u>Female</u>	<u>Female</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>Robert William Richardson</u>	<u>Albert Brown Clark</u>	<u>Thomas Blumenthal Caterson</u>
Occupation of Father?	<u>Shipper</u>	<u>Merchant</u>	<u>Farmer</u>
Full Maiden Name of Mother.	<u>Dorothy Charlotte Kibler</u>	<u>Oliver Paula Kennedy</u>	<u>Oliver Paula May Buchanan</u>
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	<u>Paris out</u>	<u>New York</u>	<u>West Gore</u>
When were they married?	<u>Oct 1st 1907</u>	<u>Jan 24th 1909</u>	<u>Dec 24th 1908</u>
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	<u>Dr. McKay</u>	<u>Dr. Williams</u>	<u>Dr. McKay</u>
Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Father</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>R. W. Richardson</u>	<u>W. S. Beland</u>	<u>J. D. Caterson</u>
Address	<u>Suzerance</u>	<u>Suzerance</u>	<u>Suzerance</u>
Date	<u>Mar 7/14</u>	<u>Mar 7/14</u>	<u>Mar 9th 1914</u>
Remarks	-	-	-
State if Twin, Triplet, Illegitimate or Still-birth.	-	-	-
	Surname First	Surname First	Surname First
What is the full name of child?	<u>Bayne Gladys Ruth</u>	<u>Boutchinson Gordon Murray</u>	<u>Beachey Clara</u>
When was the child born?	<u>Dec 20th 1914</u>	<u>July 17th 1914</u>	<u>July 21st 1914</u>
Where was the child born? Street number or Concession and Lot.	<u>If in a hospital give its name and number</u>	<u>If in a hospital give its name and number</u>	<u>If in a hospital give its name and number</u>
Male or Female.	<u>Female</u>	<u>Male</u>	<u>Female</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>John Bayne</u>	<u>Andrew Boutchinson</u>	<u>George Thomas Beachey</u>
Occupation of Father?	<u>Farmer</u>	<u>Farmer</u>	<u>Carpenter</u>
Full Maiden Name of Mother.	<u>Margaret McEwen</u>	<u>Edna Gordon</u>	<u>Clara Titus</u>
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	<u>Suzerance</u>	<u>North Saskatchewan</u>	<u>Wassenaar</u>
When were they married?	<u>Apr 29th 1906</u>	<u>March 26th 1913</u>	<u>May 20th 1913</u>
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	<u>Dr. Neff</u>	<u>Dr. Leavelle</u>	<u>Dr. Cantin</u>
Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Father</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>John Bayne</u>	<u>Andrew Boutchinson</u>	<u>J. D. Beachey</u>
Address	<u>Suzerance</u>	<u>Suzerance</u>	<u>Suzerance</u>
Date	<u>Mar 17th 1914</u>	<u>Mar 16th 1914</u>	<u>Mar 16th 1914</u>
Remarks	-	-	-
State if Twin, Triplet, Illegitimate or Still-birth.	-	-	-

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1914
 Given under my hand this 6th day of April 1914
W. S. Beland
 Division Registrar of Suzerance

*N.B.—The reference numbers relate to those found in Form 2 or 5, as an aid to transcribing.

BIRTHS

Revised 1914
 N. B. - Record all still-births as births,
 as well as deaths.

County of Chippewa Division of Singeress

	Surname first.	Surname first.	Surname first.
What is the full name of child?	<u>Breakfield Donald Edward</u>	<u>Deles Doris Luisea Alexandra</u>	<u>Blaney Ralph Edward</u>
When was the child born?	<u>Jan 1st 1914</u>	<u>Dec 9th 1913</u>	<u>Dec 14th 1913</u>
Where was the child born?	<u>Singeress</u>	<u>Chippewa Hospital</u>	<u>Singeress</u>
Street number or Concession and Lot.			
Male or Female.	<u>Male</u>	<u>Female</u>	<u>Male</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>Edmund Breakfield</u>	<u>John William Deles</u>	<u>Russell Blaney</u>
Occupation of Father?	<u>Labourer</u>	<u>Machinist</u>	<u>Machinist</u>
Full Maiden Name of Mother.	<u>Elizabeth May Breakfield</u>	<u>Helien Clara Deines</u>	<u>Annie Sewell</u>
If she has been more than once married give names of former husband or husbands.			
Where were the parents married?	<u>Singeress</u>	<u>Singeress</u>	<u>Detroit Mich</u>
When were they married?	<u>1904</u>	<u>June 25th 1913</u>	<u>June 19th 1908</u>
If not married give full Name of Mother.			
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.			
What is her occupation?			
Name of Physician attending.	<u>Dr. Kelly</u>	<u>Dr. McKay</u>	<u>Dr. McKay</u>
Your relation to child.	<u>Father</u>	<u>Mother-in-law</u>	<u>Father</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>No</u>	<u>Yes</u>
Certified by	<u>E. Breakfield</u>	<u>Mrs. J. Deines</u>	<u>Russell Blaney</u>
Address	<u>Singeress</u>	<u>Singeress</u>	<u>Singeress</u>
Date	<u>Jan. 2nd 1914</u>	<u>Jan 5th 1914</u>	<u>Jan 5th 1914</u>
Remarks			
State if Twin, Triplet, Placental or Still-birth.	<u>Still Born</u>		
What is the full name of child?	<u>Shaults David Edward George</u>	<u>Dunk Lena</u>	<u>Watson Margaret Catharine</u>
When was the child born?	<u>Dec 25th 1913</u>	<u>Dec 13th 1913</u>	<u>Dec 21st 1913</u>
Where was the child born?	<u>Singeress</u>	<u>Chippewa</u>	<u>Singeress</u>
Street number or Concession and Lot.			
Male or Female.	<u>Male</u>	<u>Female</u>	<u>Female</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>David Shaults</u>	<u>Albert Herman Dunk</u>	<u>Smith Blair Watson</u>
Occupation of Father?	<u>Engineer</u>	<u>Bus Driver</u>	<u>Labourer</u>
Full Maiden Name of Mother.	<u>Caroline May Shault</u>	<u>Mary Simpson</u>	<u>Catharine Cameron Ross</u>
If she has been more than once married give names of former husband or husbands.			
Where were the parents married?	<u>Singeress</u>	<u>Singeress</u>	<u>Singeress</u>
When were they married?	<u>Sept 21st 1912</u>	<u>June 30th 1908</u>	<u>Dec 25th 1912</u>
If not married give full Name of Mother.			
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.			
What is her occupation?			
Name of Physician attending.	<u>Dr. Kelly</u>	<u>Dr. Cambridge</u>	<u>Dr. Cornille</u>
Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Father</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>David Shaults</u>	<u>A. C. Dunk</u>	<u>S. B. Watson</u>
Address	<u>Singeress</u>	<u>Singeress</u>	<u>Singeress</u>
Date	<u>Jan 7th 1914</u>	<u>Jan 13th 1914</u>	<u>Jan 13th 1914</u>
Remarks			
State if Twin, Triplet, Placental or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending March 31st 1914
 Given under my hand this 14th day of April A.D. 1914
W. H. ...
 Division Registrar of Singeress

N. B. - The reference numbers relate to those found in Form 2 or B, as an aid to transcribing.

BIRTHS

County of Jefferson Division of Dyersdale

	Surname first.	Surname first.	Surname first.
What is the full name of child?	<u>Maughlan Alice June</u>	<u>Burton William John</u>	<u>Edliatt James Carson</u>
When was the child born?	<u>March 19th 1914</u>	<u>July 24th 1914</u>	<u>Mar 26th 1914</u>
Where was the child born? Street number or Concession and Lot.	<u>— If in a hospital give its name Dyersdale</u>	<u>— If in a hospital give its name Dyersdale</u>	<u>— If in a hospital give its name Dyersdale</u>
Male or Female.	<u>Female</u>	<u>Male</u>	<u>Male</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>John W. Maughlan</u>	<u>Charles James Burton</u>	<u>Harriet Redgers Edliatt</u>
Occupation of Father?	<u>Finisher</u>	<u>Machinist</u>	<u>Machinist</u>
Full Maiden Name of Mother.	<u>Anna Alice Thompson</u>	<u>Emily Elizabeth Blackwell</u>	<u>Rosey May Maughlan</u>
If she has been more than once married give names of former husband or husbands.	<u>—</u>	<u>—</u>	<u>—</u>
Where were the parents married?	<u>Dyersdale</u>	<u>England</u>	<u>Dyersdale</u>
When were they married?	<u>March 7th 1913</u>	<u>Aug 30th 1904</u>	<u>Dec 22nd 1909</u>
If not married give full Name of Mother.	<u>—</u>	<u>—</u>	<u>—</u>
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	<u>—</u>	<u>—</u>	<u>—</u>
What is her occupation?	<u>—</u>	<u>—</u>	<u>—</u>
Name of Physician attending.	<u>Dr. Williams</u>	<u>Dr. McKay</u>	<u>Dr. Lambert</u>
Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Father</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>John W. Maughlan</u>	<u>J. J. Burton</u>	<u>H. A. Edliatt</u>
Address	<u>Dyersdale</u>	<u>Dyersdale</u>	<u>Dyersdale</u>
Date	<u>Mar 19th 1914</u>	<u>Mar 25th 1914</u>	<u>Mar 26th 1914</u>
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.	<u>Single Born</u>		

	Surname first.	Surname first.	Surname first.
What is the full name of child?	1	1	1
When was the child born?	2	2	2
Where was the child born? Street number or Concession and Lot.	3 If in a hospital give its name.	3 If in a hospital give its name.	3 If in a hospital give its name.
Male or Female.	4	4	4
Are the Parents married?	6	6	6
Full name of Father.	6	6	6
Occupation of Father?	7	7	7
Full Maiden Name of Mother.	8	8	8
If she has been more than once married give names of former husband or husbands.	9	9	9
Where were the parents married?	10	10	10
When were they married?	11	11	11
If not married give full Name of Mother.	12	12	12
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13	13	13
What is her occupation?	14	14	14
Name of Physician attending.	16	16	16
Your relation to child.	16	16	16
Were you in house at time of Birth?	17	17	17
Certified by	18	18	18
Address			
Date			
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1914

Given under my hand this 6th day of April A.D. 1914
W. J. [Signature]
 Division Registrar of Dyersdale

*N.B.—The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.

BIRTHS

County of JeffersonDivision of Ingersoll

	Surname first	Surname first	Surname first
What is the full name of child?	Stenhoff Beatrice Ruth	Henderson William	Hansford Ralph Arthur
When was the child born?	March 30th 1914	March 20th 1914	March 15th 1914
Where was the child born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Male or Female.	Female	Male	Male
Are the Parents married?	Yes	No	Yes
Full name of Father.	Adeline Stenhoff	-	George Hansford
Occupation of Father?	laborer	-	carpenter
Full Maiden Name of Mother.	Alice Irene Pany	Klara Henderson	Annie Thompson
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	Out Collianna	-	Ingersoll
When were they married?	May 24th 1914	-	May 1st 1910
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	single	-
What is her occupation?	-	-	-
Name of Physician attend- ing.	Dr. Williams	Dr. Williams	Dr. Williams
Your relation to child.	Mother	Mother	Father
Were you in house at time of Birth?	Yes	Yes	Yes
Certified by	Mrs. J. Stenhoff	Mrs. Henderson	Mrs. Hansford
Address	Welland Out	Ingersoll	Ingersoll
Date	Apr 14th 1914	Apr 14th 1914	Apr 15th 1914
Remarks	-	-	-
State if Twin, Triplet, Ille- gitimate or Still-birth.	-	legitimate	-
	Surname first	Surname first	Surname first
What is the full name of child?	Scott Roger Miller	McIntire Stella Mildred	Minard Daniel Charles
When was the child born?	March 22nd 1914	March 25th 1914	Apr 1st 1914
Where was the child born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Male or Female.	Male	Female	Male
Are the Parents married?	Yes	Yes	Yes
Full name of Father.	John H. Scott	Edward McIntire	Joseph Daniel Minard
Occupation of Father?	Miner	laborer	laborer
Full Maiden Name of Mother.	Grace C. Miller	Alice May Kaphier	Margaret Jane Purvey
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	Ingersoll	Washington	Ingersoll
When were they married?	June 27th 1914	1911	Nov 9th 1904
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attend- ing.	Dr. Rogers	Dr. Campbell	Dr. Campbell
Your relation to child.	Father	Father	Father
Were you in house at time of Birth?	Yes	Yes	Yes
Certified by	J. H. Scott	Edward McIntire	J. D. Minard
Address	Ingersoll	Ingersoll	Ingersoll
Date	Apr 12th 1914	Apr 16th 1914	Apr 17th 1914
Remarks	-	-	-
State if Twin, Triplet, Ille- gitimate or Still-birth.	-	-	-

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1914
Given under my hand this 9th day of July A.D. 1914
Division Registrar of Ingersoll

BIRTHS

County of Jefferson Division of Superior

	Surname First.	Surname First.	Surname First.
What is the full name of child?	Joseph Lloyd Bertine	Carol Charles Murray	Marchellian Lamona
When was the child born?	March 29th 1914	March 22nd 1914	March 2nd 1914
Where was the child born? Street number or Con- cession and Lot.	8 If in a hospital give its name Ingersoll	8 If in a hospital give its name Ingersoll	8 If in a hospital give its name Ingersoll
Male or Female.	4 Female	4 Male	4 Female
Are the Parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	Robert Francis Mackey	Joseph Case	Frederick Moore
Occupation of Father?	7 Clerk	7 Laborer	7 Laborer
Full Maiden Name of Mother.	Bertine Simes	Henetta Quinn	Effie Bernellie Connell
If she has been more than once married give names of former husband or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Ingersoll	10 Ingersoll	10 Ingersoll
When were they married?	11 Jan 2nd 1902	11 March 12th 1913	11 July 25th 1901
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Names of Physician attend- ing.	15 Dr. Condit	15 Dr. Williams	15 None
Your relation to child.	16 Father	16 Father	16 Grandmother
Were you in house at time of Birth?	17 Yes	17 Yes	17 Yes
Certified by	18 R. F. Mackey	18 J. Case	18 Elizabeth Connell
Address	Ingersoll	Ingersoll	Ingersoll
Date	Apr 14th 1914	Apr 14th 1914	Apr 18th 1914
Remarks			
State if Twin, Triplet, Ille- gitimate or Still-birth.			
	Surname First.	Surname First.	Surname First.
What is the full name of child?	Bernard Ray Gilman	Scott Hugh Smith	Collins Janet Loran
When was the child born?	20 Apr 13th 1914	2 Apr 20th 1914	2 March 20th 1914
Where was the child born? Street number or Con- cession and Lot.	3 If in a hospital give its name Ingersoll	3 If in a hospital give its name Ingersoll	3 If in a hospital give its name Ingersoll
Male or Female.	4 Male	4 Male	4 Female
Are the Parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	William Ray Bernards	Hugh Scott	William B Collins
Occupation of Father?	7 Traveler	7 Mechanic	7 Iron Worker
Full Maiden Name of Mother.	Hannah Mary Gilman	Lucy Smith	Wilhelmina G Davidson
If she has been more than once married give names of former husband or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Saratoga	10 Ingersoll	10 Henderson
When were they married?	11 June 19th 1911	11 1912	11 Aug 14th 1914
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Names of Physician attend- ing.	15 Dr. Mackey	15 Dr. Williams	15 Dr. Condit
Your relation to child.	16 Father	16 Father	16 Father
Were you in house at time of Birth?	17 Yes	17 Yes	17 Yes
Certified by	18 W. Bernards	18 Hugh Scott	18 W. B. Collins
Address	Ingersoll	Ingersoll	Ingersoll
Date	Apr 20th 1914	Apr 20th 1914	Apr 24th 1914
Remarks			
State if Twin, Triplet, Ille- gitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1914
 Given under my hand this 20th day of April A.D. 1914
 Division Registrar of Jefferson

*N.B.—The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.

BIRTHS

County of Jefferson

Division of Ingersoll

	Surname first.	Surname first.	Surname first.
What is the full name of child?	Shuttleworth Alice Rutha Marie	Huntson Rose	Seaward Jean Minnie
When was the child born?	2 March 2nd 1914	2 Apr 24th 1914	2 Apr 2nd 1914
Where was the child born? Street number or Con- cession and Lot.	Alexandra Hospital 3 If in a hospital give its name and Ingersoll	3 If in a hospital give its name and Ingersoll	Alexandra Hospital 3 If in a hospital give its name and Ingersoll
Male or Female.	4 Female	4 Female	4 Female
Are the Parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	Robert Shuttleworth	James Huntson	Wm Minnie Seaward
Occupation of Father?	7 Farmer	7 Laborer	7 Engineer
Full Maiden Name of Mother.	8 Rutha Sherb	8 Emma Watkins	8 Florence Ballis
If she has been more than once married give names of former husband or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Mt Elgin Durham Nc	10 England	10 Ingersoll
When were they married?	11 Nov 2nd 1912	11 Apr 6th 1906	11 Nov 20th 1912
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attend- ing.	15 Dr Williams	15 Dr Luntin	15 Dr Williams
Your relation to child.	16 Father	16 Father	16 Father
Were you in house at time of Birth?	17 Yes	17 Yes	17 Yes
Certified by	18 R. Shuttleworth	18 J. Huntson	18 Wm Minnie Seaward
Address	Ingersoll	Ingersoll	Ingersoll
Date	Apr 24th 1914	Apr 24th 1914	Apr 2nd 1914
Remarks			
State if Twin, Triplet, Ille- gitimate or Still-birth.			

	Surname first.	Surname first.	Surname first.
What is the full name of child?	1 Beards Arthur	2 Gordon Georgia Elizabeth	3 Orman Gordon Roy
When was the child born?	2 Apr 29th 1914	2 Apr 10th 1914	2 Apr 28th 1914
Where was the child born? Street number or Con- cession and Lot.	Alexandra Hospital 3 If in a hospital give its name and Ingersoll	3 If in a hospital give its name and Ingersoll	3 If in a hospital give its name and Ingersoll
Male or Female.	4 Male	4 Female	4 Male
Are the Parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	6 Edward Beards	6 James Gordon	6 Gordon Vernon Orman
Occupation of Father?	7 Painter	7 Mechanic	7 Cabinet Maker
Full Maiden Name of Mother.	8 Ada Palmer	8 Emily Alice Woodruffe	8 Florence Merrill
If she has been more than once married give names of former husband or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Ingersoll	10 Ingersoll	10 Woodstock
When were they married?	11 July 1st 1913	11 Apr 24th 1913	11 July 31st 1913
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attend- ing.	16 Dr Luntin	16 Dr Luntin	16 Dr Luntin
Your relation to child.	16 Father	16 Father	16 Father
Were you in house at time of Birth?	17 No	17 Yes	17 Yes
Certified by	18 Edward Beards	18 J. Gordon	18 W. Orman
Address	Ingersoll	Ingersoll	Ingersoll
Date	Apr 20th 1914	Apr 20th 1914	May 1st 1914
Remarks			
State if Twin, Triplet, Ille- gitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1914
Given under my hand this 9th day of July A.D. 1914

W. H. Smith
Division Registrar of Ingersoll

BIRTHS

Schedule 11.
N.B.—Record all still births as births,
as well as deaths.

County of Jefferson Division of Jagersall

	Surname first	Surname first	Surname first
What is the full name of child?	1 Taylor Grace Irene	2 Maulett Emma Nancy Band	3 Smider Ralph Fitzpatrick
When was the child born? Where was the child born? Street number or Concession and Lot.	2 Apr 17th 1914	2 May 1st 1914	2 Apr 29th 1914
8. If in a hospital give its name.	Jagersall	Jagersall	Jagersall
Male or Female.	4 Female	4 Male	4 Male
Are the Parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	6 Warrick George Taylor	6 Frank Miller Maulett	6 Henry B. Smider
Occupation of Father?	7 Insurance Agent	7 Mechanic	7 Merchant
Full Maiden Name of Mother.	8 Elizabetha Simlam	8 Minnie Florence Band	8 Ruth Margaret Fitzpatrick
If she has been more than once married give names of former husband or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Chesley Ark	10 Jagersall	10 Jagersall
When were they married? If not married give full Name of Mother.	11 June 21st 1911	11 Sept 10th 1918	11 Nov 10th 1919
12. Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	12 -	12 -	12 -
13. What is her occupation?	13 -	13 -	13 -
Name of Physician attending.	14 Dr. Williams	14 Dr. Campbell	14 Dr. McKay
Your relation to child.	15 Father	15 Father	15 Mother
Were you in house at time of Birth?	16 Yes	17 Yes	17 Yes
Certified by	18 W. H. Taylor	19 W. Maulett	20 Mrs. H. B. Smider
Address	Jagersall	Jagersall	Chesley Ark
Date	May 20th 1914	May 11th 1914	May 1st 1914
Remarks			
State if Twin, Triplet, Illitimate or Still-birth.			

	Surname first	Surname first	Surname first
What is the full name of child?	1 Anderson Harold Percy	2 Smith Hazel Jean	3 Leonard Clarence Ray
When was the child born? Where was the child born? Street number or Concession and Lot.	2 May 21st 1914	2 Apr 30th 1914	2 May 9th 1914
8. If in a hospital give its name.	Jagersall	Jagersall	Jagersall
Male or Female.	4 Male	4 Female	4 Male
Are the Parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	6 George A. Anderson	6 Albert W. Smith	6 George Milton Leonard
Occupation of Father?	7 Mechanic	7 Wheel Riller	7 Laborer
Full Maiden Name of Mother.	8 Emmelul Percy	8 Maggie Carliss	8 Edith William Smith
If she has been more than once married give names of former husband or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Jagersall	10 South Danchealin	10 Jagersall
When were they married? If not married give full Name of Mother.	11 July 15th 1909	11 Dec 20th 1911	11 1902
12. Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	12 -	12 -	12 -
13. What is her occupation?	13 -	13 -	13 -
Name of Physician attending.	14 Dr. Williams	14 Dr. McKay	14 Dr. Campbell
Your relation to child.	15 Father	15 Mother	15 Mother
Were you in house at time of Birth?	16 Yes	17 Yes	17 Yes
Certified by	18 Geo. A. Anderson	19 Mrs. Albert W. Smith	20 Mrs. H. T. Leonard
Address	Jagersall	Jagersall	Jagersall
Date	May 26th 1914	May 9th 1914	May 30th 1914
Remarks			
State if Twin, Triplet, Illitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1914

Given under my hand this 9th day of July 1914
Division Registrar of Jagersall

*N.B.—The reference numbers relate to those found in Form 2 or B, as an aid to transcribing.

BIRTHS

County of Jefferson Division of Ingersoll

	Surname first	Surname first	Surname first
What is the full name of child?	1 <u>Sarant Grace</u>	2 <u>Smith Margaret Jeanette</u>	3 <u>Herman Henry Arthur</u>
When was the child born? Where was the child born? Street number or Concession and Lot.	2 <u>May 15th 1914</u> 3 <u>If in a hospital give its name</u> <u>Ingersoll</u>	2 <u>May 10th 1914</u> 3 <u>If in a hospital give its name</u> <u>Ingersoll</u>	2 <u>May 2nd 1914</u> 3 <u>If in a hospital give its name</u> <u>Ingersoll</u>
Male or Female.	4 <u>Female</u>	4 <u>Female</u>	4 <u>Male</u>
Are the Parents married?	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>Yes</u>
Full name of Father.	6 <u>George Sarant</u>	6 <u>James L. Smith</u>	6 <u>Nelson Herman</u>
Occupation of Father?	7 <u>Machinist</u>	7 <u>Machinist</u>	7 <u>Labourer</u>
Full Maiden Name of Mother.	8 <u>Hydia Samson</u>	8 <u>Mary Dickard</u>	8 <u>Emma Agatha Bailey</u>
If she has been more than once married give names of former husband or husbands.	9 <u>-</u>	9 <u>-</u>	9 <u>-</u>
Where were the parents married?	10 <u>England</u>	10 <u>St. Catharines</u>	10 <u>Hamilton</u>
When were they married? If not married give full Name of Mother.	11 <u>May 25th 1902</u> 12 <u>-</u>	11 <u>Sept 11th 1911</u> 12 <u>-</u>	11 <u>Aug 5th 1912</u> 12 <u>-</u>
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 <u>-</u>	13 <u>-</u>	13 <u>-</u>
What is her occupation?	14 <u>-</u>	14 <u>-</u>	14 <u>-</u>
Name of Physician attending.	15 <u>Dr. McKay</u>	15 <u>Dr. Cameron</u>	15 <u>Dr. West</u>
Your relation to child.	16 <u>Sister</u>	16 <u>Mother</u>	16 <u>Mother</u>
Were you in house at time of Birth?	17 <u>Yes</u>	17 <u>Yes</u>	17 <u>Yes</u>
Certified by	18 <u>Edith Sarant</u>	18 <u>Mrs J. L. Smith</u>	18 <u>Mrs Nelson Herman</u>
Address	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Date	<u>June 1st 1914</u>	<u>June 2nd 1914</u>	<u>June 11th 1914</u>
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			
	Surname first	Surname first	Surname first
What is the full name of child?	1 <u>Selton Thomas Percival</u>	2 <u>Wissau James Isidore</u>	3 <u>Carke Mary Gertrude</u>
When was the child born? Where was the child born? Street number or Concession and Lot.	2 <u>May 2nd 1914</u> 3 <u>If in a hospital give its name</u> <u>Ingersoll</u>	2 <u>June 12th 1914</u> 3 <u>If in a hospital give its name</u> <u>Ingersoll</u>	2 <u>Apr 26th 1914</u> 3 <u>If in a hospital give its name</u> <u>Ingersoll</u>
Male or Female.	4 <u>Male</u>	4 <u>Female</u>	4 <u>Female</u>
Are the Parents married?	5 <u>Yes</u>	5 <u>Yes</u>	5 <u>Yes</u>
Full name of Father.	6 <u>Thomas Selton</u>	6 <u>Robert Arthur Wissau</u>	6 <u>Reginald Carke</u>
Occupation of Father?	7 <u>Expert</u>	7 <u>Operator</u>	7 <u>Carpenter</u>
Full Maiden Name of Mother.	8 <u>Margaret Percival</u>	8 <u>Isidore Cantle</u>	8 <u>Ellen O'Sheara</u>
If she has been more than once married give names of former husband or husbands.	9 <u>-</u>	9 <u>-</u>	9 <u>-</u>
Where were the parents married?	10 <u>New York 1910</u>	10 <u>Detroit Mich.</u>	10 <u>Ingersoll</u>
When were they married? If not married give full Name of Mother.	11 <u>Ingersoll</u>	11 <u>Mar 30th 1902</u>	11 <u>Mar 15th 1911</u>
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	12 <u>-</u>	12 <u>-</u>	12 <u>-</u>
What is her occupation?	13 <u>-</u>	13 <u>-</u>	13 <u>-</u>
Name of Physician attending.	14 <u>Dr. Rogers</u>	14 <u>Dr. Cameron</u>	14 <u>Dr. McKay</u>
Your relation to child.	15 <u>Father</u>	15 <u>Father</u>	15 <u>Mother</u>
Were you in house at time of Birth?	16 <u>Yes</u>	16 <u>Yes</u>	16 <u>Yes</u>
Certified by	17 <u>Thomas Selton</u>	17 <u>R. W. Wissau</u>	17 <u>Mrs R. Carke</u>
Address	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Date	<u>June 11th 1914</u>	<u>June 22nd 1914</u>	<u>June 22nd 1914</u>
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1914

Given under my hand this 9th day of July A.D. 1914
W. B. Smith
Division Registrar of Ingersoll

*N.B.—The reference numbers relate to those found in Form 2 or 3, as an aid to transcription.

BIRTHS

County of Jefferson

Division of Ingersoll

	Surname first	Surname first	Surname first
What is the full name of child?	<u>Frank Harold Jones</u>	<u>Frank Carl Hedy Jones</u>	<u>Ball Dorothy Beatrice</u>
When was the child born?	<u>May 29th 1914</u>	<u>June 9th 1914</u>	<u>June 4th 1914</u>
Where was the child born? Street number or Concession and Lot.	<u>3 If in a hospital give its name Ingersoll</u>	<u>6 If in a hospital give its name Ingersoll</u>	<u>8 If in a hospital give its name Ingersoll</u>
Male or Female.	<u>4 Female</u>	<u>4 Female</u>	<u>4 Female</u>
Are the Parents married?	<u>5 Yes</u>	<u>5 Yes</u>	<u>5 Yes</u>
Full name of Father.	<u>Alfred Charles Smith</u>	<u>James William Smith</u>	<u>Harry Ball</u>
Occupation of Father?	<u>7 Laborer</u>	<u>7 Laborer</u>	<u>7 Painter</u>
Full Maiden Name of Mother.	<u>Hannah Keyes</u>	<u>Hedy Cripps</u>	<u>Maudie Jones</u>
If she has been more than once married give names of former husband or husbands.	<u>9 -</u>	<u>9 -</u>	<u>9 -</u>
Where were the parents married?	<u>10 Ingersoll</u>	<u>10 Hamilton</u>	<u>10 England</u>
When were they married? If not married give full Name of Mother.	<u>11 Oct 23rd 1912</u>	<u>11 June 12th 1913</u>	<u>11 1910</u>
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	<u>12 -</u>	<u>12 -</u>	<u>12 -</u>
What is her occupation?	<u>14 -</u>	<u>14 -</u>	<u>14 -</u>
Name of Physician attending.	<u>15 Dr. Caunter</u>	<u>15 Dr. Caunter</u>	<u>15 Dr. Caunter</u>
Your relation to child.	<u>16 Mother</u>	<u>16 Father</u>	<u>16 Father</u>
Were you in house at time of Birth?	<u>17 Yes</u>	<u>17 Yes</u>	<u>17 Yes</u>
Certified by	<u>18 Mrs. A. C. Smith</u>	<u>18 J. W. Smith</u>	<u>18 Harry Ball</u>
Address	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Date	<u>June 24th 1914</u>	<u>June 26th 1914</u>	<u>June 27th 1914</u>
Remarks			
State if Twin, Triplet, etc. ultimate or Still-birth.			
	Surname first	Surname first	Surname first
What is the full name of child?	<u>1</u>	<u>1</u>	<u>1</u>
When was the child born?	<u>2</u>	<u>2</u>	<u>2</u>
Where was the child born? Street number or Concession and Lot.	<u>3 If in a hospital give its name.</u>	<u>3 If in a hospital give its name.</u>	<u>3 If in a hospital give its name.</u>
Male or Female.	<u>4</u>	<u>4</u>	<u>4</u>
Are the Parents married?	<u>5</u>	<u>5</u>	<u>5</u>
Full name of Father.	<u>6</u>	<u>6</u>	<u>6</u>
Occupation of Father?	<u>7</u>	<u>7</u>	<u>7</u>
Full Maiden Name of Mother.	<u>8</u>	<u>8</u>	<u>8</u>
If she has been more than once married give names of former husband or husbands.	<u>9</u>	<u>9</u>	<u>9</u>
Where were the parents married?	<u>10</u>	<u>10</u>	<u>10</u>
When were they married? If not married give full Name of Mother.	<u>11</u>	<u>11</u>	<u>11</u>
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	<u>12</u>	<u>12</u>	<u>12</u>
What is her occupation?	<u>14</u>	<u>14</u>	<u>14</u>
Name of Physician attending.	<u>15</u>	<u>15</u>	<u>15</u>
Your relation to child.	<u>16</u>	<u>16</u>	<u>16</u>
Were you in house at time of Birth?	<u>17</u>	<u>17</u>	<u>17</u>
Certified by	<u>18</u>	<u>18</u>	<u>18</u>
Address			
Date			
Remarks			
State if Twin, Triplet, etc. ultimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1914
A.D. 1914

Given under my hand this 9th day of July
Division Registrar of Ingersoll

BIRTHS

Schedule B
N.B.—Record all still-births as births,
as well as deaths.

County of _____

Division of _____

	Surname first.	Surname first.	Surname first.
What is the full name of child?	Henderson Alma Pearl	Young Marian Agnes	Daniels, Lettice Rosalind
When was the child born?	July 2nd 1914	July 5th 1914	July 4th 1914
Where was the child born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Male or Female.	Female	Female	Female
Are the Parents married?	Yes	Yes	Yes
Full name of Father.	Frederick George Henderson	William Dublin Young	Leslie Daniels
Occupation of Father?	Clerk	Butcher	works in Cement
Full Maiden Name of Mother.	Kath Elizabeth Braemier	Mabel May Beemer	Mary Ellen Leigh
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	Ingersoll	Ingersoll	Ingersoll
When were they married?	June 26th 1911	May 2nd 1910	July 22nd 1908
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attend- ing.	Dr Rogers	Dr Williams	Dr. Williams
Your relation to child.	Father	Father	Mother
Were you in house at time of Birth?	Yes	No	Yes
Certified by	F. H. Henderson	W. D. Young	Mary Ellen Leigh
Address	Ingersoll	Ingersoll	Ingersoll
Date	July 31st 1914	Aug 4th 1914	August 4th 1914
Remarks			
State if Twin, Triplet, Ille- gitimate or Still-birth.			
What is the full name of child?	Gregory Alfred George	Dorothea Helen Pemberton	Barker Lily
When was the child born?	August 9th 1914	July 15th 1914	July 26th 1914
Where was the child born? Street number or Con- cession and Lot.	Chas St East, Ingersoll	Albert St, Ingersoll	If in a hospital give its name Ingersoll
Male or Female.	Male	Female	Female
Are the Parents married?	Yes	Yes	Yes
Full name of Father.	Emerson Gregory	Robert Terry Pemberton	Reuben Barker
Occupation of Father?	Tinsmith	Tool maker	barber
Full Maiden Name of Mother.	Isabel Sanderson	Jessie McCreary	Lily Blazley
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	Foldens Corners	Hamilton, Ont	Wheatston
When were they married?	Sept 1913	Dec 23rd 1908	-
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attend- ing.	Dr. Williams	Dr. Williams	Dr. Cornter
Your relation to child.	Father	Father	Father
Were you in house at time of Birth?	No	Yes	Yes
Certified by	Emerson Gregory	Robt. T. Pemberton	Reuben Barker
Address	Chas St East, Ingersoll	Albert St, Ingersoll	Ingersoll
Date	Aug 8th 1914	Aug 15th 1914	Aug 19th 1914
Remarks			
State if Twin, Triplet, Ille- gitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter-year ending Sept 30th 1914
 Given under my hand this 6th day of October A.D. 1914
 W. D. Young
 Division Registrar of Ingersoll

N.B.—The reference numbers relate to those found in Form 2 or B, as an aid to transcribing.

BIRTHS

Pauline Iacome, Harry Frederick Iacome,
Mrs. Walker Amos Lamkin, Ethel Maud
George Stafford, Charles Parfield,
John W. ...

County of Jefferson

Division of Ingersoll

	Surname First	Surname First	Surname First
What is the full name of child?	<u>Richard Carter</u>	<u>Isabelle Caroline B.</u>	<u>Hampkin Walker Carson</u>
When was the child born?	<u>July 26th 1914</u>	<u>July 27th 1914</u>	<u>July 27th 1914</u>
Where was the child born? Street number or Occupation and Loc.	<u>If in a hospital give its name Ingersoll</u>	<u>If in a hospital give its name Ingersoll</u>	<u>If in a hospital give its name Ingersoll</u>
Male or Female.	<u>Female</u>	<u>Female</u>	<u>Male</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>Ruben Carter</u>	<u>Henry Judson Isabelle</u>	<u>Walker Amos Lamkin</u>
Occupation of Father?	<u>Labourer</u>	<u>Wine & Beer Operator</u>	<u>Machinist</u>
Full Maiden Name of Mother.	<u>Elizabeth</u>	<u>Anna Delena McMillan</u>	<u>Ethel Maud Russee</u>
If she has been more than once married give names of former husband or husbands.	<u>-</u>	<u>-</u>	<u>-</u>
Where were the parents married?	<u>Washington</u>	<u>Ingersoll</u>	<u>Washington</u>
When were they married?	<u>-</u>	<u>Sept 1st 1913</u>	<u>May 11th 1904</u>
If not married give full Name of Mother.	<u>-</u>	<u>-</u>	<u>-</u>
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	<u>-</u>	<u>-</u>	<u>-</u>
What is her occupation?	<u>-</u>	<u>-</u>	<u>-</u>
Name of Physician attending.	<u>Dr. Lumbin</u>	<u>Dr. Lumbin</u>	<u>Dr. Rogers</u>
Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Mother</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>Ruben Carter</u>	<u>H. J. Isabelle</u>	<u>Mrs W. O. Lamkin</u>
Address	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Date	<u>Aug 14th 1914</u>	<u>Aug 14th 1914</u>	<u>Aug 26th 1914</u>
Remarks	<u>-</u>	<u>-</u>	<u>-</u>
State if Twin, Triplet, etc. ultimate or Still-birth.	<u>Single</u>	<u>-</u>	<u>-</u>
What is the full name of child?	<u>Frank Lloyd Russee</u>	<u>Harold Clifford Her</u>	<u>Frankham Bruce</u>
When was the child born?	<u>Aug 14th 1914</u>	<u>Aug 10th 1914</u>	<u>Aug 14th 1914</u>
Where was the child born? Street number or Occupation and Loc.	<u>Dependent Hospital</u>	<u>If in a hospital give its name Ingersoll</u>	<u>If in a hospital give its name Ingersoll</u>
Male or Female.	<u>Male</u>	<u>Male</u>	<u>Male</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>H. J. Smith</u>	<u>Charles Clifford Sanford</u>	<u>Arthur Frankham</u>
Occupation of Father?	<u>Labourer</u>	<u>Labourer</u>	<u>Mail Carrier</u>
Full Maiden Name of Mother.	<u>Mabel Archer</u>	<u>Annie Jennette Ireland</u>	<u>Edith Alborough</u>
If she has been more than once married give names of former husband or husbands.	<u>-</u>	<u>-</u>	<u>-</u>
Where were the parents married?	<u>Outman</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
When were they married?	<u>July 1st 1914</u>	<u>Dec 28th 1912</u>	<u>Nov 1913</u>
If not married give full Name of Mother.	<u>-</u>	<u>-</u>	<u>-</u>
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	<u>-</u>	<u>-</u>	<u>-</u>
What is her occupation?	<u>-</u>	<u>-</u>	<u>-</u>
Name of Physician attending.	<u>Dr. Lumbin</u>	<u>Dr. Sheppard</u>	<u>Dr. Williams</u>
Your relation to child.	<u>Mother</u>	<u>Father</u>	<u>Father</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>No</u>	<u>Yes</u>
Certified by	<u>Mrs H. J. Smith</u>	<u>H. C. Sanford</u>	<u>A. Frankham</u>
Address	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Date	<u>Aug 24th 1914</u>	<u>Sept 2nd 1914</u>	<u>Sept 2nd 1914</u>
Remarks	<u>-</u>	<u>-</u>	<u>-</u>
State if Twin, Triplet, etc. ultimate or Still-birth.	<u>-</u>	<u>-</u>	<u>-</u>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1914
 Given under my hand this 6th day of October A.D. 1914
W. B. Smith
 Division Registrar of Ingersoll

BIRTHS

County of Offord Division of Ingersoll

	Surname first.	Surname first.	Surname first.
What is the full name of child?	William Francis John	1 Matson, Beatrice Anna	1 Michael Otto
When was the child born? Where was the child born? Street number or Con- cession and Lot.	August 26th 1914	2 August 26 th 1914	2 July 26th 1914
3 If in a hospital give its name	Ingersoll	3 If in a hospital give its name	Ingersoll
Male or Female.	4 Male	4 Female	4 Female
Are the Parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	William James Williams	6 James Matson	6 John Michael
Occupation of Father?	Labourer	7 Tailor	7 Tailor
Full Maiden Name of Mother.	Matilda Stafford	8 Annie Matt	8 Emily Sarah Skinner
If she has been more than once married give names of former husband or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Canada N. B. C.	10 Montreal	10 England
When were they married? If not married give full Name of Mother.	11 May 17th 1912	11 Sept 1907	11 Sept 5th 1899
12 -	12 -	12 -	12 -
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attend- ing.	15 Dr. Larnick	15 Dr. A. McKay	15 Dr. Larnick
Your relation to child.	16 Father	16 Father	16 Mother
Were you in house at time of Birth?	17 Yes	17 Yes	17 Yes
Certified by	18 W. J. Williams	18 James Matson Ingersoll	18 John John Michael
Address	Ingersoll	Ingersoll	Ingersoll
Date	Sept 26th 1914	Sept. 26 th 1914	Sept 5th 1914
Remarks			
State if Twin, Triplet, Ille- gitimate or Still-birth.			
	Surname first.	Surname first.	Surname first.
What is the full name of child?	Cameron Olive Lavern	Lambert William Frank	Beanos Laverna Eugene
When was the child born? Where was the child born? Street number or Con- cession and Lot.	2 Aug 16th 1914	2 Aug 20th 1914	2 Aug 29th 1914
3 If in a hospital give its name	Ingersoll	Ingersoll	Ingersoll
Male or Female.	4 Female	4 Male	4 Female
Are the Parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	William Henry Cameron	6 William Frank Lambert	6 Wallace Beanos
Occupation of Father?	7 Machinist	7 Teacher	7 Matorman
Full Maiden Name of Mother.	8 Clara Helena Keiser	8 Rachel Bean	8 Olina Smith
If she has been more than once married give names of former husband or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Ingersoll	10 England	10 Ontario
When were they married? If not married give full Name of Mother.	11 May 21st 1913	11 1910	11 Apr 29th 1913
12 -	12 -	12 -	12 -
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attend- ing.	15 Dr. Larnick	15 Dr. Williams	15 Dr. Larnick
Your relation to child.	16 Father	16 Mother	16 Father
Were you in house at time of Birth?	17 No	17 Yes	17 Yes
Certified by	18 W. H. Cameron	18 Rachel Lambert	18 Wallace Beanos
Address	Ingersoll	Ingersoll	Ingersoll
Date	Sept 6th 1914	Sept 7th 1914	Sept 6th 1914
Remarks			
State if Twin, Triplet, Ille- gitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1914
Given under my hand this 6th day of October A.D. 1914
Walter Stafford
Division Registrar of Ingersoll

*N.B.—The reference numbers relate to those found in Form 2 or 8, as an aid to transcribing.

BIRTHS

County of _____

Division of _____

	Surname first.	Surname first.	Surname first.
What is the full name of child?	Crawford Alan Perrine	Johnson William Joseph	Erwin George Arnold
When was the child born?	July 5th 1914	June 30th 1914	June 21st 1914
Where was the child born? Street number or Concession and Lot.	8 - If in a hospital give its name Ingersoll	8 - If in a hospital give its name Ingersoll	8 - If in a hospital give its name Ingersoll
Male or Female.	4 Male	4 Male	4 Male
Are the Parents married?	6 Yes	6 Yes	6 Yes
Full name of Father.	William Stanley Crawford	William Johnson	Samuel S. Erwin
Occupation of Father?	Traveler	Teacher	Teacher
Full Maiden Name of Mother.	Caribel Perrine	Margaret Minard	Emma Gary
If she has been more than once married give names of former husband or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Saratoga	10 Ingersoll	10 Saratoga
When were they married?	11 Apr 30th 1905	11 1906	11 Jan 22nd 1903
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attending.	15 Dr. Williams	15 Dr. Lambert	15 Dr. Lambert
Your relation to child.	16 Father	16 Father	16 Father
Were you in house at time of Birth?	17 Yes	17 Yes	17 Yes
Certified by	18 W. S. Crawford	18 W. Johnson	18 S. S. Erwin
Address	Ingersoll	Ingersoll	Ingersoll
Date	July 11th 1914	July 13th 1914	July 14th 1914
Remarks			
State if Twin, Triplet, Stillmate or Still-birth.			
What is the full name of child?	Kealme Alfred Arthur	Trile Barry Kingsley	Bayliss Helen Elizabeth
When was the child born?	July 14th 1914	June 27th 1914	June 26th 1914
Where was the child born? Street number or Concession and Lot.	8 - If in a hospital give its name Ingersoll	8 - If in a hospital give its name Ingersoll	8 - If in a hospital give its name Ingersoll
Male or Female.	4 Male	4 Male	4 Female
Are the Parents married?	6 Yes	6 Yes	6 Yes
Full name of Father.	Henry Charles Kealme	Sam Frank Trile	John Herbert Bayliss
Occupation of Father?	Holder	Cement worker	Mechanic
Full Maiden Name of Mother.	Emma Gary	Miss Gordon High	Mary Cummings
If she has been more than once married give names of former husband or husbands.	9 -	9 -	9 -
Where were the parents married?	10 Westlake	10 Ingersoll	10 Ingersoll
When were they married?	11 1912	11 Nov 10th 1910	11 Dec 26th 1918
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attending.	15 Dr. Williams	15 Dr. Lambert	15 Dr. Carmish
Your relation to child.	16 Father	16 Father	16 Father
Were you in house at time of Birth?	17 Yes	17 No	17 No
Certified by	18 H. C. Kealme	18 S. J. Trile	18 J. H. Bayliss
Address	Ingersoll	Ingersoll	Ingersoll
Date	July 14th 1914	July 15th 1914	July 29th 1914
Remarks			
State if Twin, Triplet, Stillmate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1914

Given under my hand this

day of October A.D. 1914

Division Registrar of Ingersoll

W. R. Smith

BIRTHS

County of Alford Division of Ingersoll

	Surname first	Surname first	Surname first
What is the full name of child?	<u>Margaret Olive Irene</u>	<u>Betty Marie Christina</u>	1
When was the child born?	<u>Aug 29th 1914</u>	<u>Sept 20th 1914</u>	2
Where was the child born? Street number or Concession and Lot.	3. If in a hospital give its name <u>Ingersoll</u>	3. If in a hospital give its name <u>Ingersoll</u>	3. If in a hospital give its name
Male or Female.	4 <u>Female</u>	4 <u>Female</u>	4
Are the Parents married?	5 <u>Yes</u>	5 <u>Yes</u>	5
Full name of Father.	<u>Grey Rose Mayberry</u>	<u>William Walter Beatty</u>	6
Occupation of Father?	<u>Delpham</u>	<u>Painter</u>	7
Full Maiden Name of Mother.	<u>Genevieve Simpson</u>	<u>Margaret Jane Cross</u>	8
If she has been more than once married give names of former husband or husbands.	9 -	9 -	9
Where were the parents married?	10 <u>Stratford</u>	10 <u>Ingersoll</u>	10
When were they married?	11 <u>Nov 24th 1900</u>	11 <u>Dec 12th 1912</u>	11
If not married give full Name of Mother.	12 -	12 -	12
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13 -	13 -	13
What is her occupation?	14 -	14 -	14
Name of Physician attending.	15 <u>Dr. Williams</u>	15 <u>Dr. McKay</u>	15
Your relation to child.	16 <u>Father</u>	16 <u>Father</u>	16
Were you in house at time of Birth?	17 <u>Yes</u>	17 <u>No</u>	17
Certified by	18 <u>G. R. Mayberry</u>	18 <u>W. W. Beatty</u>	18
Address	<u>Ingersoll</u>	<u>Ingersoll</u>	
Date	<u>Sept 20th 1914</u>	<u>Sept 20th 1914</u>	
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			
	Surname first	Surname first	Surname first
What is the full name of child?	1	1	1
When was the child born?	2	2	2
Where was the child born? Street number or Concession and Lot.	3. If in a hospital give its name.	3. If in a hospital give its name.	3. If in a hospital give its name.
Male or Female.	4	4	4
Are the Parents married?	5	5	5
Full name of Father.	6	6	6
Occupation of Father?	7	7	7
Full Maiden Name of Mother.	8	8	8
If she has been more than once married give names of former husband or husbands.	9	9	9
Where were the parents married?	10	10	10
When were they married?	11	11	11
If not married give full Name of Mother.	12	12	12
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	13	13	13
What is her occupation?	14	14	14
Name of Physician attending.	15	15	15
Your relation to child.	16	16	16
Were you in house at time of Birth?	17	17	17
Certified by	18	18	18
Address			
Date			
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1914
 Given under my hand this 6th day of October A.D. 1914.
W. W. Beatty
 Division Registrar of Ingersoll

N.B.—The reference numbers relate to those found in Form 2 or B. as an aid to transcribing.

BIRTHS

Schedule B.
N.B.—Record all still births as births,
as well as deaths.

County of Jefferson

Division of Surgeons

	Surname first.	Surname first.	Surname first.
What is the full name of child?	<u>Blake Annie Ethel</u>	<u>Blancher Frederick Charles</u>	<u>Deulin Peter James</u>
When was the child born?	<u>Nov 22nd 1914</u>	<u>Nov 17th 1914</u>	<u>Nov 14th 1914</u>
Where was the child born? Street number or Concession and lot.	<u>8 If in a hospital give its name</u>	<u>8 If in a hospital give its name</u>	<u>8 If in a hospital give its name</u>
Male or Female.	<u>Female</u>	<u>Male</u>	<u>Male</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>William Henry Blake</u>	<u>Charles Blancher</u>	<u>John Charles Deulin</u>
Occupation of Father?	<u>Mechanic</u>	<u>Boyle Buyer</u>	<u>Blacksmith</u>
Full Maiden Name of Mother.	<u>Isabella Mitchell</u>	<u>May Short</u>	<u>Eleanor Jane Shearer</u>
If she has been more than once married give names of former husband or husbands.	<u>-</u>	<u>-</u>	<u>-</u>
Where were the parents married?	<u>Jefferson</u>	<u>Lyndale Ark.</u>	<u>Jefferson</u>
When were they married?	<u>Mar 14th 1914</u>	<u>July 14th 1900</u>	<u>Nov 6th 1911</u>
If not married give full Name of Mother.	<u>-</u>	<u>-</u>	<u>-</u>
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	<u>-</u>	<u>-</u>	<u>-</u>
What is her occupation?	<u>-</u>	<u>-</u>	<u>-</u>
Name of Physician attending.	<u>Dr. Williams</u>	<u>Dr. Rogers</u>	<u>Dr. McKay</u>
Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Yes</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>W. H. Blake</u>	<u>Chas. Blancher</u>	<u>J. C. Deulin</u>
Address	<u>Jefferson</u>	<u>Jefferson</u>	<u>Jefferson</u>
Date	<u>Dec 14th 1914</u>	<u>Dec 17th 1914</u>	<u>Dec 14th 1914</u>
Remarks		<u>Still Born</u>	
State if Twin, Triple, Illegitimate or Still-birth.			
	Surname first.	Surname first.	Surname first.
What is the full name of child?	<u>Barracuman Grace Helen</u>	<u>Blake Annie Ethel</u>	1
When was the child born?	<u>Nov 14th 1914</u>	<u>Nov 22nd 1914</u>	2
Where was the child born? Street number or Concession and lot.	<u>8 If in a hospital give its name</u>	<u>8 If in a hospital give its name</u>	3 If in a hospital give its name.
Male or Female.	<u>Female</u>	<u>Female</u>	4
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	5
Full name of Father.	<u>Robert William Barracuman</u>	<u>William Henry Blake</u>	6
Occupation of Father?	<u>Mechanic</u>	<u>Mechanic</u>	7
Full Maiden Name of Mother.	<u>Grace Edna Manning</u>	<u>Isabella Mitchell</u>	8
If she has been more than once married give names of former husband or husbands.	<u>-</u>	<u>-</u>	9
Where were the parents married?	<u>Buffalo N.Y.</u>	<u>Jefferson</u>	10
When were they married?	<u>Sept 9th 1900</u>	<u>Mar 14th 1914</u>	11
If not married give full Name of Mother.	<u>-</u>	<u>-</u>	12
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	<u>-</u>	<u>-</u>	13
What is her occupation?	<u>-</u>	<u>-</u>	14
Name of Physician attending.	<u>Dr. Williams</u>	<u>Dr. Williams</u>	15
Your relation to child.	<u>Father</u>	<u>Mother</u>	16
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	17
Certified by	<u>R. W. Barracuman</u>	<u>W. H. Blake</u>	18
Address	<u>Jefferson</u>	<u>Jefferson</u>	
Date	<u>Nov. 14th 1914</u>	<u>Dec 20th 1914</u>	
Remarks			
State if Twin, Triple, Illegitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1914
 Given under my hand this 5th day of January
 Division Registrar of Jefferson

BIRTHS

County of Alford Division of Luzerne

	Surname first	Surname first	Surname first
1 What is the full name of child?	<u>1001</u> <u>Joseph Delmage Vincent</u>	<u>Nelson Margaret Frances</u>	<u>Miller Samuel</u>
2 When was the child born? Street number or Concession and Lot.	<u>Sept 6th 1914</u>	<u>Oct 5th 1914</u>	<u>Sept 22nd 1914</u>
3 If in a hospital give its name	<u>Luzerne</u>	<u>Luzerne</u>	<u>Luzerne</u>
4 Male or Female.	<u>Male</u>	<u>Female</u>	<u>Male</u>
5 Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
6 Full name of Father.	<u>William John Leach</u>	<u>Charles Nelson</u>	<u>Samuel Miller</u>
7 Occupation of Father?	<u>Fireman</u>	<u>Accountant</u>	<u>Barber</u>
8 Full Maiden Name of Mother.	<u>Diabel May White</u>	<u>Annie Pearl Wilson</u>	<u>Rachel Campbell</u>
9 If she has been more than once married give names of former husband or husbands.	<u>-</u>	<u>-</u>	<u>-</u>
10 Where were the parents married?	<u>Kanada</u>	<u>Luzerne</u>	<u>Ireland</u>
11 When were they married?	<u>Nov 15th 1914</u>	<u>Sept 17th 1913</u>	<u>May 13th 1910</u>
12 If not married give full Name of Mother.	<u>-</u>	<u>-</u>	<u>-</u>
13 Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	<u>-</u>	<u>-</u>	<u>-</u>
14 What is her occupation?	<u>-</u>	<u>-</u>	<u>-</u>
15 Name of Physician attending.	<u>Dr. Rogers</u>	<u>Dr. McKay</u>	<u>Dr. Williams</u>
16 Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Father</u>
17 Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
18 Certified by	<u>W J Leach</u>	<u>Chas. Nelson</u>	<u>Samuel Miller</u>
Address	<u>Luzerne</u>	<u>Luzerne</u>	<u>Luzerne</u>
Date	<u>Oct 6th 1914</u>	<u>Oct 9th 1914</u>	<u>Oct 14th 1914</u>
Remarks			
State if Twin, Triplet, Stillmate or Still-birth.			

	Surname first	Surname first	Surname first
1 What is the full name of child?	<u>Griffin Charles Thomas</u>	<u>Prine Grace Elizabeth</u>	<u>Cooper Elsie May</u>
2 When was the child born? Street number or Concession and Lot.	<u>Oct 1st 1914</u>	<u>Sept 13th 1914</u>	<u>Sept 15th 1914</u>
3 If in a hospital give its name	<u>Luzerne</u>	<u>Luzerne</u>	<u>Luzerne</u>
4 Male or Female.	<u>Male</u>	<u>Female</u>	<u>Female</u>
5 Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
6 Full name of Father.	<u>Charles Thomas Griffin</u>	<u>James Simpson Prine</u>	<u>Henry Thomas Cooper</u>
7 Occupation of Father?	<u>Electrician</u>	<u>Merchant</u>	<u>Electrician</u>
8 Full Maiden Name of Mother.	<u>Edith E Jenkins</u>	<u>Elizabeth Simons</u>	<u>Amy Mulvey</u>
9 If she has been more than once married give names of former husband or husbands.	<u>-</u>	<u>-</u>	<u>-</u>
10 Where were the parents married?	<u>Luzerne</u>	<u>England</u>	<u>England</u>
11 When were they married?	<u>1912</u>	<u>March 1st 1893</u>	<u>Aug 2nd 1891</u>
12 If not married give full Name of Mother.	<u>-</u>	<u>-</u>	<u>-</u>
13 Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	<u>-</u>	<u>-</u>	<u>-</u>
14 What is her occupation?	<u>-</u>	<u>-</u>	<u>-</u>
15 Name of Physician attending.	<u>Dr. Currier</u>	<u>Dr. Williams</u>	<u>Dr. McKay</u>
16 Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Mother</u>
17 Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
18 Certified by	<u>C H Griffin</u>	<u>John S Prine</u>	<u>Henry Cooper</u>
Address	<u>Luzerne</u>	<u>Luzerne</u>	<u>Luzerne</u>
Date	<u>Oct 14th 1914</u>	<u>Oct 15th 1914</u>	<u>Oct 19th 1914</u>
Remarks			
State if Twin, Triplet, Stillmate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1914
 Given under my hand this 15th day of January A.D. 19 15
 Division Registrar of Luzerne

BIRTHS

Margaret Elizabeth...
George...
George...
George...

County of Jefferson

Division of Englewood

	Surname first.	Surname first.	Surname first.
What is the full name of child?	<u>Richard Margaret Elizabeth</u>	<u>Clara Mary Marjorie</u>	<u>Webb Victor Collins</u>
When was the child born? Where was the child born? Street number or Concession and Lot.	<u>Oct 9th 1914</u> 8 If in a hospital give its name <u>Englewood</u>	<u>Oct. 16th 1914</u> 8 If in a hospital give its name <u>Englewood</u>	<u>Oct. 30th 1914</u> 8 If in a hospital give its name <u>Englewood</u>
Male or Female.	<u>Female</u>	<u>Male</u>	<u>Male</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>Donny Hamilton Buchanan</u>	<u>Earl Merwin Lane</u>	<u>Blair Robert Webb</u>
Occupation of Father?	<u>Carriage Maker</u>	<u>Painter</u>	<u>Butcher</u>
Full Maiden Name of Mother.	<u>Irene Taylor</u>	<u>Beatrice Rausman</u>	<u>Charlotta Florence Rouse</u>
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	<u>Beachville</u>	<u>Englewood</u>	<u>Englewood</u>
When were they married? If not married give full Name of Mother.	<u>Sept. 15th 1910</u>	<u>Jan 2nd 1914</u>	<u>Dec 2nd 1913</u>
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	<u>Dr. McKay</u>	<u>Dr. McKay</u>	<u>Dr. William</u>
Your relation to child.	<u>Father</u>	<u>Mother</u>	<u>Father</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>W. H. Buchanan</u>	<u>Mrs. E. M. Clark</u>	<u>W. H. Webb</u>
Address	<u>Englewood</u>	<u>Englewood</u>	<u>Englewood</u>
Date	<u>Oct 27th 1914</u>	<u>Oct 20th 1914</u>	<u>Nov 9th 1914</u>
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			
	Surname first.	Surname first.	Surname first.
What is the full name of child?	<u>Duff Olive Eulna</u>	<u>Mae Margorie Jackson</u>	<u>Erwin Douglas Wilbert</u>
When was the child born? Where was the child born? Street number or Concession and Lot.	<u>Nov 7th 1914</u> 8 If in a hospital give its name <u>Englewood</u>	<u>Oct. 28th 1914</u> 8 If in a hospital give its name <u>Englewood</u>	<u>Oct. 29th 1914</u> 8 If in a hospital give its name <u>Englewood</u>
Male or Female.	<u>Female</u>	<u>Female</u>	<u>Male</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>Donald George Duff</u>	<u>Clarence Emerson Mae</u>	<u>Henry Barfield Erwin</u>
Occupation of Father?	<u>Machinist</u>	<u>Butcher</u>	<u>Butcher</u>
Full Maiden Name of Mother.	<u>Rose Eulnaards</u>	<u>Kathleen McShinn</u>	<u>Vera Hansford</u>
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	<u>Englewood</u>	<u>Woodson</u>	<u>Banner</u>
When were they married? If not married give full Name of Mother.	<u>July 27th 1910</u>	<u>Dec 25th 1913</u>	<u>Sept 4th 1912</u>
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.*	<u>Dr. Coulter</u>	<u>Dr. Williamson</u>	<u>Dr. Williamson</u>
Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Father</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>W. H. Duff</u>	<u>E. C. Mae</u>	<u>W. H. Erwin</u>
Address	<u>Englewood</u>	<u>Englewood</u>	<u>Englewood</u>
Date	<u>Nov 9th 1914</u>	<u>Nov 16th 1914</u>	<u>Nov 17th 1914</u>
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1914
Given under my hand this 5th day of January A.D. 1915

W. H. Burk
Division Registrar of Englewood

*N.B.—The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.

BIRTHS

County of _____

Division of _____

	Surname first	Surname first	Surname first
What is the full name of child?	William Andrew William	Albert Verin Milled	Rayne William Terry
When was the child born?	Oct 27th 1914	Oct 25th 1914	Oct 27th 1914
Where was the child born? Street number or Con- cession and Lot.	3 If in a hospital give its name and number	3 If in a hospital give its name and number	3 If in a hospital give its name and number
Male or Female.	4 Male	4 Female	4 Male
Are the Parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	Frederick Cissous	Henry Abbott	William John Rayne
Occupation of Father?	Labourer	Painter	Smith
Full Maiden Name of Mother.	Maude Daisy	Ernest Dale	Margaret Henderson
If she has been more than once married give name of former husband or husbands.	0 -	0 -	0 -
Where were the parents married?	10 England	10 Massachusetts	10 Singapore
When were they married?	11 Oct 30th 1914	11 May 6th 1914	11 Dec 6th 1913
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single or a Widow? If a widow state name occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attend- ing.	15 Dr. McKay	15 Dr. Williams	15 Dr. Williams
Your relation to child.	16 Mother	16 Mother	16 Father
Were you in house at time of Birth?	17 Yes	17 Yes	17 Yes
Certified by	18 W. J. Cissous	18 W. H. Abbott	18 W. J. Rayne
Address	20 Ingersoll	20 Ingersoll	20 Ingersoll
Date	21 Nov 19th 1914	21 Nov 19th 1914	21 Nov 22nd 1914
Remarks			
State if Twin/Triplet, Poly- gimate or Still-Birth.			
	Surname first	Surname first	Surname first
What is the full name of child?	Rebecca Sidney	Hammond Ralph Harrison	Arnold Miles Casley
When was the child born?	21 Nov 16th 1914	2 Oct 31st 1914	2 Nov 19th 1914
Where was the child born? Street number or Con- cession and Lot.	3 If in a hospital give its name and number	3 If in a hospital give its name and number	3 If in a hospital give its name and number
Male or Female.	4 Male	4 Male	4 Male
Are the Parents married?	5 Yes	5 Yes	5 Yes
Full name of Father.	Charles Reeds	Henry Harrison Hammond	Charles Stanley Arnold
Occupation of Father?	7 Labourer	7 Labourer	7 Labourer
Full Maiden Name of Mother.	8 Corbitt Baker	8 Nellie May	8 Myrtle Isabelle Harrison
If she has been more than once married give name of former husband or husbands.	9 -	9 -	9 -
Where were the parents married?	10 England	10 England	10 Singapore
When were they married?	11 1911	11 May 24th 1902	11 Aug 22nd 1913
If not married give full Name of Mother.	12 -	12 -	12 -
Is she single or a Widow? If a widow state name occupation, and date of husband's death.	13 -	13 -	13 -
What is her occupation?	14 -	14 -	14 -
Name of Physician attend- ing.	15 Dr. Campbell	15 Dr. Williams	15 Dr. Campbell
Your relation to child.	16 Father	16 Father	16 Father
Were you in house at time of Birth?	17 No	17 Yes	17 Yes
Certified by	18 Chas. Reeds	18 H. H. Hammond	18 C. S. Arnold
Address	20 Ingersoll	20 Ingersoll	20 Ingersoll
Date	21 Nov 22nd 1914	21 Nov 21st 1914	21 Dec 2nd 1914
Remarks			
State if Twin/Triplet, Poly- gimate or Still-Birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending 1914
 Given under my hand this 15th day of January A.D. 1915
 Division Registrar of Ingersoll

* The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.

BIRTHS

County of Oxford Division of Ingersoll

	Surname first.	Surname first.	Surname first.
1. What is the full name of child?	<u>Franka Paula May Sarah</u>	<u>Murray David Frederic</u>	<u>Fishleigh Cedric</u>
2. When was the child born?	<u>Mar 12th 1915</u>	<u>Mar 1st 1915</u>	<u>Mar 20th 1915</u>
3. If in a hospital give its name, street number or location and lot.	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
4. Sex or Female.	<u>Female</u>	<u>Male</u>	<u>Female</u>
5. Were the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
6. Full name of Father.	<u>Charles Emerson Frank</u>	<u>Arthur Murray</u>	<u>John Wesley Fishleigh</u>
7. Occupation of Father?	<u>Carpenter</u>	<u>Carpenter</u>	<u>Agent</u>
8. Full Maiden Name of Mother.	<u>Sarah Annis Edwards</u>	<u>Samuel Martyn</u>	<u>Janie Margaret McBride</u>
9. If she has been more than once married give names of former husband or husbands.			
10. Where were the parents married?	<u>Ingersoll</u>	<u>Owen Sound</u>	<u>Ingersoll</u>
11. When were they married?	<u>April 2nd 1901</u>	<u>Mar 10th 1898</u>	<u>Dec 24th 1910</u>
12. If not married give full Name of Mother.			
13. Is she single or a Widow? If a widow state name, occupation, and date of husband's death.			
14. What is her occupation?			
15. Name of Physician attending.	<u>Dr. Lambert</u>	<u>Dr. Langfield</u>	<u>Dr. Rogers</u>
16. Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Father</u>
17. Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
18. Certified by	<u>E. C. Frank</u>	<u>Arthur Murray</u>	<u>J. W. Fishleigh</u>
Address	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Date	<u>Mar 29th 1915</u>	<u>Mar 29th 1915</u>	<u>Mar 31st 1915</u>
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending March 31 1915
 Given under my hand this 13th day of Apr A.D. 1915
W. Lambert Division Registrar of Ingersoll

BIRTHS

N.B.—Record all still births as births, as well as deaths.

Printed and published for the Registrar-General by the printer, Andrew Hams, at the County Printing Works, 10, Abchurch Lane, London, E.C. 4.

County of Offord

Division of Sugersale

	Surname first.	Surname first.	Surname first.
1	Christensen Edith	Craig Charles Andrew Martin	Clark Ruth Radford
2	Jan 20th 1915	Dec 24th 1914	Dec 21st 1914
3	If in a hospital give its name Sugersale	If in a hospital give its name Sugersale	If in a hospital give its name Sugersale
4	Female	Male	Male
5	Yes	Yes	Yes
6	Marius Christensen	William Wakefield Craig	Carlton Wash Robinson Clark
7	Seal Maker	Machinist	Barman
8	Dina Andersen	Rosa Underhill	Edith Myrtle Radford
9	-	-	-
10	Belair Mich.	Sugersale	Sugersale
11	1910	Oct 12th 1904	Dec 4th 1913
12	-	-	-
13	-	-	-
14	-	-	-
15	Dr. Currier	Dr. Currier	Dr. McKay
16	Father	Father	Father
17	Yes	Yes	Yes
18	M. Christensen	W. W. Craig	W. M. R. Clark
19	Sugersale	Sugersale	Sugersale
20	Jan 21st 1915	Jan 21st 1915	July 2nd 1915
21	-	-	-
22	-	-	-
1	Barnish George Campbell	English William Harold	Wilson James
2	Jan 7th 1915	Jan 20th 1915	Jan 25th 1915
3	If in a hospital give its name Sugersale	If in a hospital give its name Sugersale	If in a hospital give its name Sugersale
4	Male	Male	Male
5	Yes	Yes	Yes
6	Benny McKay Smith	William English	William Spence Wilson
7	Barman	Finisher	Seal Maker
8	Edith Jean Langfield	Marjorie Nuttall	Carrie Seale
9	-	-	-
10	Sugersale	West Offord	Sugersale
11	Nov 4th 1905	1902	Jan 22nd 1915
12	-	-	-
13	-	-	-
14	-	-	-
15	Dr. Rogers	Dr. Williams	Dr. McKay
16	Father	Father	Father
17	Yes	Yes	Yes
18	Benny S. Smith	W. English	W. S. Wilson
19	Sugersale	Sugersale	Sugersale
20	July 5th 1915	July 6th 1915	July 6th 1915
21	-	-	-
22	-	-	-

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending March 31st 1915

Given under my hand this 13th day of July A.D. 1915

W. R. Smith

Division Registrar of Sugersale

*N.B.—The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.

BIRTHS

County of Orange Division of Engersall

	Surname First	Surname First	Surname First
What is the full name of child?	<u>Smith Kathleen Ruth</u>	<u>Lee Jean</u>	<u>Young Mildred Irene</u>
When was the child born?	<u>Jan 20th 1915</u>	<u>Jan 21st 1915</u>	<u>July 2nd 1915</u>
Where was the child born?	<u>If in a hospital give its name Engersall</u>	<u>If in a hospital give its name Engersall</u>	<u>If in a hospital give its name Engersall</u>
Street number or Concession and Lot.			
Male or Female.	<u>Female</u>	<u>Female</u>	<u>Female</u>
Are the parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>James Smith</u>	<u>Henry Lee</u>	<u>John W. Young</u>
Occupation of Father?	<u>Merchant</u>	<u>Handy</u>	<u>Cutcher</u>
Full Maiden Name of Mother.	<u>Miss Maud Wilson</u>	<u>Wm. Hill</u>	<u>Miss Higgins</u>
If she has been more than once married give names of former husband, or husbands.			
Where were the parents married?	<u>Michigan</u>	<u>China</u>	<u>Waukegan Ill</u>
When were they married?	<u>1910</u>	<u>1903</u>	<u>May 12th 1911</u>
If not married give full Name of Mother.			
Is she single or a Widow?			
If a widow state name, occupation, and date of husband's death.			
What is her occupation?			
Name of Physician attending.	<u>Dr. Linton</u>	<u>Dr. Williams</u>	<u>Dr. Larnick</u>
Your relation to child.	<u>Father</u>	<u>Father</u>	<u>Mother</u>
Were you in house at time of birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>J. Smith</u>	<u>Geo. Lee</u>	<u>Willie Young</u>
Address	<u>Engersall</u>	<u>Engersall</u>	<u>Engersall</u>
Date	<u>July 15/15</u>	<u>July 15/15</u>	<u>July 15/15</u>
Remarks			
State if Twin, Triplet, Illigimate or Still-birth.			
What is the full name of child?	<u>Wells George William</u>	<u>Wheeler John Frederick</u>	<u>Charles Stanley Barrine</u>
When was the child born?	<u>July 21st 1915</u>	<u>July 17th 1915</u>	<u>July 20th 1915</u>
Where was the child born?	<u>If in a hospital give its name Engersall</u>	<u>If in a hospital give its name Engersall</u>	<u>If in a hospital give its name Engersall</u>
Street number or Concession and Lot.			
Male or Female.	<u>Male</u>	<u>Male</u>	<u>Male</u>
Are the parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>John Thomas Wells</u>	<u>James Wheeler</u>	<u>Charles Walter Chisholm</u>
Occupation of Father?	<u>Farmer</u>	<u>Line man</u>	<u>Shipper</u>
Full Maiden Name of Mother.	<u>Miss Elizabeth</u>	<u>Carb Steinacker</u>	<u>Edna Maude Miller</u>
If she has been more than once married give names of former husband, or husbands.			
Where were the parents married?	<u>England</u>	<u>Engersall</u>	<u>Canada</u>
When were they married?	<u>July 5th 1913</u>	<u>Sept 7th 1914</u>	<u>Jan 22nd 1915</u>
If not married give full Name of Mother.			
Is she single or a Widow?			
If a widow state name, occupation, and date of husband's death.			
What is her occupation?			
Name of Physician attending.	<u>Dr. Williams</u>	<u>Dr. Williams</u>	<u>Dr. Larnick</u>
Your relation to child.	<u>Mother</u>	<u>Father</u>	<u>Father</u>
Were you in house at time of birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>Wm. G. Wells</u>	<u>Wm. S. Wheeler</u>	<u>Chas. Chisholm</u>
Address	<u>Engersall</u>	<u>Engersall</u>	<u>Engersall</u>
Date	<u>July 22nd 1915</u>	<u>July 25th 1915</u>	<u>Mar 11th 1915</u>
Remarks			
State if Twin, Triplet, Illigimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending March 21st 1915
 Given under my hand this 13th day of Apr A.D. 1915

Division Registrar of Engersall

* The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.

Norah adna hargan, john edgar hargan, annie james jones, affred bonkase, mary edith allen coombes, mary may wallham, john sandfield, elizabeth, mary christina, robert joseph wilson, john alexander wilson, eliza jane leppard, harry frederick cook, eliza elizabeth brown, charles edward, eliza hargan, susanna hargan

BIRTHS

Record 11.
N.B.—Record all still-births as births, as well as deaths.

County of Essex Division of Ingershall

	SURNAME FIRST	SURNAME FIRST	SURNAME FIRST
What is the full name of child?	<u>Margaret Sarah Selma</u>	<u>Bonkase Alfred</u>	<u>Dearham Mary May</u>
When was the child born?	<u>July 22nd 1915</u>	<u>July 25th 1915</u>	<u>March 20th 1915</u>
Where was the child born? Street number or Concession and Lot.	<u>Ingershall</u>	<u>Ingershall</u>	<u>Ingershall</u>
Male or Female.	<u>Female</u>	<u>Male</u>	<u>Female</u>
Are the parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>John Edgar Hargan</u>	<u>Alfred Bonkase</u>	<u>John Sandfield Dearham</u>
Occupation of Father?	<u>Shopkeeper</u>	<u>Machinist</u>	<u>Labourer</u>
Full Maiden Name of Mother.	<u>Annie Jones</u>	<u>Mary White Ellen Coombes</u>	<u>Mary Ditchfield</u>
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	<u>Ingershall</u>	<u>Ingershall</u>	<u>Woburn</u>
When were they married?	<u>Sept 17th 1907</u>	<u>July 2nd 1914</u>	<u>June 29th 1913</u>
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	<u>Dr Williams</u>	<u>Dr Williams</u>	<u>Dr McKay</u>
Your relation to child.	<u>Father</u>	<u>Mother</u>	<u>Father</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>J. E. Hargan</u>	<u>Mrs Alfred Bonkase</u>	<u>J. H. Dearham</u>
Address	<u>Ingershall</u>	<u>Ingershall</u>	<u>Ingershall</u>
Date	<u>Mar 11th 1915</u>	<u>Mar 16th 1915</u>	<u>Mar 17th 1915</u>
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			
	SURNAME FIRST	SURNAME FIRST	SURNAME FIRST
What is the full name of child?	<u>Wilson Herbert Leslie</u>	<u>Coak Harry Frederick</u>	<u>Ballou Charles</u>
When was the child born?	<u>Mar 22nd 1915</u>	<u>July 11th 1915</u>	<u>July 25th 1915</u>
Where was the child born? Street number or Concession and Lot.	<u>Ingershall</u>	<u>Ingershall</u>	<u>Ingershall</u>
Male or Female.	<u>Male</u>	<u>Male</u>	<u>Male</u>
Are the parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Full name of Father.	<u>John Alexander Wilson</u>	<u>Harry Coak</u>	<u>William Ballou</u>
Occupation of Father?	<u>Farmer</u>	<u>Soldier</u>	<u>Machinist</u>
Full Maiden Name of Mother.	<u>Elizabeth Fildes</u>	<u>Edith Elizabeth Brown</u>	<u>Florence Lane</u>
If she has been more than once married give names of former husband, or husbands.	-	-	-
Where were the parents married?	<u>Ingershall</u>	<u>Ingershall</u>	<u>Warrick</u>
When were they married?	<u>July 17th 1910</u>	<u>June 1st 1911</u>	<u>May 6th 1915</u>
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	<u>Dr Lumbler</u>	<u>Dr Williams</u>	<u>Dr Lumbler</u>
Your relation to child.	<u>Father</u>	<u>Mother</u>	<u>Father</u>
Were you in house at time of Birth?	<u>No</u>	<u>Yes</u>	<u>Yes</u>
Certified by	<u>J. A. Wilson</u>	<u>Mrs H. Coak</u>	<u>W. Ballou</u>
Address	<u>Warrick</u>	<u>Ingershall</u>	<u>Ingershall</u>
Date	<u>Mar 22nd 1915</u>	<u>Mar 22nd 1915</u>	<u>Mar 26th 1915</u>
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1915 A.D. 1915

Given under my hand this 23rd day of Apr 1915
W. Lumbler Division Registrar of Ingershall

*N.B.—The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.

BIRTHS

County of Jefferson

Division of Surgeon

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	
What is the full name of child?	Stiepel Davis Lucile	Hausberger Jack, Kayton	Eden Davis Elizabeth Amy																	
When was the child born?	Dec 11th 1914	Dec 24th 1914	Jan 1st 1915																	
Where was the child born?	Surgeon	Surgeon	Surgeon																	
Street number or Commission and Lot.																				
Male or Female	Female	Male	Female																	
Are the parents married?	Yes	Yes	Yes																	
Full name of Father	John W. Stiepel	Joseph Hausberger	Fred James Eden																	
Occupation of Father	Carrriage Maker	Machinist	Inspector																	
Full Maiden Name of Mother	Gene Kellum	Bertha Kayton	Amy Eleanor Cooper																	
If she has been more than once married give names of former husband, or husbands.																				
Where were the parents married?	Beachville	Tilsburg	Surgeon																	
When were they married?	June 10th 1909	1901	Sept 1st 1913																	
If not married give full Name of Mother.																				
Is the single or a Widow?																				
If a widow state name, occupation, and date of husband's death.																				
What is her occupation?																				
Name of Physician attending	Dr. Williams	Dr. Williams	Dr. Cantler																	
Your relation to child.	Father	Mother	Father																	
Were you in house at time of birth?	Yes	Yes	Yes																	
Certified by	J. W. Stiepel	Mrs. Ruckl	F. J. Eden																	
Address	Surgeon	Surgeon	Surgeon																	
Date	Jan 21st 1915	Jan 11th 1915	Jan 14th 1915																	
Remarks																				
State if Twin, Triplet, Illigimate or Stillbirth.																				

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	
What is the full name of child?	Bauer Margret Agnes	Henderson Ralph Kitchener	Baucher William Henry Bradford																	
When was the child born?	Jan 14th 1915	Jan 2nd 1915	Jan 12th 1915																	
Where was the child born?	Surgeon	Surgeon	Surgeon																	
Street number or Commission and Lot.																				
Male or Female	Female	Male	Male																	
Are the parents married?	Yes	Yes	Yes																	
Full name of Father	Harry Thomas Bauer	Fredrick George Henderson	Charles William Bradford Baucher																	
Occupation of Father	Coal Miner	Machinist	Machinist																	
Full Maiden Name of Mother	Bertie Ethel Perry	Elizabeth Jane Taylor	Bertrude Jones																	
If she has been more than once married give names of former husband, or husbands.																				
Where were the parents married?	Surgeon	Surgeon	England																	
When were they married?	Aug 9th 1915	July 20th 1896	Nov 1911																	
If not married give full Name of Mother.																				
Is the single or a Widow?																				
If a widow state name, occupation, and date of husband's death.																				
What is her occupation?																				
Name of Physician attending	Dr. Thomas	Dr. Williams	Dr. Cantler																	
Your relation to child.	Father	Father	Father																	
Were you in house at time of birth?	Yes	Yes	Yes																	
Certified by	H. T. Bauer	F. G. Henderson	C. W. B. Baucher																	
Address	Surgeon	Surgeon	Surgeon																	
Date	Jan 22nd 1915	Jan 25th 1915	Jan 26th 1915																	
Remarks																				
State if Twin, Triplet, Illigimate or Stillbirth.																				

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending March 31st 1915
 Given under my hand this 13th day of Apr A.D. 1915
 Division Registrar of Surgeon

P.S.—The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.

Division of Births	County of Suffolk	Division of Births	County of Suffolk	Division of Births	County of Suffolk
Date of Birth: May 15th 1915 Address: ... Name of Informant: ... Twin, Triplet, Multiplet or Still-born: ... Were you in house at time of Birth? ... Name of Physician in attendance: ... Is she single or a widow? ... Maiden name of Mother: ... Occupation: ... Address: ... Full name of Father: ... When and where married: ... Are the Parents married? ... Sex: ... Street number or Con- ception and Loc: ... Where born? ... Date of Birth: ... Christian name: ... Surname of child: ... Date of Return: ... Address: ... Name of Informant: ... Twin, Triplet, Multiplet or Still-born: ... Were you in house at time of Birth? ... Name of Physician in attendance: ... Is she single or a widow? ... Maiden name of Mother: ... Occupation: ... Address: ... Full name of Father: ... When and where married: ... Are the Parents married? ... Sex: ... Street number or Con- ception and Loc: ... Where born? ... Date of Birth: ... Christian name: ... Surname of child: ...	Date of Birth: May 15th 1915 Address: ... Name of Informant: ... Twin, Triplet, Multiplet or Still-born: ... Were you in house at time of Birth? ... Name of Physician in attendance: ... Is she single or a widow? ... Maiden name of Mother: ... Occupation: ... Address: ... Full name of Father: ... When and where married: ... Are the Parents married? ... Sex: ... Street number or Con- ception and Loc: ... Where born? ... Date of Birth: ... Christian name: ... Surname of child: ... Date of Return: ... Address: ... Name of Informant: ... Twin, Triplet, Multiplet or Still-born: ... Were you in house at time of Birth? ... Name of Physician in attendance: ... Is she single or a widow? ... Maiden name of Mother: ... Occupation: ... Address: ... Full name of Father: ... When and where married: ... Are the Parents married? ... Sex: ... Street number or Con- ception and Loc: ... Where born? ... Date of Birth: ... Christian name: ... Surname of child: ...	Date of Birth: May 15th 1915 Address: ... Name of Informant: ... Twin, Triplet, Multiplet or Still-born: ... Were you in house at time of Birth? ... Name of Physician in attendance: ... Is she single or a widow? ... Maiden name of Mother: ... Occupation: ... Address: ... Full name of Father: ... When and where married: ... Are the Parents married? ... Sex: ... Street number or Con- ception and Loc: ... Where born? ... Date of Birth: ... Christian name: ... Surname of child: ... Date of Return: ... Address: ... Name of Informant: ... Twin, Triplet, Multiplet or Still-born: ... Were you in house at time of Birth? ... Name of Physician in attendance: ... Is she single or a widow? ... Maiden name of Mother: ... Occupation: ... Address: ... Full name of Father: ... When and where married: ... Are the Parents married? ... Sex: ... Street number or Con- ception and Loc: ... Where born? ... Date of Birth: ... Christian name: ... Surname of child: ...	Date of Birth: May 15th 1915 Address: ... Name of Informant: ... Twin, Triplet, Multiplet or Still-born: ... Were you in house at time of Birth? ... Name of Physician in attendance: ... Is she single or a widow? ... Maiden name of Mother: ... Occupation: ... Address: ... Full name of Father: ... When and where married: ... Are the Parents married? ... Sex: ... Street number or Con- ception and Loc: ... Where born? ... Date of Birth: ... Christian name: ... Surname of child: ... Date of Return: ... Address: ... Name of Informant: ... Twin, Triplet, Multiplet or Still-born: ... Were you in house at time of Birth? ... Name of Physician in attendance: ... Is she single or a widow? ... Maiden name of Mother: ... Occupation: ... Address: ... Full name of Father: ... When and where married: ... Are the Parents married? ... Sex: ... Street number or Con- ception and Loc: ... Where born? ... Date of Birth: ... Christian name: ... Surname of child: ...	Date of Birth: May 15th 1915 Address: ... Name of Informant: ... Twin, Triplet, Multiplet or Still-born: ... Were you in house at time of Birth? ... Name of Physician in attendance: ... Is she single or a widow? ... Maiden name of Mother: ... Occupation: ... Address: ... Full name of Father: ... When and where married: ... Are the Parents married? ... Sex: ... Street number or Con- ception and Loc: ... Where born? ... Date of Birth: ... Christian name: ... Surname of child: ... Date of Return: ... Address: ... Name of Informant: ... Twin, Triplet, Multiplet or Still-born: ... Were you in house at time of Birth? ... Name of Physician in attendance: ... Is she single or a widow? ... Maiden name of Mother: ... Occupation: ... Address: ... Full name of Father: ... When and where married: ... Are the Parents married? ... Sex: ... Street number or Con- ception and Loc: ... Where born? ... Date of Birth: ... Christian name: ... Surname of child: ...	Date of Birth: May 15th 1915 Address: ... Name of Informant: ... Twin, Triplet, Multiplet or Still-born: ... Were you in house at time of Birth? ... Name of Physician in attendance: ... Is she single or a widow? ... Maiden name of Mother: ... Occupation: ... Address: ... Full name of Father: ... When and where married: ... Are the Parents married? ... Sex: ... Street number or Con- ception and Loc: ... Where born? ... Date of Birth: ... Christian name: ... Surname of child: ... Date of Return: ... Address: ... Name of Informant: ... Twin, Triplet, Multiplet or Still-born: ... Were you in house at time of Birth? ... Name of Physician in attendance: ... Is she single or a widow? ... Maiden name of Mother: ... Occupation: ... Address: ... Full name of Father: ... When and where married: ... Are the Parents married? ... Sex: ... Street number or Con- ception and Loc: ... Where born? ... Date of Birth: ... Christian name: ... Surname of child: ...

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending
 from 30th April 1915 to 30th June 1915
 Division Registrar of Births

BIRTHS

David William Shales, William Elmo Shales, Eva Spray Sprag Boyce, Norman William Rutledge, William James Rutledge, Adlin Kazian Edwards, Herbert Bloomfield Stevenson, Walter Stevenson, Vesta Nye Bloomfield, Ernest Dutton, Benjamin Gullion, Florence Barry, Ralph Joseph Johnston, Edward Johnston, Rose Martine Minard, Jean Elizabeth McDougall, William Alexander McDougall, Violet Annie Phipps

County of Jefferson Division of Ingersoll

	Surname First	Surname First	Surname First
Sex of child.	Shales	Stevenson	Johnston
Christian name.	David William	Herbert Bloomfield	Ralph Joseph
Date of Birth.	Apr 17th 1915	Apr 11th 1915	Apr 11th 1915
Where born? Street number or Con- cession and Loc.	Alexander Hospital If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Male	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	England, Aug 26th 1912	Canada, June 30th 1911	Ingersoll, June 22nd 1904
Full name of Father.	William Elmo Shales	Walter H. Stevenson	Edward Johnston
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	School Teacher	Woodworker	Labourer
Maiden name of Mother.	Eva Spray Boyce	Della Hope Bloomfield	Rose Martine Minard
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Rogers	Dr. Lantier	Dr. Williams
Were you in house at time of Birth?	No	Yes	Yes
Twin, Triplet, Quadruplet or still-born.	-	-	-
Name of Informant.	W. E. Shales	W. H. Stevenson	Mrs. E. Johnston
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	May 2nd 1915 Surname First	May 4th 1915 Surname First	May 5th 1915 Surname First
Sex of child.	Rutledge	Dutton	McDougall
Christian name.	Norman William	Ernest	Jean Elizabeth
Date of Birth.	Apr 29th 1915	Apr 21st 1915	May 11th 1915
Where born? Street number or Con- cession and Loc.	Alexander Hospital If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	England, Mar 13th 1912	Woodlawn, Aug 11th 1904	Woodlawn, Oct 9th 1904
Full name of Father.	William James Rutledge	Benjamin Dutton	William Alexander McDougall
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Shipper	Labourer	Merchant
Maiden name of Mother.	Edith Reginald Edwards	Dorothy Barry	Violet Annie Chippa
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Lantier	Dr. Lantier	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Quadruplet or still-born.	-	Still Born	-
Name of Informant.	W. J. Rutledge	Benj. Dutton	W. A. McDougall
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	May 5th 1915	May 5th 1915	May 11th 1915

Subd. 14.
N.B.—Record all still births as births,
as well as deaths.

BIRTHS

Albert Walter Barker, Madia Tansler, William Ernest Barker,
Julius, Herbert Charles Feller, Annie Wright

County of Jefferson Division of Ingersoll

	Surname first	Surname first	Surname first
What is the full name of child?	1 <u>Barker</u>	2 <u>Barlow William Ernest</u>	3 <u>Feller Ruth Annie</u>
When was the child born?	4 <u>June 13th 1915</u>	5 <u>June 4th 1915</u>	6 <u>May 21st 1915</u>
Where was the child born? Street number or Concession and Lot.	7 <u>If in a hospital give its name Ingersoll</u>	8 <u>If in a hospital give its name Ingersoll</u>	9 <u>If in a hospital give its name Ingersoll</u>
Male or Female.	10 <u>Female</u>	11 <u>Male</u>	12 <u>Female</u>
Are the Parents married?	13 <u>Yes</u>	14 <u>Yes</u>	15 <u>Yes</u>
Full name of Father.	16 <u>Albert Olevia Barker</u>	17 <u>Ernest Barlow</u>	18 <u>Herbert Charles Feller</u>
Occupation of Father?	19 <u>Labourer</u>	20 <u>Shipper</u>	21 <u>Carpenter</u>
Full Maiden Name of Mother.	22 <u>Martha Barker</u>	23 <u>Eulna Keale</u>	24 <u>Annie Wright</u>
If she has been more than once married give names of former husband or husbands.	25 -	26 -	27 -
Where were the parents married?	28 <u>Canada</u>	29 <u>Canada</u>	30 <u>Canada</u>
When were they married?	31 <u>May 2nd 1911</u>	32 <u>June 19th 1914</u>	33 <u>Apr 2nd 1907</u>
If not married give full Name of Mother.	34 -	35 -	36 -
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	37 -	38 -	39 -
What is her occupation?	40 -	41 -	42 -
Name of Physician attending.	43 <u>Dr. Medicus</u>	44 <u>Dr. Lambert</u>	45 <u>Dr. Lambert</u>
Your relation to child.	46 <u>Partner</u>	47 <u>Partner</u>	48 <u>Partner</u>
Were you in house at time of Birth?	49 <u>Yes</u>	50 <u>Yes</u>	51 <u>Yes</u>
Certified by	52 <u>W. D. Barker</u>	53 <u>E. Barlow</u>	54 <u>Mrs. R. C. Feller</u>
Address	55 <u>Ingersoll</u>	56 <u>Ingersoll</u>	57 <u>Ingersoll</u>
Date	58 <u>June 21st 1915</u>	59 <u>June 22nd 1915</u>	60 <u>June 29th 1915</u>
Remarks	61 <u>Slit Burn</u>		

	Surname first	Surname first	Surname first
What is the full name of child?	1	2	3
When was the child born?	4	5	6
Where was the child born? Street number or Concession and Lot.	7 <u>If in a hospital give its name.</u>	8 <u>If in a hospital give its name.</u>	9 <u>If in a hospital give its name.</u>
Male or Female.	10	11	12
Are the Parents married?	13	14	15
Full name of Father.	16	17	18
Occupation of Father?	19	20	21
Full Maiden Name of Mother.	22	23	24
If she has been more than once married give names of former husband or husbands.	25	26	27
Where were the parents married?	28	29	30
When were they married?	31	32	33
If not married give full Name of Mother.	34	35	36
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	37	38	39
What is her occupation?	40	41	42
Name of Physician attending.	43	44	45
Your relation to child.	46	47	48
Were you in house at time of Birth?	49	50	51
Certified by	52	53	54
Address			
Date			
Remarks			
State if Twin, Triplet, Illegitimate or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1915
 Given under my hand this 10th day of July A.D. 1915
 Division Registrar of Ingersoll

*N.B.—The reference numbers relate to those found in Form 2 or 8, as an aid to transcribing.

BIRTHS

Arthur Henry burst, frances evered smith, william arthur westlake, edna evans, elsie may cole, benjamin john cole, mary mccormick, robert william edwards, edward edwards, matilda margaret taylor, james mckillen, benjamin mckillen, robert halliser, frank beverly booke, frank albert book, melinda minnie thompson

County of Offord

Division of Ingersall

	Surname first	Surname first	Surname first
What is the full name of child?	Harriet Arthur Henry	Charlotte Claire May	McKillen James
When was the child born?	May 16th 1915	May 4th 1915	May 26th 1915
Where was the child born? Street number or Concession and Lot.	Castlegate St		
Male or Female.	Male	Female	Male
Are the Parents married?	Yes	Yes	Yes
Full name of Father.	Arthur Henry Harriet	Benjamin John Cole	Benjamin McKillen
Occupation of Father?	Labourer	Labourer	Wagon Driver
Full Maiden Name of Mother.	Frances Evered Smith	Mary McCormick	Rachel Walker
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	London Ont	St. Marys Ont	
When were they married?	Mar 20th 1910	June 4th 1914	
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	Dr. Williams	Dr. Williams	Dr. Williams
Your relation to child.	Father	Mother	Father
Were you in house at time of Birth?	Yes	Yes	Yes
Certified by	Dr. H. Harriet	Mrs. B. J. Cole	Benj. McKillen
Address	Ingersall	Ingersall	Ingersall
Date	June 1st 1915	June 2nd 1915	June 15th 1915
Remarks			
State if Twin, Triplet, Stillborn or Still-birth.			
What is the full name of child?	Wendy William Arthur	Edwards Robert William	Book Frank Beverly
When was the child born?	May 20th 1915	June 3rd 1915	June 10th 1915
Where was the child born? Street number or Concession and Lot.	Castlegate St		
Male or Female.	Male	Male	Male
Are the Parents married?	Yes	Yes	Yes
Full name of Father.	William Arthur Wendake	James Edward Edwards	Frank Albert Book
Occupation of Father?	Labourer	Machinist	Machinist
Full Maiden Name of Mother.	Edna Evans	Matilda Margaret Taylor	Melinda Minnie Thompson
If she has been more than once married give names of former husband or husbands.	-	-	-
Where were the parents married?	England	Ingersall	Ingersall
When were they married?	May 1910	Apr 6th 1914	Aug 15th 1911
If not married give full Name of Mother.	-	-	-
Is she single or a Widow? If a widow state name, occupation, and date of husband's death.	-	-	-
What is her occupation?	-	-	-
Name of Physician attending.	Dr. Williams	Dr. Cantler	Dr. Cantler
Your relation to child.	Mother	Mother	Father
Were you in house at time of Birth?	Yes	Yes	Yes
Certified by	Mrs. W. A. Wendake	Mrs. J. E. Edwards	F. A. Book
Address	Ingersall	Ingersall	Ingersall
Date	June 10th 1915	June 16th 1915	June 29th 1915
Remarks			
State if Twin, Triplet, Stillborn or Still-birth.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1915
 Given under my hand this 10th day of July A.D. 1915

Division Registrar Ingersall

The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.

BIRTHS

Howard Joseph Johnston, Howard Stanley Johnston, Della May Mitchell, Gerty Peck Arthur Page, Gerty Robins, Bessie Eileen Neill, James Vance Neill, Emma Edith Huckle, William Benjamin McMillan, Mary Beard, Walter Kerr, William James Kerr, Eleanor Marshall, Elsie English, Eva English

County of Jefferson

Division of Ingersoll

	Surname first	Surname first	Surname first
Surname of child.	Johnston	Neill	Kerr
Christian name.	Howard Joseph	Bessie Eileen	Walter
Date of Birth.	July 16th 1915	Sept 1st 1915	Sept 22nd 1915
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Male	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingersoll, Sept 15th 1914	Ingersoll, Aug 27th 1912	Washington Mar 4th 1904
Full name of Father.	Howard Stanley Johnston	James Stone Neill	William James Kerr
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Ingersoll	Carpenter	Merchant
Maiden name of Mother.	Bella May Mitchell	Emma Edith Honckle	Eleanor Marshall
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Williams	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	H. S. Johnston	J. S. Neill	W. J. Kerr
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Sept 27th 1915	Sept 29th 1915	Sept 25th 1915
	Surname first	Surname first	Surname first
Surname of child.	Cage	McMillan	English
Christian name.	Bertie	William Benjamin	Elcie
Date of Birth.	Sept 24th 1915	Sept 27th 1915	Mar 6th 1915
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Female	Male	Female
Are the Parents married?	Yes	Yes	No
Where and when married.	England Mar 2nd 1905	Ingersoll, Oct 19th 1909	Not married
Full name of Father.	Arthur Cage	Benjamin A. McMillan	Not given
Address.	Ingersoll	Ingersoll	-
Occupation.	Labourer	Butcher	-
Maiden name of Mother.	Bertie Palmer	Mary Beard	Eva English
Is she single or a widow?	-	-	Single
Name of Physician in at- tendance.	Dr. Williams	Dr. Williams	Dr. Langfield
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	Still Born	Still Born	Illegitimate
Name of Informant.	Arthur Cage	B. A. McMillan	Eva English
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Sept 25th 1915	Sept 25th 1915	Sept 24th 1915

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1915

Given under my hand this 14th day of Oct
 Division Registrar of Ingersoll, W. B. Smith

A. D. 1915

BIRTHS

Ada muriel dodd, joseph henry dodd, ada alexandra webb, dorothy may richardson, robert william richardson, daisy charlotte kibble, berndetta berndetta hookham, fra joan hopkittan, may elisha delaney, james benjamin jeavons, alfred isonam, edith emma bosterfield bosterfield, elizabeth sabel little, john james little, frances kirkpatrick, lena marie burrill, allen james burrill, elizabeth anderson.

County of Wiltshire Division of Inglesall

	Surname first	Surname first	Surname first
Surname of child.	Dodd	Berndetta Berndetta	Berndetta Elizabeth Sealine
Christian name.	Ada Muriel	an ill. Sealine	
Date of Birth.	July 19th 1915	June 26th 1915	July 19th 1915
Where born? Street number or Con- cession and Lot.	Home If in a hospital give its name	Home If in a hospital give its name	Home If in a hospital give its name
Sex.	Female	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Inglesall	Inglesall Oct 12th 1911	Sancti Petri 1913
Full name of Father.	Sept 27th 1914 Joseph Henry Dodd	Francis Sealine	John James Little
Address.	Inglesall	Inglesall	Inglesall
Occupation.	Telegrapher	Ill.	Carpenter
Maiden name of Mother.	Ada Alexandra Webb	Mary Emma Delaney	Marian Kirkpatrick
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. McKay	Dr. McKay	Dr. Williams
Were you in house at time of Birth?	Yes	No	No
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Mrs S. L. Webb	Off Sealine	Off Little
Address.	Inglesall	Inglesall	Inglesall
Date of Return.	Aug 2nd 1915	Aug 7th 1915	Aug 9th 1915
Surname of child.	Richardson	Jeavons	Berndetta
Christian name.	Dorothy May	James Benjamin	Lenora Marie
Date of Birth.	July 31st 1915	June 27th 1915	Aug 1st 1915
Where born? Street number or Con- cession and Lot.	Home If in a hospital give its name	Home If in a hospital give its name	Home If in a hospital give its name
Sex.	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Oct 14th 1907 Paris	June 4th 1896 England	England Oct 4th 1910
Full name of Father.	Robert William Richardson	Alfred Leonard Jeavons	Allen James Burrill
Address.	Inglesall	Inglesall	Inglesall
Occupation.	Labourer	Labourer	Labourer
Maiden name of Mother.	Daisy Charlotte Kibble	Edith Emma Bosterfield	Elizabeth Anderson
Is she single or a widow?	-	-	Yes
Name of Physician in at- tendance.	Dr. Williams	Dr. Williams	Dr. Carnist
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	R. W. Richardson	W. Jeavons	Mrs A. J. Burrill
Address.	Inglesall	Inglesall	Inglesall
Date of Return.	Aug 23rd 1915	Aug 29th 1915	Aug 31st 1915

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending

Given under my hand this 14th day of Oct,

A.D. 1915

Division Registrar of

Inglesall, Wiltshire

P.O.

BIRTHS

John Gordon Burke, John Douglas Burke, Marguerite Margaret Finn, Celia Isabel Pyatt, Erpyatt, Azora Davey Daney, Ruth Wilma Sutherland, William Alexander Sutherland, Minnie Sandick, John Roslyn Wills, John James Wills, Leona McArthur, John Francis Moore, John Joseph Mobre, Frances Dunphy, Helen May Mona Jenkins, Hugh Allen Jenkins, Margaret

County of Jefferson Division of Ingersoll

	Surname First	Surname First	Surname First
Surname of child	Burke	Sutherland	Mauro
Christian name	John Harold	Ruth Wilma	John Francis
Date of Birth	Aug 1st 1915	Aug 1st 1915	Aug 1st 1915
Where born? Street number or Concession and Loc.	DePaulo Hospital If in a hospital give its name Ingersoll	DePaulo Hospital If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex	Male	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married	Alliant, Ky Sept 7/14	Wofford Mar 21st 1900	Glynn, Ky Ingersoll
Full name of Father	John Baynet Burke	William Alexander Sutherland	John Joseph Mauro
Address	Ingersoll	Ingersoll	Ingersoll
Occupation	Barber	Carpenter	Hard Resiner
Maiden name of Mother	Margaret Finn	Minnie McArthur	Frances Dunphy
Is she single or a widow?	-	-	-
Name of Physician in attendance	Dr. McDonald	Dr. Rogers	Dr. Williams
Was you in house at time of Birth?	No	No	Yes
Twin, Triplet, Illegitimate or Still-born	-	-	-
Name of Informant	J. D. Burke	W. S. Smith	J. J. Mauro
Address	Ingersoll	Ingersoll	Ingersoll
Date of Return	Aug 2nd 1915	Sept 1st 1915	Sept 1st 1915
Surname of child	Dyatto	Wills	Jenkins
Christian name	Celia Isabel	John Roslyn	Helen May Mona
Date of Birth	Aug 12th 1915	Aug 11th 1915	Aug 12th 1915
Where born? Street number or Concession and Loc.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married	DePaulo Hospital	Nov 2/04 St Thomas	Dec 2/09 Ingersoll
Full name of Father	Eric Dyatto	John James Wills	Hugh Allen Jenkins
Address	Ingersoll	Ingersoll	Ingersoll
Occupation	Seamster	Barber	Leat Worker
Maiden name of Mother	Azora Daney	Leona McArthur	Margaret Latta
Is she single or a widow?	-	-	-
Name of Physician in attendance	Dr. Furlong	Dr. Williams	Dr. Williams
Was you in house at time of Birth?	No	Yes	Yes
Twin, Triplet, Illegitimate or Still-born	-	-	-
Name of Informant	Chas Ingersoll	J. J. Wills	H. B. Jenkins
Address	Ingersoll	Ingersoll	Ingersoll
Date of Return	Sept 1st 1915	Sept 10th 1915	Sept 11th 1915

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th A.D. 1915
 Given under my hand this 14th day of Oct
 Division Registrar of Ingersoll W. S. Smith

BIRTHS

Dennis bleaker crown, benjamin jackson, frederick dickson, may hermetta jackson, fred angus kimberly, frederick kimberly, myrtle irene furtney, rosin roslin vernice summer, john thomas ogilsey summer, ethel may pettman, james wesley smith, james william criffs, charles norman nunn, john peler nunn, kate minard.

County of *Jefferson*Division of *Ingersoll*

Surname of child.	Surname First	Surname First	Surname First
<i>Crown</i>	<i>Kimberly</i>	<i>Smith</i>	
Christian name.	<i>Dennis Bleaker</i>	<i>Fred Angus</i>	<i>James Wesley</i>
Date of Birth.	<i>Aug 21st 1915</i>	<i>Sept 1st 1915</i>	<i>Sept 10th 1915</i>
Where born? Street number or Con- cession and Lot.	<i>If in a hospital give its name Ingersoll</i>	<i>If in a hospital give its name Ingersoll</i>	<i>If in a hospital give its name Ingersoll</i>
Sex.	<i>Male</i>	<i>Male</i>	<i>Male</i>
Are the Parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Where and when married.	<i>Ingersoll May 24th 1915</i>	<i>Wesehaugh July 7th 1914</i>	<i>Hamilton Jan 9th 1913</i>
Full name of Father.	<i>Benjamin Crown</i>	<i>Fredrick Angus Kimberly</i>	<i>James William Smith</i>
Address.	<i>Ingersoll</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Occupation.	<i>Machinist</i>	<i>Car Driver</i>	<i>Dr. Barber</i>
Maiden name of Mother.	<i>Augustia Rebecca Bleaker</i>	<i>Myrtle Irene Furtney</i>	<i>Kelso Criffs</i>
Is she single or a widow?	<i>-</i>	<i>-</i>	<i>-</i>
Name of Physician in at- tendance.	<i>Dr. Williams</i>	<i>Dr. Carrish</i>	<i>Dr. Carrish</i>
Were you in house at time of Birth?	<i>Yes</i>	<i>No</i>	<i>Yes</i>
Twin, Triplets, Illegitimate or Still-born.	<i>-</i>	<i>-</i>	<i>-</i>
Name of Informant.	<i>Benny Crown</i>	<i>J. O. Kimberly</i>	<i>J. W. Smith</i>
Address.	<i>Ingersoll</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Date of Return.	<i>Sept 19th 1915</i>	<i>Sept 20th 1915</i>	<i>Sept 20th 1915</i>
Surname of child.	Surname First	Surname First	Surname First
<i>Dickson</i>	<i>Summer</i>	<i>Nunn</i>	
Christian name.	<i>William Frederick</i>	<i>Reubin Vernice</i>	<i>Charles Norman</i>
Date of Birth.	<i>Sept 4th 1915</i>	<i>Aug 27th 1915</i>	<i>July 29th 1915</i>
Where born? Street number or Con- cession and Lot.	<i>If in a hospital give its name Ingersoll</i>	<i>If in a hospital give its name Ingersoll</i>	<i>If in a hospital give its name Ingersoll</i>
Sex.	<i>Male</i>	<i>Female</i>	<i>Male</i>
Are the Parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Where and when married.	<i>Weschester Jan 20th 1914</i>	<i>Denham St. July 20th 1915</i>	<i>Ingersoll May 30th 1901</i>
Full name of Father.	<i>William Frederick Dickson</i>	<i>John Norman Lersey Summer</i>	<i>John Peter Nunn</i>
Address.	<i>Ingersoll</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Occupation.	<i>Machinist</i>	<i>Car Driver</i>	<i>Barber</i>
Maiden name of Mother.	<i>May Henrietta Jackson</i>	<i>Ethel May Bettman</i>	<i>Kate Minard</i>
Is she single or a widow?	<i>-</i>	<i>-</i>	<i>-</i>
Name of Physician in at- tendance.	<i>Dr. Williams</i>	<i>Dr. Ragen</i>	<i>Dr. Carrish</i>
Were you in house at time of Birth?	<i>Yes</i>	<i>Yes</i>	<i>No</i>
Twin, Triplets, Illegitimate or Still-born.	<i>-</i>	<i>-</i>	<i>-</i>
Name of Informant.	<i>W. F. Dickson</i>	<i>J. L. Summer</i>	<i>J. P. Nunn</i>
Address.	<i>Ingersoll</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Date of Return.	<i>Sept 21st 1915</i>	<i>Sept 27th 1915</i>	<i>Sept 27th 1915</i>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending *Sept 30th 1915*

Given under my hand this

day of

A. D. 19

Division Registrar of *Ingersoll*

P. O.

BIRTHS

Mildred frances gayer, john ernest gayer, eva mridia sudworth, john spence taylor,
lewis evelyn taylor, mabel spence, clayton robert adair, william john adair, jennie taylor,
donald clark buchanan, jameson verne buchanan, verna irene clark, donald george
coles, roy edward coles, elizabeth bell, helen bernice murray, james garfield murray,
mabel gertrude harris

County of Jefferson Division of Ingersoll

Surname of child.	Christian name.	Date of Birth.	Where born? Street number or Con- cession and Lot.	Sex.	Are the Parents married?	Where and when married.	Full name of Father.	Address.	Occupation.	Maiden name of Mother.	Is she single or a widow?	Name of Physician in at- tendance.	Were you in house at time of Birth?	Twin, Triplet, Illegitimate or Still-born.	Name of Informant.	Address.	Date of Return.
	<u>Mildred Francis</u>	<u>July 1st 1915</u>	<u>Ingersoll</u>	<u>Female</u>	<u>Yes</u>	<u>Ingersoll, June 1901</u>	<u>John Ernest Gayer</u>	<u>Ingersoll</u>	<u>Briggist</u>	<u>Ann Mildred Sudworth</u>	<u>-</u>	<u>Dr. Rogers</u>	<u>Yes</u>	<u>-</u>	<u>J. E. Gayer</u>	<u>Ingersoll</u>	<u>July 12th 1915</u>
	<u>Clayton Robert</u>	<u>June 14th 1915</u>	<u>Ingersoll</u>	<u>Male</u>	<u>Yes</u>	<u>Ingersoll, Mar 15th 1915</u>	<u>William John Adair</u>	<u>Ingersoll</u>	<u>holder</u>	<u>Jennie Taylor</u>	<u>-</u>	<u>Dr. McKay</u>	<u>Yes</u>	<u>-</u>	<u>W. J. Adair</u>	<u>Ingersoll</u>	<u>July 13th 1915</u>
	<u>Donald George</u>	<u>June 17th 1915</u>	<u>Ingersoll</u>	<u>Male</u>	<u>Yes</u>	<u>Jefferson Apt 12th 1912</u>	<u>Roy Edward Coles</u>	<u>Ingersoll</u>	<u>holder</u>	<u>Elizabeth Bell</u>	<u>-</u>	<u>Dr. Coulter</u>	<u>Yes</u>	<u>-</u>	<u>Roy E. Coles</u>	<u>Ingersoll</u>	<u>July 14th 1915</u>
	<u>John Spencer</u>	<u>June 21st 1915</u>	<u>Ingersoll</u>	<u>Male</u>	<u>Yes</u>	<u>Ingersoll, June 12th 1912</u>	<u>Lewis Evelyn Gayer</u>	<u>Ingersoll</u>	<u>Barryman</u>	<u>Mabel Spence</u>	<u>-</u>	<u>Dr. Coulter</u>	<u>Yes</u>	<u>-</u>	<u>L. E. Gayer</u>	<u>Ingersoll</u>	<u>July 14th 1915</u>
	<u>Donald Clarke</u>	<u>June 28th 1915</u>	<u>Ingersoll</u>	<u>Male</u>	<u>Yes</u>	<u>Washington Oct 23rd 1912</u>	<u>Jameson Verne Buchanan</u>	<u>Ingersoll</u>	<u>Manager</u>	<u>Genevieve Clarke</u>	<u>-</u>	<u>Dr. Williams</u>	<u>Yes</u>	<u>-</u>	<u>J. W. Buchanan</u>	<u>Ingersoll</u>	<u>July 20th 1915</u>
	<u>Helen Bernice</u>	<u>July 2nd 1915</u>	<u>Ingersoll</u>	<u>Female</u>	<u>Yes</u>	<u>Ingersoll Sept 11th 1914</u>	<u>James Garfield Murray</u>	<u>Ingersoll</u>	<u>Ch. Surgeon</u>	<u>Mabel Gertrude Harris</u>	<u>-</u>	<u>Dr. Rogers</u>	<u>No</u>	<u>-</u>	<u>J. G. Murray</u>	<u>Ingersoll</u>	<u>July 29th 1915</u>

BIRTHS

Herbert matthew reginald glazier, luella adaline bristol, freddie parrow, richard barrow, william kenneth taylor, william john taylor, martha dales, norma helen vanderburg, william doyle vanderberg, minnie may bean, joseph francis devlin, joseph devlin, eleanor jane shearon, isabel louise collins, william collins, wilhelmina davis

County of Jefferson Division of Sugarsville

	Surrogate Book	Surrogate Book	Surrogate Book
Surname of child.	Glazier	Taylor	Devlin
Christian name.	Herbert Matthew Reginald	William Kenneth	Joseph Francis
Date of Birth.	Nov 15th 1915	Nov 25th 1915	Nov 10th 1915
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Sugarsville	If in a hospital give its name Sugarsville	If in a hospital give its name Sugarsville
Sex.	Male	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Sugarsville, May 7th 1905	Sugarsville Mar 6th 1902	Sugarsville Nov 6th 1911
Full name of Father.	Herbert O. Glazier	William John Taylor	John Charles Devlin
Address.	Sugarsville	Sugarsville	Sugarsville
Occupation.	Laborer	Machinist	Blacksmith
Maiden name of Mother.	Luella Adaline Bristol	Martha Dales	Eleanor Jane Shearon
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Rogers	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triple, Illegitimate or Still-born.	-	-	-
Name of Informant.	Mrs Glazier	W. J. Taylor	J. C. Devlin
Address.	Sugarsville	Sugarsville	Sugarsville
Date of Return.	Dec 4th 1915	Dec 9th 1915	Dec 10th 1915
Surname of child.	Barrow	Wanderburg	Collins
Christian name.	Freddie	Norma Helen William Doyle	Isabel Marie
Date of Birth.	Nov 27th 1915	Dec 10th 1915	Nov 25th 1915
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Sugarsville	If in a hospital give its name Sugarsville	If in a hospital give its name Sugarsville
Sex.	-	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Sugarsville	Sugarsville Apr 17th 1912	London Aug 10th 1913
Full name of Father.	Richard Barrow	Wm Doyle Wanderburg	William H Collins
Address.	Sugarsville	Sugarsville	Sugarsville
Occupation.	Seaman	Blacksmith	Blacksmith
Maiden name of Mother.	Anna Hayward	Minnie May Bean	Wilhelmina Davidson
Is she single or a widow?	-	Widow	-
Name of Physician in at- tendance.	Dr. Combs	Dr. Rogers	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triple, Illegitimate or Still-born.	-	-	-
Name of Informant.	Richard Barrow	W. D. Wanderburg	W. H. Collins
Address.	Sugarsville	Sugarsville	Sugarsville
Date of Return.	Dec 22nd 1915	Dec 27th 1915	Dec 27th 1915

Constant constance may webb, waiter robert webb, charotte frances rouse rowse
 donna jean cameron, william henry cameron, clara telma lewis, jean margaret donald,
 irathebert donald, hazel miller, mary naylor, george naylor, mary nettie olmstead

BIRTHS

Schedule B.
 U.S.—Record all births as births,
 as well as deaths.

County of Jefferson Division of Ingersoll

Surname First	Surname First	Surname First
Surname of child, <u>Webb</u>	Surname of child, <u>Donald</u>	Surname of child, <u>Naylor</u>
Christian name, <u>Constance May</u>	Christian name, <u>Jean Margaret</u>	Christian name, <u>Mary</u>
Date of Birth, <u>Nov 20th 1915</u>	Date of Birth, <u>Nov 22nd 1915</u>	Date of Birth, <u>Dec 19th 1915</u>
Where born? <u>Meritt</u> If in a hospital give its name <u>Ingersoll</u>	Where born? <u>Alexander Hospital</u> If in a hospital give its name <u>Ingersoll</u>	Where born? <u>Meritt</u> If in a hospital give its name <u>Ingersoll</u>
Sex, <u>Female</u>	Sex, <u>Female</u>	Sex, <u>Female</u>
Are the Parents married? <u>Yes</u>	Are the Parents married? <u>Yes</u>	Are the Parents married? <u>Yes</u>
Where and when married, <u>Ingersoll Dec 2nd 1913</u>	Where and when married, <u>Weyburn Sept 22nd 1914</u>	Where and when married, <u>St Thomas April 10th 1907</u>
Full name of Father, <u>Walter Robert Webb</u>	Full name of Father, <u>Mrs William Donald</u>	Full name of Father, <u>George Naylor</u>
Address, <u>Ingersoll</u>	Address, <u>Windschayle</u>	Address, <u>Ingersoll</u>
Occupation, <u>Mechanic</u>	Occupation, <u>Farmer</u>	Occupation, <u>Merchant</u>
Maiden name of Mother, <u>Charlotte James Rouse</u>	Maiden name of Mother, <u>George Miller</u>	Maiden name of Mother, <u>Mary Nettie Olmstead</u>
Is she single or a widow? <u>-</u>	Is she single or a widow? <u>-</u>	Is she single or a widow? <u>-</u>
Name of Physician in attendance, <u>Dr. Williams</u>	Name of Physician in attendance, <u>Dr. Rogers</u>	Name of Physician in attendance, <u>Dr. Williams</u>
Were you in house at time of Birth? <u>No</u>	Were you in house at time of Birth? <u>Yes</u>	Were you in house at time of Birth? <u>Yes</u>
Twin, Triplet, Illegitimate or Still-born, <u>-</u>	Twin, Triplet, Illegitimate or Still-born, <u>-</u>	Twin, Triplet, Illegitimate or Still-born, <u>-</u>
Name of Informant, <u>W Webb</u>	Name of Informant, <u>Mrs D Donald</u>	Name of Informant, <u>George Naylor</u>
Address, <u>Ingersoll</u>	Address, <u>Windschayle</u>	Address, <u>Ingersoll</u>
Date of Return, <u>Dec 25th 1915</u>	Date of Return, <u>Dec 30th 1915</u>	Date of Return, <u>Dec 30th 1915</u>
Surname First	Surname First	Surname First
Surname of child, <u>Cameron</u>		
Christian name, <u>Joan</u>		
Date of Birth, <u>Dec 9th 1915</u>		
Where born? <u>Meritt</u> If in a hospital give its name <u>Ingersoll</u>	Where born? <u>Meritt</u> If in a hospital give its name	Where born? <u>Meritt</u> If in a hospital give its name
Sex, <u>Female</u>		
Are the Parents married? <u>Yes</u>		
Where and when married, <u>Ingersoll May 29/1913</u>		
Full name of Father, <u>William Henry Cameron</u>		
Address, <u>Ingersoll</u>		
Occupation, <u>Mechanic</u>		
Maiden name of Mother, <u>Caroline Helen Keelin</u>		
Is she single or a widow? <u>-</u>		
Name of Physician in attendance, <u>Dr. Williams</u>		
Were you in house at time of Birth? <u>Yes</u>		
Twin, Triplet, Illegitimate or Still-born, <u>-</u>		
Name of Informant, <u>W H Cameron</u>		
Address, <u>Ingersoll</u>		
Date of Return, <u>Dec 21st 1915</u>		

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1915
 Given under my hand this 4th day of January A.D. 1916

Division Registrar of W Webb
Ingersoll

P.O.

Thomas melvine pierce, thomas melvine pierce, della groscope, ronald william walker, william george walker, sadie holmes, william moran cragg, william edward norah margaret wilson, james egan, john egan, henrietta kelley, margaret lila bodswald reginald bodwell, ruby bell smith, edward searle, ada barnes.

Schedule B.
N.B.—Record all still-births as births, as well as deaths.

BIRTHS

County of *Offord*

Division of *Ingersoll*

	Surname First	Surname First	Surname First
Surname of child.	<i>Pierce</i>	<i>Cragg</i>	<i>Badenoch</i>
Christian name.	<i>Thomas Melvino</i>	<i>William Moran</i>	<i>Margaret Lila</i>
Date of Birth.	<i>Nov 1st 1915</i>	<i>Oct 14th 1915</i>	<i>Oct 19th 1915</i>
Where born? Street number or Concession and Lot.	<i>If in a hospital give its name Ingersoll</i>	<i>If in a hospital give its name Ingersoll</i>	<i>If in a hospital give its name Ingersoll</i>
Sex.	<i>Male</i>	<i>Male</i>	<i>Female</i>
Are the Parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
When and when married.	<i>Maryland Aug 24th 1910</i>	<i>Ingersoll Sept 12th 1911</i>	<i>Wt Elton Dec 12th 1906</i>
Full name of Father.	<i>Thomas Melvino Pierce</i>	<i>William Edward Cragg</i>	<i>Ronald Reynold Badenoch</i>
Address.	<i>Ingersoll</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Occupation.	<i>Mechanic</i>	<i>Accountant</i>	<i>Farmer</i>
Maiden name of Mother.	<i>Della Groscope</i>	<i>Norah Margaret Wilson</i>	<i>Ruby Bell Smith</i>
Is she single or a widow?	<i>-</i>	<i>-</i>	<i>-</i>
Name of Physician in attendance.	<i>Dr. Carrish</i>	<i>Dr. Williams</i>	<i>Dr. Williams</i>
Were you in house at time of Birth?	<i>Yes</i>	<i>Yes</i>	<i>No</i>
Twin, Triplet, Illegitimate or Still-born.	<i>-</i>	<i>-</i>	<i>-</i>
Name of Informant.	<i>Mrs O Ramsay</i>	<i>W E Cragg</i>	<i>Dr Badenoch</i>
Address.	<i>Ingersoll</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Date of Return.	<i>Nov 24th 1915</i>	<i>Nov 24th 1915</i>	<i>Nov 24th 1915</i>
Surname First	<i>Walker</i>	<i>Egan</i>	<i>Searle</i>
Christian name.	<i>Ronald William</i>	<i>James B.</i>	<i>Edward</i>
Date of Birth.	<i>Oct 31st 1915</i>	<i>Nov 10th 1915</i>	<i>Nov 19th 1915</i>
Where born? Street number or Concession and Lot.	<i>James St If in a hospital give its name Ingersoll</i>	<i>If in a hospital give its name Ingersoll</i>	<i>James St If in a hospital give its name Ingersoll</i>
Sex.	<i>Male</i>	<i>Male</i>	<i>Male</i>
Are the Parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
When and when married.	<i>Ingersoll, Jan 26th 1912</i>	<i>Maud Street July 10th 1910</i>	<i>Ingersoll July 14th 1910</i>
Full name of Father.	<i>William Henry Walker</i>	<i>John Egan</i>	<i>Edward Searle</i>
Address.	<i>Ingersoll</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Occupation.	<i>Baker</i>	<i>Wood Worker</i>	<i>Painter</i>
Maiden name of Mother.	<i>Sadie Holmes</i>	<i>Henrietta Kelley</i>	<i>Ada Barnes</i>
Is she single or a widow?	<i>-</i>	<i>-</i>	<i>-</i>
Name of Physician in attendance.	<i>Dr. Furlong</i>	<i>Dr. Williams</i>	<i>Dr. Camlin</i>
Were you in house at time of Birth?	<i>Yes</i>	<i>Yes</i>	<i>No</i>
Twin, Triplet, Illegitimate or Still-born.	<i>-</i>	<i>-</i>	<i>-</i>
Name of Informant.	<i>W. H. Walker</i>	<i>John Egan</i>	<i>E. Searle</i>
Address.	<i>Ingersoll</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Date of Return.	<i>Nov 25th 1915</i>	<i>Nov 29th 1915</i>	<i>Nov 30th 1915</i>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending *Dec 31st 1915* day of *January* A.D. 19 *16*.
 Given under my hand this *4th* day of *January* 1916.
 Division Registrar of *Ingersoll*

P.O.

BIRTHS

Janet rothwell thompson, loyst hargan elnora, margaret elnora hearn, violet pearl eva petrie, harry james petrie, vera blanch marie empey, charles bruce ward stephenson, charles milton stephenson, mary dorothy graydon, eleanor agnes wood, frederick thomas wood, ellen kemp jarrett, violet rene webb, albert webb, florence thomas, james george wright, james henry wright, mary elizabeth cook

Schedule B.
To be filled out for all still-borns as births,
as well as deaths.

County of Jefferson Division of Ingersoll

	Surname first	Surname first	Surname first
Forename of child	Shawson	Stephenson	Uebel
Christian name	James Barthwell	Charles Bruce Beard	Violet Irene
Date of Birth	Nov 21st 1915	Nov 12th 1915	Aug 24th 1915
Where born?	In a hospital give its name	In a hospital give its name	In a hospital give its name
Sex	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married	Ingersoll, June 5th 1912	Cumland Jan 10th	Ingersoll Dec 24th 1913
Full name of Father	Leahy George Shawson	Charles Milton Stephenson	Albert Uebel
Address	Ingersoll	Ingersoll	Ingersoll
Occupation	Shipping Clerk	Machinist	Blacksmith
Maiden name of Mother	Margaret Elnora Hearn	Mary Dorothy Graydon	Gertrude Thomas
Is she single or a widow?	-	-	-
Name of Physician in attendance	Dr Rogers	Dr Carnish	Dr Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born	-	-	-
Name of Informant	W. H. Shawson	W. M. Stephenson	W. Uebel
Address	Ingersoll	Ingersoll	Ingersoll
Date of Return	Dec 1st 1915	Dec 1st 1915	Dec 2nd 1915
Forename of child	Beatrice	Uebel	Wright
Christian name	Violet Beatrice	Eleanor Agnes	James George
Date of Birth	Nov 14th 1915	Nov 17th 1915	Nov 15th 1915
Where born?	At home	In a hospital give its name	In a hospital give its name
Sex	Female	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married	Ingersoll, Oct 5th 1915	England, July 11th 1902	England, Nov 2nd 1904
Full name of Father	Henry James Beatrice	Frederick Thomas Uebel	James Henry Wright
Address	Ingersoll	Ingersoll	Ingersoll
Occupation	Machinist	Blacksmith	Blacksmith
Maiden name of Mother	Vera Blanch Marie Empey	Ellen Kemp Jarrett	Mary Elizabeth Cook
Is she single or a widow?	-	-	-
Name of Physician in attendance	Dr. Carnish	Dr. Williams	Dr. Carnish
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born	-	-	-
Name of Informant	W. J. Beatrice	Green H. Uebel	J. H. Wright
Address	Ingersoll	Ingersoll	Ingersoll
Date of Return	Dec 6th 1915	Dec 6th 1915	Dec 7th 1915

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1915
 Given under my hand this 4th day of January A.D. 1916
 Division Registrar of Ingersoll P.O.

BIRTHS

Ethel may oliver, john oliver, mary irwin, lawrence william roper eliott, jessie eliott, florence elizabeth roper, gordon oscar fanton, mabel stenabaugh, w. plepek, edward christian pipar, agnes koeller koellen, irma elizabeth hull, raymond beamer hull, margaret jane stuart, james louden, emily alice woodroffe.

County of Offord Division of Ingersoll

	Surname first	Surname first	Surname first
Surname of child	Oliner	Finton	Hurt
Christian name	Whit May	Harold Oscar	Jane Elizabeth
Date of Birth	Nov 1st 1915	Oct 14th 1915	Oct 19th 1915
Where born? Street number or Concession and Lot	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married	Ingersoll Mar 27th 1912	Ingersoll Mar 31st	Ingersoll June 2nd 1902
Full name of Father	John Oliner	W Oscar Finton	Raymond Beamer Hurt
Address	Ingersoll	Ingersoll	Ingersoll
Occupation	Labourer	Labourer	Superintendent
Maiden name of Mother	Mary Anne	Mabel Stenabaugh	Margaret Jane Stewart
Is she single or a widow?	-	-	-
Name of Physician in attendance	Dr. Williams	Dr. Williams	Dr. Rogers
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born	-	-	-
Name of Informant	John Oliner	W O Finton	Robert
Address	Ingersoll	Ingersoll	Ingersoll
Date of Return	Nov 12th 1915	Nov 15th 1915	Nov 15th 1915
Surname of child	Elliatt	Bieper	Hamilton
Christian name	Laurence William Roper	William Blair	James
Date of Birth	Nov 1st 1915	Nov 5th 1915	Oct 30th 1915
Where born? Street number or Concession and Lot	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex	Male	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married	England Dec 2nd 1901	Sten-Alton Dec 14th 1912	Ingersoll Apr 26th 1913
Full name of Father	James Henry Elliatt	Edmond Christian Bieper	James Hamilton
Address	Conant Corner, Alta	Ingersoll	Ingersoll
Occupation	Farmer	Contractor	Machinist
Maiden name of Mother	Jane Elizabeth Roper	Agnes Koellen	Emily Alice Woodroffe
Is she single or a widow?	-	-	-
Name of Physician in attendance	Dr. Cameron	Dr. Williams	Dr. Furlong
Were you in house at time of Birth?	Yes	No	Yes
Twin, Triplet, Illegitimate or Still-born	-	-	-
Name of Informant	George W Bieper	G. B. Bieper	James Hamilton
Address	Ingersoll	Ingersoll	Ingersoll
Date of Return	Nov 19th 1915	Nov 24th 1915	Nov 24th 1915

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1915
 Given under my hand this 4th day of January A.D. 1916
 Division Registrar of Ingersoll W. B. Bieper P.O.

BIRTHS

George Thomas Palar, Della Jessie Emerick, Eben Angus Lee,
 Helen Winifred Metherell, Agnes Whitlaw Adams, John Adams, Gladys
 Lee, Lawrence William Lee, Ella Wilhelmina Oke, Jessie Agnes Mullins, Humphrey
 Mullins, Helen Louder London

County of Jefferson

Division of Ingersoll

	Surname Birth	Surname Birth	Surname Birth
Surname of child.	O'Brien	horne	lee
Christian name.	Jean Elizabeth	Robert Angus	Bernice Elene
Date of Birth.	Sept 11th 1915	Sept 16th 1915	Sept 14th 1915
Where born? Street number or Con- cession and Loc.	In a hospital give the name Ingersoll	In a hospital give the name Ingersoll	In a hospital give the name Ingersoll
Sex.	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Sancti Jan 25th 1914	Burlington Jan 4th 1907	Union. June 26th 1912
Full name of Father.	James Charles O'Brien	Abram Thomas Horne	Lawrence William Lee
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Restaurant	Bank Manager	Beam Maker
Maiden name of Mother.	Jessie Edith Williams	Helen Winifred Metherell	Ella Wilhelmina Oke
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr Williams	Dr Williams	Dr Williams
Were you in house at time of Birth?	Yes	No	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	J. O'Brien	O S Horne	L W Lee
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Oct 5th 1915	Oct 6th 1915	Oct 6th 1915
Surname Birth	Surname Birth	Surname Birth	
Surname of child.	Bailer	Adams	Mullin
Christian name.	George Henry	Agnes Whitlaw	Jessie Agnes
Date of Birth.	Sept 23rd 1915	Sept 14th 1915	Sept 6th 1915
Where born? Street number or Con- cession and Loc.	In a hospital give the name Ingersoll	In a hospital give the name Ingersoll	In a hospital give the name Ingersoll
Sex.	Male	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	London June 25th 1912	Ingersoll Oct 23rd 1914	Ingersoll Jan 5th 1912
Full name of Father.	George Thomas Bailer	John Adams	Humphrey Patrick Mullin
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Painter	Engineer	Soldier
Maiden name of Mother.	Ella Jessie Edith Oke	Martha Martin	Helen Horner
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr Carmack	Dr Burlang	Dr Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	O S Bailer	John Adams	Helen Mullin
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Oct 7th 1915	Oct 9th 1915	Oct 12th 1915

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1915
 Given under my hand this 4th day of January A.D. 1916
 Division Registrar of Ingersoll
 Wabunish

BIRTHS

Berna jane louise foley, frank bernard foley, willet may henry, mabel jean garner, robert daniel, luella lampkin, elna helen barton, ernest barton, mary etha garner, james mckay shearon, edward shearon, lottie titus, jean maxine mckay, henry mckay, crane, mabel jean garner, william henry garner, frances coreless cortez.

County of Jefferson Division of Englewood

Surname First	Surname First	Surname First
<p>Surname of child. <u>Foley</u></p> <p>Christian name. <u>Berna Jane Bernice</u></p> <p>Date of Birth. <u>Sept 11th 1915</u></p> <p>Where born? <u>It is a hospital give its name Englewood</u></p> <p>Sex. <u>Female</u></p> <p>Are the Parents married? <u>Yes</u></p> <p>Where and when married. <u>Mountain June 1st 1914</u></p> <p>Full name of Father. <u>Frank Bernard Foley</u></p> <p>Address. <u>Englewood</u></p> <p>Occupation. <u>Manufacturer</u></p> <p>Maiden name of Mother. <u>Viola May Henry</u></p> <p>Is she single or a widow? <u>-</u></p> <p>Name of Physician in attendance. <u>Dr. Rogers</u></p> <p>Were you in house at time of Birth? <u>Yes</u></p> <p>Twin, Triplet, Illegitimate or Still-born. <u>-</u></p> <p>Name of Informant. <u>Frank B. Foley</u></p> <p>Address. <u>Englewood</u></p> <p>Date of Return. <u>Oct 13th 1915</u></p>	<p>Surname First <u>Barton</u></p> <p>Christian name. <u>Robert Elmer Keller</u></p> <p>Date of Birth. <u>Oct 5th 1915</u></p> <p>Where born? <u>It is a hospital give its name Englewood</u></p> <p>Sex. <u>Female</u></p> <p>Are the Parents married? <u>Yes</u></p> <p>Where and when married. <u>Beachville Dec 23rd 1914</u></p> <p>Full name of Father. <u>Ernest Barton</u></p> <p>Address. <u>Beachville</u></p> <p>Occupation. <u>Farmer</u></p> <p>Maiden name of Mother. <u>Mary Etta Bailey</u></p> <p>Is she single or a widow? <u>-</u></p> <p>Name of Physician in attendance. <u>Dr. Carnish</u></p> <p>Were you in house at time of Birth? <u>Yes</u></p> <p>Twin, Triplet, Illegitimate or Still-born. <u>-</u></p> <p>Name of Informant. <u>Mrs. E. Barton</u></p> <p>Address. <u>Beachville</u></p> <p>Date of Return. <u>Oct 19th 1915</u></p>	<p>Surname First <u>Mckay</u></p> <p>Christian name. <u>Jean Maxine</u></p> <p>Date of Birth. <u>Oct 7th 1915</u></p> <p>Where born? <u>It is a hospital give its name Englewood</u></p> <p>Sex. <u>Female</u></p> <p>Are the Parents married? <u>Yes</u></p> <p>Where and when married. <u>Englewood 1913</u></p> <p>Full name of Father. <u>Henry Drake Mckay</u></p> <p>Address. <u>Englewood</u></p> <p>Occupation. <u>Labourer</u></p> <p>Maiden name of Mother. <u>Alice Crane</u></p> <p>Is she single or a widow? <u>-</u></p> <p>Name of Physician in attendance. <u>Dr. Carnish</u></p> <p>Were you in house at time of Birth? <u>Yes</u></p> <p>Twin, Triplet, Illegitimate or Still-born. <u>-</u></p> <p>Name of Informant. <u>Maudie Bellis</u></p> <p>Address. <u>St. James</u></p> <p>Date of Return. <u>Oct 19th 1915</u></p>
<p>Surname of child. <u>Daniel</u></p> <p>Christian name. <u>Mabel Wanda</u></p> <p>Date of Birth. <u>Sept 24th 1915</u></p> <p>Where born? <u>It is a hospital give its name Englewood</u></p> <p>Sex. <u>Female</u></p> <p>Are the Parents married? <u>Yes</u></p> <p>Where and when married. <u>Englewood May 21st 1908</u></p> <p>Full name of Father. <u>William Robert Daniel</u></p> <p>Address. <u>Englewood</u></p> <p>Occupation. <u>Restaurant</u></p> <p>Maiden name of Mother. <u>Luella Lampkin</u></p> <p>Is she single or a widow? <u>-</u></p> <p>Name of Physician in attendance. <u>Dr. Carnish</u></p> <p>Were you in house at time of Birth? <u>Yes</u></p> <p>Twin, Triplet, Illegitimate or Still-born. <u>-</u></p> <p>Name of Informant. <u>Luella Daniel</u></p> <p>Address. <u>Englewood</u></p> <p>Date of Return. <u>Oct 20th 1915</u></p>	<p>Surname First <u>Shearon</u></p> <p>Christian name. <u>Left James Henry</u></p> <p>Date of Birth. <u>Sept 22nd 1915</u></p> <p>Where born? <u>It is a hospital give its name Englewood</u></p> <p>Sex. <u>Male</u></p> <p>Are the Parents married? <u>Yes</u></p> <p>Where and when married. <u>Wheaton July 24th 1907</u></p> <p>Full name of Father. <u>Edward Shearon</u></p> <p>Address. <u>Englewood</u></p> <p>Occupation. <u>Labourer</u></p> <p>Maiden name of Mother. <u>Lottie Titus</u></p> <p>Is she single or a widow? <u>-</u></p> <p>Name of Physician in attendance. <u>Dr. Gurdary</u></p> <p>Were you in house at time of Birth? <u>Yes</u></p> <p>Twin, Triplet, Illegitimate or Still-born. <u>-</u></p> <p>Name of Informant. <u>Edward Shearon</u></p> <p>Address. <u>Englewood</u></p> <p>Date of Return. <u>Oct 20th 1915</u></p>	<p>Surname First <u>Garner</u></p> <p>Christian name. <u>Mabel Jean</u></p> <p>Date of Birth. <u>Sept 23rd 1915</u></p> <p>Where born? <u>It is a hospital give its name Englewood</u></p> <p>Sex. <u>Female</u></p> <p>Are the Parents married? <u>Yes</u></p> <p>Where and when married. <u>Beachville Dec 23rd 1914</u></p> <p>Full name of Father. <u>William Henry Garner</u></p> <p>Address. <u>Englewood</u></p> <p>Occupation. <u>Manufacturer</u></p> <p>Maiden name of Mother. <u>Frances Coreless</u></p> <p>Is she single or a widow? <u>-</u></p> <p>Name of Physician in attendance. <u>Dr. Williams</u></p> <p>Were you in house at time of Birth? <u>No</u></p> <p>Twin, Triplet, Illegitimate or Still-born. <u>-</u></p> <p>Name of Informant. <u>William Garner</u></p> <p>Address. <u>Englewood</u></p> <p>Date of Return. <u>Oct 25th 1915</u></p>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1915
 Given under my hand this 4th day of January A.D. 19 1916
 Division Registrar of Englewood W. Carnish P.O.

BIRTHS

George Albert Thomson, Katie Rachel Smith, Elizabeth Stevens, Gertrude Elizabeth Annis, Albert Ingham, James Albert Bristol, Albert Bristol, Martha Little

It is required all still-births as births, as well as deaths.

County of Windsor

Division of Ingersoll

	Surname First	Surname First	Surname First
Surname of child.	Leaman	Thomson	Durrant
Christian name.	Marion Ingersoll	Anderson Charles	Kentilde Elizabeth Dennis
Date of Birth.	Sept 20th 1915	Oct 5th 1915	Oct 2nd 1915
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingersoll Sept 1st 1913	Ingersoll Aug 27th 1904	Alfingen, Sept 2nd 1909
Full name of Father.	Henry William Leaman	George Albert Thomson	Ernest Ralph Durrant
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Printer	Caretaker	Soldier
Maiden name of Mother.	Anna Helena McMillan	Katie Rachel Knapp	Georget Ingham
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Williams	Dr. Williams
Were you in house at time of Birth?	No	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	H. J. Leaman	Mrs. G. A. Thomson	Mrs. E. R. Durrant
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Oct 25th 1915	Nov 1st 1915	Nov 2nd 1915
	Surname First	Surname First	Surname First
Surname of child.	Mason	Smith	Bristol
Christian name.	Helena Madeline	Annie Elizabeth	James Albert
Date of Birth.	Oct 2nd 1915	Sept 23rd 1915	Sept 30th 1915
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Female	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Mitchell 16th Sept 1899	England Mar 22nd 1910	England Dec 24th 1905
Full name of Father.	John Mason	Samuel James Smith	Albert Bristol
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Shipper	Soldier	Soldier
Maiden name of Mother.	Annie Elizabeth Knatch	Elizabeth Stevens	Martha Little
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Payer	Dr. Williams	Dr. Gurland
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Vera Mason	Mrs. G. J. Smith	Albert Bristol
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Nov 4th 1915	Nov 9th 1915	Nov 9th 1915

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1915

GIVEN under my hand this 4th day of January A.D. 1916
Division Registrar of Ingersoll

W. A. Smith

P.O.

BIRTHS

Dorothy gwendolene cook, robert cook, mary gertrude jones, cecilia edward
edward henry albright, berthia jean brassington, john adams, martha ma
louise cavall pellow, charles joseph pellow, margaret jane stude, bauer,
albright, edward henry albright, berthia jean brassington.

County of Jefferson

Division of Ingersoll

Surname first	Surname first	Surname first
<p>Surname of child. <u>Leah</u></p> <p>Christian name. <u>Dorothy Gwendolene</u></p> <p>Date of Birth. <u>Sept 2nd 1916</u></p> <p>Where born? <u>Home</u></p> <p>Street number or Con- cession and Lot. <u>If in a hospital give its name Ingersoll</u></p> <p>Sex. <u>Female</u></p> <p>Are the Parents married? <u>Yes</u></p> <p>Where and when married. <u>Chicago 1908</u></p> <p>Full name of Father. <u>Robert Leah</u></p> <p>Address. <u>Ingersoll</u></p> <p>Occupation. <u>Mechanic</u></p> <p>Maiden name of Mother. <u>Mary Gertrude Jones</u></p> <p>Is she single or a widow? <u>-</u></p> <p>Name of Physician in at- tendance. <u>Dr. Lumbie</u></p> <p>Were you in house at time of Birth? <u>Yes</u></p> <p>Twin, Triplet, Multiplet or Still-born. <u>-</u></p> <p>Name of Informant. <u>Robert Leah</u></p> <p>Address. <u>Ingersoll</u></p> <p>Date of Return. <u>Sept 19th 1916</u></p>	<p>Surname first</p> <p>Surname of child. <u>Adams</u></p> <p>Christian name. <u>John</u></p> <p>Date of Birth. <u>Aug 27th 1916</u></p> <p>Where born? <u>Home</u></p> <p>Street number or Con- cession and Lot. <u>If in a hospital give its name Ingersoll</u></p> <p>Sex. <u>Male</u></p> <p>Are the Parents married? <u>Yes</u></p> <p>Where and when married. <u>Ingersoll, Oct 2nd 1914</u></p> <p>Full name of Father. <u>John Adams</u></p> <p>Address. <u>Ingersoll</u></p> <p>Occupation. <u>Martha Martin + Engineer +</u></p> <p>Maiden name of Mother. <u>Berthia Jean Brassington</u></p> <p>Is she single or a widow? <u>-</u></p> <p>Name of Physician in at- tendance. <u>Dr. Furlong</u></p> <p>Were you in house at time of Birth? <u>Yes</u></p> <p>Twin, Triplet, Multiplet or Still-born. <u>-</u></p> <p>Name of Informant. <u>John Adams</u></p> <p>Address. <u>Ingersoll</u></p> <p>Date of Return. <u>Sept 20th 1916</u></p>	<p>Surname first</p> <p>Surname of child. <u>Allerbaugh</u></p> <p>Christian name. <u>Carl Margaret</u></p> <p>Date of Birth. <u>Sept 2nd 1916</u></p> <p>Where born? <u>Alexandra Hospital</u></p> <p>Street number or Con- cession and Lot. <u>If in a hospital give its name Ingersoll</u></p> <p>Sex. <u>Female</u></p> <p>Are the Parents married? <u>Yes</u></p> <p>Where and when married. <u>Ingersoll, Dec 1st 1915</u></p> <p>Full name of Father. <u>Edward Henry Allerbaugh</u></p> <p>Address. <u>Ingersoll</u></p> <p>Occupation. <u>Inspector of Shells</u></p> <p>Maiden name of Mother. <u>Berthia Jean Brassington</u></p> <p>Is she single or a widow? <u>-</u></p> <p>Name of Physician in at- tendance. <u>Dr. Carnish</u></p> <p>Were you in house at time of Birth? <u>Yes</u></p> <p>Twin, Triplet, Multiplet or Still-born. <u>Single</u></p> <p>Name of Informant. <u>W. S. Hooper</u></p> <p>Address. <u>Ingersoll</u></p> <p>Date of Return. <u>Sept 26th 1916</u></p>
<p>Surname first</p> <p>Surname of child. <u>Allerbaugh</u></p> <p>Christian name. <u>Cecil Edward</u></p> <p>Date of Birth. <u>Sept 2nd 1916</u></p> <p>Where born? <u>Alexandra Hospital</u></p> <p>Street number or Con- cession and Lot. <u>If in a hospital give its name Ingersoll</u></p> <p>Sex. <u>Male</u></p> <p>Are the Parents married? <u>Yes</u></p> <p>Where and when married. <u>Ingersoll, Dec 1st 1915</u></p> <p>Full name of Father. <u>Edward Henry Allerbaugh</u></p> <p>Address. <u>Ingersoll</u></p> <p>Occupation. <u>Inspector of Shells</u></p> <p>Maiden name of Mother. <u>Berthia Jean Brassington</u></p> <p>Is she single or a widow? <u>-</u></p> <p>Name of Physician in at- tendance. <u>Dr. Carnish</u></p> <p>Were you in house at time of Birth? <u>Yes</u></p> <p>Twin, Triplet, Multiplet or Still-born. <u>Single</u></p> <p>Name of Informant. <u>W. S. Hooper</u></p> <p>Address. <u>Ingersoll</u></p> <p>Date of Return. <u>Sept 26th 1916</u></p>	<p>Surname first</p> <p>Surname of child. <u>Bellaw</u></p> <p>Christian name. <u>Margaret Louise</u></p> <p>Date of Birth. <u>Aug 30th 1916</u></p> <p>Where born? <u>Home</u></p> <p>Street number or Con- cession and Lot. <u>If in a hospital give its name Ingersoll</u></p> <p>Sex. <u>Female</u></p> <p>Are the Parents married? <u>Yes</u></p> <p>Where and when married. <u>London, June 19th 1909</u></p> <p>Full name of Father. <u>Charles Joseph Bellaw</u></p> <p>Address. <u>Ingersoll</u></p> <p>Occupation. <u>Operator</u></p> <p>Maiden name of Mother. <u>Margaret Jane Stadelbauer</u></p> <p>Is she single or a widow? <u>-</u></p> <p>Name of Physician in at- tendance. <u>Dr. Rogers</u></p> <p>Were you in house at time of Birth? <u>Yes</u></p> <p>Twin, Triplet, Multiplet or Still-born. <u>-</u></p> <p>Name of Informant. <u>W. S. Hooper</u></p> <p>Address. <u>Ingersoll</u></p> <p>Date of Return. <u>Sept 29th 1916</u></p>	<p>Surname first</p>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1916
Given under my hand this 12th day of Oct A.D. 1916

Division Registrar of

Ingersoll

W. S. Hooper

BIRTHS

Vincent bernard bryson, michael roy bryson, arthur harry duboy, ephraim laird duboy,
clara hadjkinson, jonathan frank moultan, minnie bond, paul edward martin, clarence
william martin, ida woodrum, margaret young, harry young, mabel margaret russell,
dorothy helen houghton, frank edward walker houghton, alice edna thompson.

County of Jefferson Division of Ingersoll

	Surname First	Surname First	Surname First
Surname of child.	Bryson	Moultan	Young
Christian name.	Vincent Bernard	Jonathan Frank	Margaret Edna
Date of Birth.	Dec 21st 1915	Jan 15th 1916	Jan 17th 1916
Where born? Street number or Con- cession and Lot.	Home If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Washburn, Aug 16th 1913	Ingersoll, Sept 10th 1913	Ingersoll, Sept 29th 1915
Full name of Father.	Michael Roy Bryson	Frank W Moultan	Harry Young
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Mechanic	Mechanic	laborer
Maiden name of Mother.	Grace K Carter	Minnie J Bond	Mabel Margaret Russell
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Larnick	Dr. Larnick	Dr. Rogers
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	W. R. Bryson	F. W. Moultan	Harry Young
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Jan 27th 1916	Feb 2nd 1916	Feb 2nd 1916
	Surname First	Surname First	Surname First
Surname of child.	Duboy	Martin	Houghton
Christian name.	Arthur Harry	Paul Edward	Dorothy Helen
Date of Birth.	Jan 7th 1916	July 2nd 1916	July 2nd 1916
Where born? Street number or Con- cession and Lot.	Home If in a hospital give its name Ingersoll	Home If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	England, July 21st 1895	Frankfort, Ind, June 1st 1912	Frank Edward Walker Houghton Ingersoll, Mar 2nd 1913
Full name of Father.	Ephraim Laird Duboy	Clarence William Martin	Ingersoll, Mar 2nd 1913
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	laborer	Fireman	laborer
Maiden name of Mother.	Clara Edna Russell	Ada Weadrum	Oliver Annie Thompson
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Williams	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	No
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Mrs. C. H. Duboy	C. W. Martin	F. E. W. Houghton
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	July 2nd 1916	July 5th 1916	July 5th 1916

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1916
Given under my hand this 5th day of April A.D. 1916
Division Registrar of Ingersoll P.O.

W. R. Larnick

BIRTHS

Margaret helen banbury, richard henry banbury, mina mibra pearl procurier, george lindsay, william lindsay, rose wilford, lloyd john cook, joe ramford cooke, mary alice clarkson,inez lorene butler, irvin butler, edna may harris, elsie leone scott, ernest frederick scott, myrtle phillips, joseph ignatius mesherry, lous frederick mesherry, mary j Burns.

County of Jefferson Division of Ingersoll

	Surname first	Surname first	Surname first
Surname of child.	Banbury	Coake	Beatt
Christian name.	Margaret Helen	Blayds John	Elsie Helen
Date of Birth.	Jan 31st 1916	July 2nd 1916	Jan 30th 1916
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingersoll July 2nd 1912	Detroit Jan 7th 1913	Smithfield Ingersoll
Full name of Father.	Richard Henry Banbury	Joe Ramford Coake	Ingersoll July 23rd 1912
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Farmer Dressmaker	Mechanic	Mechanic
Maiden name of Mother.	Mina Pearl Anderson	Mary Alice Clarkson	Myrtle Phillips
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Gurland	Dr. Williams	Dr. Coulter
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Wife & Newspaper	J R Coake	E J Beatt
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	July 1st 1916	July 6th 1916	July 14th 1916
	Surname first	Surname first	Surname first
Surname of child.	Lindsay	Butler	Mesherry
Christian name.	George	Inez Haren	Joseph Ignatius
Date of Birth.	July 6th 1916	Jan 11th 1916	Jan 27th 1916
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Male	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Hamilton July 4th 1913	Ingersoll General 1910	Ingersoll Sept 7th 1909
Full name of Father.	William Lindsay	Irvin Butler	Joseph Ignatius Mesherry
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Mechanic	Carpenter	Driver
Maiden name of Mother.	Rose Wilford	Edna May Harris	Mary J Burns
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Coulter	Dr. Rogers	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	John Wilford	Irvin Butler	E J Mesherry
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	July 14th 1916	July 15th 1916	July 16th 1916

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1916
 Given under my hand this 4th day of April A.D. 1916
 Division Registrar of Ingersoll

BIRTHS

Gordon Johnston, thomas johnston, eliza farrow ferrow, james edward turk, albert colman coleman turk, mary simpson, florence mildred craig, arthur craig, rosetta underhill, jeane lucilla borland, john borland, lizzie may bell, isabel grace meeks, thomas john meeks, eleanor elizabeth reeves, gertrude alice jennie spittal, thomas thymér spittal, annie dorothy wright.

County of Jefferson Division of Jagersall

	Surname first	Surname first	Surname first
Surname of child.	Jermolan	Craig	Meeks
Christian name.	Garland	Genevieve Mildred	Isabel Grace
Date of Birth.	July 1st 1916	Jan 20th 1916	July 21st 1916
Where born? Street number or Con- cession and Lot.	<i>any</i> If in a hospital give its name Jagersall	If in a hospital give its name Jagersall	Albion Hospital If in a hospital give its name Jagersall
Sex.	Male	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Seattle 1910	Jagersall Oct 12th 1904	New Seaside Aug 7th 1911
Full name of Father.	Thomas S. Jermolan	Arthur W. Craig	Thomas John Meeks
Address.	Jagersall	Jagersall	Jagersall
Occupation.	Plumber	Machinist	Salvation Army Officer
Maiden name of Mother.	Eliza Farrow	Rosetta Underhill	Eleanor Elizabeth Reeves
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Furlong	Dr. Furlong	Dr. Canfield
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still born	-	-	-
Name of Informant.	Mrs S. Jermolan	Mrs W. W. Craig	Mrs S. J. Meeks
Address.	Jagersall	Jagersall	Jagersall
Date of Return.	July 16th 1916	July 19th 1916	July 24th 1916
	Surname first	Surname first	Surname first
Surname of child.	Turk	Borland	Spittal
Christian name.	James Edward	Genevieve	Bertrude Alice Jennie
Date of Birth.	July 27th 1916	July 19th 1916	July 25th 1916
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Jagersall	If in a hospital give its name Jagersall	Meeks If in a hospital give its name Jagersall
Sex.	Male	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Jagersall 1903	Washlae 1902	Jagersall May 26th 1915
Full name of Father.	Albert Nelson Turk	John Borland	Thomas Rhymen Spittal
Address.	Jagersall	Jagersall	Jagersall
Occupation.	Barber	Machinist	Barber
Maiden name of Mother.	Mary Simpson	Lizzie May Bell	Annie Dorothy Wright
Is she single or a widow?	-	-	-
Name of Physician in at- tendance	Dr. Lambert	Dr. Williams	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Mrs W. L. Turke	John Borland	Mrs R. Spittal
Address.	Jagersall	Jagersall	Jagersall
Date of Return.	July 26th 1916	July 24th 1916	Mar 4th 1916

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1916
 Given under my hand this 4th day of April A.D. 1916
 Division Registrar of Jagersall P.O.

John gilbert payne, edwin payner, angela margaret clear, hubert robert cole, margaret ball, patricia corke, reginald corke, ellen o'meara, frederick camm conn, george camm, mirnie Postlewaite, kenneth norman mcdonald, albert boyce mcdonald, alice may stephenson, ralph elwood wright, robert wright, rose holby

BIRTHS

Schedule B.
H. B. - Record all still-births as births, as well as deaths.

County of Alford Division of Englewood

	Surname First	Surname First	Surname First
Surname of child.	Bayne	Carke Patricia	McDonnell
Christian name.	John Willbert	Thomas	Kenneth Norman
Date of Birth.	Dec 11th 1915	Dec 25th 1915	Dec 23rd 1915
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Englewood	If in a hospital give its name Englewood	If in a hospital give its name Englewood
Sex.	Male	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Englewood Nov 4th 1911	Englewood Nov 13th 1912	Springfield June 7th 1909
Full name of Father.	Edwin Bayne	Reginald Carke	Albert Boyce McDonnell
Address.	Englewood	Englewood	Englewood
Occupation.	Mechanic	Carpenter	Mechanic
Maiden name of Mother.	Angela Margaret Clear	Ellen O'Meara	Alice May Stephenson
Is she single or a widow?	Married	-	-
Name of Physician in at- tendance.	Dr. Furlong	Dr. Rogers	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Mrs Edwin Bayne	Reginald Carke	Albert McDonnell
Address.	Englewood	Englewood	Englewood
Date of Return.	Jan 11th 1916	Jan 5th 1916	Jan 19th 1916
Surname First	Cole	Camm	Wright
Christian name.	Hubert Robert	Frederick M	Ralph Elwood
Date of Birth.	Jan 4th 1916	Jan 15th 1916	Dec 26th 1915
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Englewood	If in a hospital give its name Englewood	If in a hospital give its name Englewood
Sex.	Male	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Englewood Aug 4th 1907	Sanaula July 1914	Springfield Feb 7th 1903
Full name of Father.	Harry Samuel Cole	George Camm	Robert M Wright
Address.	Englewood	Englewood	Englewood
Occupation.	Mail Carrier	Labourer	Mechanic
Maiden name of Mother.	Margaret Ball	Winnie Oakeshott	Rose Healthy
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Lumbin	Dr. Lumbin	Dr. Lumbin
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Margaret Cole	Alice S. Chalger	Robert M Wright
Address.	Englewood	Englewood	Englewood
Date of Return.	Jan 19th 1916	Jan 24th 1916	Jan 25th 1916

I hereby certify the foregoing to be the true and correct copies of all births returned to me on the dates you make. Mar 31st 1916

Given under my hand this 9th day of April A.D. 1916
Division Registrar of Englewood

P.O.

BIRTHS

Glady pratt, carman pratt, ida nant, john james burrows, arthur roy burrows, louise ma
pittman, george edward gaydon, beatrice davis, john tallant, james tallant, mary halter,
phillip sidney luno, edward luno, margaret edna fourke, edith louisa clipson, george
charles clipson, clara jane davis.

County of *Ward*

Division of *Ingersoll*

	Surname First	Surname First	Surname First
Surname of child.	<i>Brett</i>	<i>Hayden</i>	<i>hume</i>
Christian name.	<i>Geodys W.</i>	<i>George Edward</i>	<i>Phillip Sydney</i>
Date of Birth.	<i>July 21st 1916</i>	<i>Jan 8th 1916</i>	<i>July 21st 1916</i>
Where born? Street number or Con- cession and Lot.	<i>Alvendale Hospital Ingersoll</i>	<i>Alvendale Ingersoll</i>	<i>Alvendale Ingersoll</i>
Sex.	<i>Female</i>	<i>Male</i>	<i>Male</i>
Are the Parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Where and when married.	<i>Alvendale Mar 5/13</i>	<i>Ingersoll August 1914</i>	<i>Saravla June 5th 1912</i>
Full name of Father.	<i>Cornan Brett</i>	<i>George Hayden</i>	<i>Edward C Hume</i>
Address.	<i>Brownsville Ingersoll</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Occupation.	<i>Farmer</i>	<i>Mechanic</i>	<i>Business</i>
Maiden name of Mother.	<i>Ida Hunt</i>	<i>Beatrice Davis</i>	<i>Margaret Edna Fourke</i>
Is she single or a widow?	<i>-</i>	<i>-</i>	<i>-</i>
Name of Physician in at- tendance.	<i>Dr Carmel</i>	<i>Dr Rogers</i>	<i>Dr Coulter</i>
Were you in house at time of Birth?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Twin, Triplet, Illegitimate or Still born	<i>-</i>	<i>-</i>	<i>-</i>
Name of Informant.	<i>Ida C Hedges</i>	<i>Mrs. Hayden</i>	<i>E. C. Hume</i>
Address.	<i>Ingersoll</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Date of Return.	<i>Mar 4th 1916</i>	<i>Mar 7th 1916</i>	<i>Mar 9th 1916</i>
	Surname First	Surname First	Surname First
Surname of child.	<i>Burrows</i>	<i>Tallant</i>	<i>Clipson</i>
Christian name.	<i>John James</i>	<i>John</i>	<i>Edith Louisa</i>
Date of Birth.	<i>July 14th 1916</i>	<i>Mar 9th 1916</i>	<i>Mar 11th 1916</i>
Where born? Street number or Con- cession and Lot.	<i>Ingersoll</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Sex.	<i>Male</i>	<i>Male</i>	<i>Female</i>
Are the Parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Where and when married.	<i>Saravla June 17th 1911</i>	<i>Ingersoll Apr 9th 1915</i>	<i>Edith April 7th 1915</i>
Full name of Father.	<i>Arthur Ray Burrows</i>	<i>James Tallant</i>	<i>George Charles Clipson</i>
Address.	<i>Ingersoll</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Occupation.	<i>Traveler</i>	<i>Mechanic</i>	<i>Business</i>
Maiden name of Mother.	<i>Marie Mary Pittman</i>	<i>Mary Hallie</i>	<i>Clara Jane Davis</i>
Is she single or a widow?	<i>-</i>	<i>-</i>	<i>-</i>
Name of Physician in at- tendance.	<i>Dr Rogers</i>	<i>Dr Coulter</i>	<i>Dr Williams</i>
Were you in house at time of Birth?	<i>Yes</i>	<i>Yes</i>	<i>No</i>
Twin, Triplet, Illegitimate or Still born	<i>-</i>	<i>-</i>	<i>-</i>
Name of Informant.	<i>A R Burrows</i>	<i>James Tallant</i>	<i>G C Clipson</i>
Address.	<i>Ingersoll</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Date of Return.	<i>Mar 11th 1916</i>	<i>Mar 22nd 1916</i>	<i>Mar 22nd 1916</i>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending *March 31st*

Given under my hand this *5th* day of *April*

A.D. 1916

Division Registrar of *Ingersoll*

P.O.

W. Williams

BIRTHS

Sadie patrice boffey, annie mcmaster, clarence cecil scott, william james scott, ethel jane carey corey, robert canford, charles garfield danford, anna ireland, elizabeth gardner taylor, thomas taylor, elizabeth mcintyre gardner, donald archie houghton, james joseph houghton, nellie johnston barrow, margaret gardner taylor, thomas taylor, elizabeth mcintyre gardner

County of JeffersonDivision of Jagersau

Surname First.	Surname First.	Surname First.
Surname of child. <u>Boffey</u>	Surname of child. <u>Danford</u>	Surname of child. <u>Houghton</u>
Christian name. <u>Beatrice</u>	Christian name. <u>Robert</u>	Christian name. <u>Donald Archie</u>
Date of Birth. <u>Mar 20th 1916</u>	Date of Birth. <u>July 19th 1916</u>	Date of Birth. <u>Mar 5th 1916</u>
Where born? Street number or Con- cession and Lot. If in a hospital give its name <u>Jagersau</u>	Where born? Street number or Con- cession and Lot. If in a hospital give its name <u>Jagersau</u>	Where born? Street number or Con- cession and Lot. If in a hospital give its name <u>Jagersau</u>
Sex. <u>Female</u>	Sex. <u>Male</u>	Sex. <u>Male</u>
Are the Parents married? <u>Yes</u>	Are the Parents married? <u>Yes</u>	Are the Parents married? <u>Yes</u>
Where and when married. <u>Jagersau Oct 15th 1905</u>	Where and when married. <u>Jagersau 1911</u>	Where and when married. <u>Jagersau Mar 19th 1914</u>
Full name of Father. <u>William D. Boffey</u>	Full name of Father. <u>Charles Garfield Danford</u>	Full name of Father. <u>James Joseph Houghton</u>
Address. <u>Jagersau</u>	Address. <u>Jagersau</u>	Address. <u>Jagersau</u>
Occupation. <u>Railroad Man</u>	Occupation. <u>Labourer</u>	Occupation. <u>Mechanic</u>
Maiden name of Mother. <u>Annie E. McMaster</u>	Maiden name of Mother. <u>Anna Ireland</u>	Maiden name of Mother. <u>Nellie Johnson Barrow</u>
Is she single or a widow? <u>-</u>	Is she single or a widow? <u>-</u>	Is she single or a widow? <u>-</u>
Name of Physician in at- tendance. <u>D. Conner</u>	Name of Physician in at- tendance. <u>D. Williams</u>	Name of Physician in at- tendance. <u>D. Conner</u>
Were you in house at time of Birth? <u>Yes</u>	Were you in house at time of Birth? <u>Yes</u>	Were you in house at time of Birth? <u>Yes</u>
Twin, Triplet, Illegitimate or Still-born. <u>-</u>	Twin, Triplet, Illegitimate or Still-born. <u>-</u>	Twin, Triplet, Illegitimate or Still-born. <u>-</u>
Name of Informant. <u>W. D. Boffey</u>	Name of Informant. <u>Chas. D. Danford</u>	Name of Informant. <u>Mrs Charles Barrow</u>
Address. <u>Jagersau</u>	Address. <u>Jagersau</u>	Address. <u>Jagersau</u>
Date of Return. <u>Mar 23rd 1916</u>	Date of Return. <u>Mar 23rd 1916</u>	Date of Return. <u>Mar 23rd 1916</u>
Surname First.	Surname First.	Surname First.
Surname of child. <u>Scott</u>	Surname of child. <u>Taylor</u>	Surname of child. <u>Taylor</u>
Christian name. <u>Clarence Cecil</u>	Christian name. <u>Elizabeth Gardner</u>	Christian name. <u>Margaret Day</u>
Date of Birth. <u>Mar 10th 1916</u>	Date of Birth. <u>July 22nd 1916</u>	Date of Birth. <u>July 22nd 1916</u>
Where born? Street number or Con- cession and Lot. If in a hospital give its name <u>Jagersau</u>	Where born? Street number or Con- cession and Lot. If in a hospital give its name <u>Jagersau</u>	Where born? Street number or Con- cession and Lot. If in a hospital give its name <u>Jagersau</u>
Sex. <u>Male</u>	Sex. <u>Female</u>	Sex. <u>Female</u>
Are the Parents married? <u>Yes</u>	Are the Parents married? <u>Yes</u>	Are the Parents married? <u>Yes</u>
Where and when married. <u>Seaside July 5th 1914</u>	Where and when married. <u>Seaside Dec 22nd 1906</u>	Where and when married. <u>Seaside Dec 22nd 1906</u>
Full name of Father. <u>William James Scott</u>	Full name of Father. <u>Thomas Taylor</u>	Full name of Father. <u>Thomas Taylor</u>
Address. <u>Jagersau</u>	Address. <u>Jagersau</u>	Address. <u>Jagersau</u>
Occupation. <u>Engineer</u>	Occupation. <u>Chemist</u>	Occupation. <u>Chemist</u>
Maiden name of Mother. <u>Elizabeth Carey</u>	Maiden name of Mother. <u>Elizabeth McIntyre Gardner</u>	Maiden name of Mother. <u>Elizabeth McIntyre Gardner</u>
Is she single or a widow? <u>-</u>	Is she single or a widow? <u>-</u>	Is she single or a widow? <u>-</u>
Name of Physician in at- tendance. <u>D. Guleau</u>	Name of Physician in at- tendance. <u>D. Williams</u>	Name of Physician in at- tendance. <u>D. Williams</u>
Were you in house at time of Birth? <u>Yes</u>	Were you in house at time of Birth? <u>Yes</u>	Were you in house at time of Birth? <u>Yes</u>
Twin, Triplet, Illegitimate or Still-born. <u>-</u>	Twin, Triplet, Illegitimate or Still-born. <u>Siun</u>	Twin, Triplet, Illegitimate or Still-born. <u>Siun</u>
Name of Informant. <u>W. J. Scott</u>	Name of Informant. <u>Thos Taylor</u>	Name of Informant. <u>Thos Taylor</u>
Address. <u>Jagersau</u>	Address. <u>Jagersau</u>	Address. <u>Jagersau</u>
Date of Return. <u>Mar 24th 1916</u>	Date of Return. <u>Mar 24th 1916</u>	Date of Return. <u>Mar 24th 1916</u>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1916Given under my hand this 8th day of April

A. D. 1916

Dividee Registrar of

Jagersau

P.O.

W. J. Conner

BIRTHS

Mary burdette foster, frederick foster, maggie thornton, helen irene longfield,
herbert edgar longfield, mary frances smith,

County of Windsor Division of Ingersoll

	SURNAME FIRST	SURNAME FIRST	SURNAME FIRST
Surname of child.	<u>Foster</u>	<u>Longfield</u>	
Christian name.	<u>Mary Burdette</u>	<u>Helen Irene</u>	
Date of Birth.	<u>July 20th 1916</u>	<u>Mar 1st 1916</u>	
Where born? Street number or Con- cession and Lot.	If in a hospital give its name <u>Ingersoll</u>	If in a hospital give its name <u>Ingersoll</u>	If in a hospital give its name.
Sex.	<u>Female</u>	<u>Female</u>	
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	
Where and when married.	<u>Ingersoll Ont. 12th 1902</u>	<u>Ingersoll Jan. 9th 1907</u>	
Full name of Father.	<u>Frederick Foster</u>	<u>Herbert Edgar Longfield</u>	
Address.	<u>Ingersoll</u>	<u>Ingersoll</u>	
Occupation.	<u>Barman</u>	<u>Engineer</u>	
Maiden name of Mother.	<u>Maggie Thornton</u>	<u>Mary Frances Smith</u>	
Is she single or a widow?	<u>-</u>	<u>-</u>	
Name of Physician in at- tendance.	<u>Dr. Gurduey</u>	<u>Dr. Campbell</u>	
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	
Twin, Triplet, Illegitimate or Still-born.	<u>-</u>	<u>-</u>	
Name of Informant.	<u>Frederick Foster</u>	<u>Mrs H. E. Longfield</u>	
Address.	<u>Ingersoll</u>	<u>Ingersoll</u>	
Date of Return.	<u>Mar 20th 1916</u>	<u>Mar 30th 1916</u>	
SURNAME FIRST	SURNAME FIRST	SURNAME FIRST	
Surname of child.			
Christian name.			
Date of Birth.			
Where born? Street number or Con- cession and Lot.	If in a hospital give its name.	If in a hospital give its name.	If in a hospital give its name.
Sex.			
Are the Parents married?			
Where and when married.			
Full name of Father.			
Address.			
Occupation.			
Maiden name of Mother.			
Is she single or a widow?			
Name of Physician in at- tendance.			
Were you in house at time of Birth?			
Twin, Triplet, Illegitimate or Still-born.			
Name of Informant.			
Address.			
Date of Return.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1916
Given under my hand this 5th day of April A.D. 1916
Division Registrar of Ingersoll

BIRTHS

Ruth margarett moffatt, william moffatt, harry james smith, alice m. wilson, edith whittemine mayberry, percy ross mayberry, florence simpson, dorothy helen turpin, henry garfield turpin, vera hansford, eleanor grace holland, earnest james holland, ellen stanley, allan arnold turpin, henry garfield turpin, vera hansford.

County of Jefferson Division of Ingersoll

Surname Child	Surname Child	Surname Child
Surname of child <u>Moffatt</u>	Surname Child <u>Mayberry</u>	Surname Child <u>Holland</u>
Christian name <u>Ruth Margaret</u>	Christian name <u>Edith Whittemine</u>	Christian name <u>Eleanor Grace</u>
Date of Birth <u>Apr 29th 1916</u>	Date of Birth <u>Apr 22nd 1916</u>	Date of Birth <u>May 1st 1916</u>
Where born? Street number or Con- cession and Loc. <u>If in a hospital give its name</u> <u>Ingersoll</u>	Where born? Street number or Con- cession and Loc. <u>If in a hospital give its name</u> <u>Ingersoll</u>	Where born? Street number or Con- cession and Loc. <u>If in a hospital give its name</u> <u>Ingersoll</u>
Sex <u>Female</u>	Sex <u>Female</u>	Sex <u>Female</u>
Are the Parents married? <u>Yes</u>	Are the Parents married? <u>Yes</u>	Are the Parents married? <u>Yes</u>
When and where married <u>Mitchell, Sept 14th 1916</u>	When and where married <u>Seitzard Oct 24th 1906</u>	When and where married <u>Rueph, July 16th 1914</u>
Full name of Father <u>William Moffatt</u>	Full name of Father <u>Percy Ross Mayberry</u>	Full name of Father <u>Ernest James Holland</u>
Address <u>Ingersoll</u>	Address <u>Ingersoll</u>	Address <u>Ingersoll</u>
Occupation <u>Mechanic</u>	Occupation <u>Stephane Man</u>	Occupation <u>Civil Engineer</u>
Maiden name of Mother <u>Annie Carterfield</u>	Maiden name of Mother <u>Florence Simpson</u>	Maiden name of Mother <u>Ellen Stanley</u>
Is she single or a widow? <u>-</u>	Is she single or a widow? <u>-</u>	Is she single or a widow? <u>-</u>
Name of Physician in at- tendance <u>Dr. Carnish</u>	Name of Physician in at- tendance <u>Dr. Carnish</u>	Name of Physician in at- tendance <u>Dr. Williams</u>
Were you in house at time of Birth? <u>No</u>	Were you in house at time of Birth? <u>Yes</u>	Were you in house at time of Birth? <u>Yes</u>
Twin, Triplet, Quadruplet or Still born <u>-</u>	Twin, Triplet, Quadruplet or Still born <u>-</u>	Twin, Triplet, Quadruplet or Still born <u>-</u>
Name of Informant <u>W. Moffatt</u>	Name of Informant <u>Mrs O.R. Mayberry</u>	Name of Informant <u>H. S. Hooper</u>
Address <u>Ingersoll</u>	Address <u>Ingersoll</u>	Address <u>Ingersoll</u>
Date of Return <u>May 16th 1916</u>	Date of Return <u>May 17th 1916</u>	Date of Return <u>May 18th 1916</u>
Surname of child <u>Smith</u>	Surname Child <u>Turpin</u>	Surname Child <u>Turpin</u>
Christian name <u>Harry James</u>	Christian name <u>Dorothy Keeler</u>	Christian name <u>Allan Arnold</u>
Date of Birth <u>May 6th 1916</u>	Date of Birth <u>May 6th 1916</u>	Date of Birth <u>May 6th 1916</u>
Where born? Street number or Con- cession and Loc. <u>If in a hospital give its name</u> <u>Ingersoll</u>	Where born? Street number or Con- cession and Loc. <u>If in a hospital give its name</u> <u>Ingersoll</u>	Where born? Street number or Con- cession and Loc. <u>If in a hospital give its name</u> <u>Ingersoll</u>
Sex <u>Male</u>	Sex <u>Female</u>	Sex <u>Male</u>
Are the Parents married? <u>Yes</u>	Are the Parents married? <u>Yes</u>	Are the Parents married? <u>Yes</u>
When and where married <u>Wadlee, Aug 24th 1912</u>	When and where married <u>Banner, Sept 4th 1912</u>	When and where married <u>Banner, Sept 4th 1912</u>
Full name of Father <u>James Smith</u>	Full name of Father <u>Henry Garfield Turpin</u>	Full name of Father <u>Henry Garfield Turpin</u>
Address <u>Ingersoll</u>	Address <u>Ingersoll</u>	Address <u>Ingersoll</u>
Occupation <u>Engineer</u>	Occupation <u>Butcher</u>	Occupation <u>Butcher</u>
Maiden name of Mother <u>Olivia Maud Wilson</u>	Maiden name of Mother <u>Vera Hansford</u>	Maiden name of Mother <u>Vera Hansford</u>
Is she single or a widow? <u>-</u>	Is she single or a widow? <u>-</u>	Is she single or a widow? <u>-</u>
Name of Physician in at- tendance <u>Dr. Williams</u>	Name of Physician in at- tendance <u>Dr. Carnish</u>	Name of Physician in at- tendance <u>Dr. Carnish</u>
Were you in house at time of Birth? <u>Yes</u>	Were you in house at time of Birth? <u>Yes</u>	Were you in house at time of Birth? <u>Yes</u>
Twin, Triplet, Quadruplet or Still born <u>-</u>	Twin, Triplet, Quadruplet or Still born <u>Twins</u>	Twin, Triplet, Quadruplet or Still born <u>Twins</u>
Name of Informant <u>Mrs James Smith</u>	Name of Informant <u>H. S. Turpin</u>	Name of Informant <u>H. S. Turpin</u>
Address <u>Ingersoll</u>	Address <u>Ingersoll</u>	Address <u>Ingersoll</u>
Date of Return <u>May 20th 1916</u>	Date of Return <u>May 25th 1916</u>	Date of Return <u>May 25th 1916</u>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending

Given under my hand this 11th day of July A.D. 1916
District Registrar of Ingersoll

June 30th 1916

BIRTHS

Elsie turton, john turton, florence brown, agnes matilda wade, robert wade, isabella hughes, rose agnes johnson, william joseph johnson, margaret ellen minard, robert gordon catterell, francis lawrence catterell, edith courtney, thomas alfred delaney, thomas delaney, annie galbraith, harold william smith, daniel smith, edith spraggs spragg

County of Offord

Division of Ingersall

	Surname first	Surname first	Surname first
Surname of child.	Dartou	Johnson	Delaney
Christian name.	Elsie	Rose Agnes	Thomas Alfred
Date of Birth.	May 19th 1916	May 21st 1916	May 24th 1916
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersall	If in a hospital give its name Ingersall	Alexandra Hospital If in a hospital give its name Ingersall
Sex.	Female	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingersall Aug 21st 1912	Ingersall Apr 10th 1906	Ingersall Oct 21st 1914
Full name of Father.	John Dartou	William Joseph Johnson	Thomas Delaney
Address.	Ingersall	Ingersall	Ingersall
Occupation.	Labourer	Machinist	Farmer
Maiden name of Mother.	Florence Brown	Margaret Ellen Minard	Annie Galbraith
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr Rogers	Dr Camiller	Dr Williams
Were you in house at time of Birth?	No	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	John Dartou	W. J. Johnson	H. S. Keaper
Address.	Ingersall	Ingersall	Ingersall
Date of Return.	May 24th 1916	May 31st 1916	June 1st 1916
	Surname first	Surname first	Surname first
Surname of child.	Wade	Catterell	Smith
Christian name.	Agnes Matilda	Robert Gordon	Harold William
Date of Birth.	May 16th 1916	April 20th 1916	May 10th 1916
Where born? Street number or Con- cession and Lot.	Alexandra Hospital If in a hospital give its name Ingersall	Charles St. E. Ingersall If in a hospital give its name Ingersall	Ingersall If in a hospital give its name Ingersall
Sex.	Female	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingersall June 31st 1912	Wiltshire, England	Ingersall May 1914
Full name of Father.	Robert H. Wade	Francis Lawrence Catterell	Daniel Smith
Address.	Ingersall	Ingersall	Ingersall
Occupation.	Machinist	Soldier	Clerk
Maiden name of Mother.	Isabella Hughes	Edith Courtney	Edith Spraggs
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr Williams	Mrs Adams, (Nurse)	Dr Camiller
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	H. S. Keaper	Mrs F. L. Catterell	Daniel Smith
Address.	Ingersall	Ingersall	Ingersall
Date of Return.	June 5th 1916	June 10th 1916	June 10th 1916

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1916

Given under my hand this 11th day of July
District Registrar of Ingersall

A.B. 1916 P.O.

BIRTHS

Russell Joseph Leroy Rice, Joseph Algean Algerman Rine, Evelyn Maud Greenaway, Jennie Clara Prouse, William Henry Prouse, Addie Butler, Irene Mary Elston, Fred William Elston, Dorothy Eliza Tupper, Doris Annie Powell, Harry Powell, Annie Neal, Marjorie Lucille Stanton, Frederick George Stanton, Ethel May Davidson, Violet Marian Margaret Florence Linthwaite, George Linthwaite, Florence Emma Wright.

County of *Offord*Division of *Ingersall*

	Surname first.	Surname first.	Surname first.
Surname of child.	<i>Rine</i>	<i>Elston</i>	<i>Stanton</i>
Christian name.	<i>Russell Joseph the Boy</i>	<i>Irene Mary</i>	<i>Marjorie Lucille</i>
Date of Birth.	<i>May 16th 1916</i>	<i>May 20th 1916</i>	<i>May 27th 1916</i>
Where born? Street number or Concession and Lot.	<i>Home</i> If in a hospital give its name <i>Ingersall</i>	<i>Ingersall</i> If in a hospital give its name <i>Ingersall</i>	<i>Ingersall</i> If in a hospital give its name <i>Ingersall</i>
Sex.	<i>Male</i>	<i>Female</i>	<i>Female</i>
Are the Parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Where and when married.	<i>Ingersall, Oct 21st 1914</i>	<i>England, Oct 15th 1913</i>	<i>Woodlawn, Jan 26th 1911</i>
Full name of Father.	<i>Joseph Algean Rine</i>	<i>Fred William Elston</i>	<i>Frederick George Stanton</i>
Address.	<i>Ingersall</i>	<i>Ingersall</i>	<i>Ingersall</i>
Occupation.	<i>Mechanic</i>	<i>Soldier</i>	<i>Soldier</i>
Maiden name of Mother.	<i>Evelyn Maud Greenaway</i>	<i>Dorothy Eliza Tupper</i>	<i>Ethel May Davidson</i>
Is she single or a widow?	<i>-</i>	<i>-</i>	<i>-</i>
Name of Physician in attendance.	<i>Dr. Carleton</i>	<i>Dr. Furlong</i>	<i>Dr. Carleton</i>
Were you in house at time of Birth?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Twin, Triplet, Illegitimate or Still born.	<i>-</i>	<i>-</i>	<i>-</i>
Name of Informant.	<i>Mrs J. A. Rine</i>	<i>J. W. Elston</i>	<i>Mrs A. Webster</i>
Address.	<i>Ingersall</i>	<i>Ingersall</i>	<i>Ingersall</i>
Date of Return.	<i>June 10th 1916</i>	<i>June 12th 1916</i>	<i>June 12th 1916</i>
	Surname first.	Surname first.	Surname first.
Surname of child.	<i>Prouse</i>	<i>Carroll</i>	<i>Linthwaite</i>
Christian name.	<i>Jennie Clara</i>	<i>Doris Annie</i>	<i>Violet Marian, Margaret Florence</i>
Date of Birth.	<i>May 30th 1916</i>	<i>June 2nd 1916</i>	<i>June 4th 1916</i>
Where born? Street number or Concession and Lot.	<i>Ingersall</i> If in a hospital give its name <i>Ingersall</i>	<i>Ingersall</i> If in a hospital give its name <i>Ingersall</i>	<i>Ingersall</i> If in a hospital give its name <i>Ingersall</i>
Sex.	<i>Female</i>	<i>Female</i>	<i>Female</i>
Are the Parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Where and when married.	<i>Barham, Ont. Mar 21st 1907</i>	<i>Harry Carroll +</i>	<i>England, Sept. 1902</i>
Full name of Father.	<i>William Henry Prouse</i>	<i>England, Oct 24th 1912 +</i>	<i>George Linthwaite</i>
Address.	<i>Mr. Selgin</i>	<i>Ingersall</i>	<i>Ingersall</i>
Occupation.	<i>Farmer</i>	<i>Soldier</i>	<i>Soldier</i>
Maiden name of Mother.	<i>Addie Butler</i>	<i>Annie Neal</i>	<i>Florence Emma Wright</i>
Is she single or a widow?	<i>-</i>	<i>-</i>	<i>-</i>
Name of Physician in attendance.	<i>Dr. Carleton</i>	<i>Dr. Carleton</i>	<i>Dr. Carleton</i>
Were you in house at time of Birth?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Twin, Triplet, Illegitimate or Still born.	<i>-</i>	<i>-</i>	<i>-</i>
Name of Informant.	<i>H. S. Hooper</i>	<i>James J. McKay</i>	<i>Mrs Cooper</i>
Address.	<i>Ingersall</i>	<i>Ingersall</i>	<i>Ingersall</i>
Date of Return.	<i>June 12th 1916</i>	<i>June 12th 1916</i>	<i>June 14th 1916</i>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending *June 30th 1916*

Given under my hand this

11th

day of

July

A.D. 1916

Division Registrar of

Ingersall

BIRTHS

Clinton leroy clarke, earl mervin clark, beatrice rowson, george albert eden, frederick james eden, amy eleanor cooper, jean elizabeth young, william arthur young, mabel m beirns berms, grace edith morrison, lester morrison, elizabeth mckenzie, albert edwin hoftes, henry charles holmes, rosina may long, agnes holmes pearson, charles pearson, bessie mcdonald.

County of Offord

Division of Ingersoll

Surname First	Surname First	Surname First
Surname of child. <u>Clark</u>	<u>Young</u>	<u>Keelnes</u>
Christian name. <u>Clinton Leroy</u>	<u>Jean Elizabeth</u>	<u>Albert Edwin</u>
Date of Birth. <u>May 20th 1916</u>	<u>May 20th 1916</u>	<u>June 2nd 1916</u>
Where born? <u>Unsett. C.</u>	<u>If in a hospital give its name Ingersoll</u>	<u>If in a hospital give its name Ingersoll</u>
Sex. <u>Male</u>	<u>Female</u>	<u>Male</u>
Are the Parents married? <u>Yes</u>	<u>Yes</u>	<u>Yes</u>
When and when married. <u>Ingersoll Jan 2nd 1911</u>	<u>Ingersoll May 22nd 1911</u>	<u>Wheatlan May 20th 1906</u>
Full name of Father. <u>Earl Mervin Clark</u>	<u>William Arthur Young</u>	<u>Henry Charles Keelnes</u>
Address. <u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Occupation. <u>Police</u>	<u>Mechanic</u>	<u>Soldier</u>
Maiden name of Mother. <u>Beatrice M. Rowson</u>	<u>Mabel May Beirns</u>	<u>Rosina May Long</u>
Is she single or a widow? <u>-</u>	<u>-</u>	<u>-</u>
Name of Physician in attendance. <u>Dr. Williams</u>	<u>Dr. Williams</u>	<u>Dr. Williams</u>
Were you in house at time of Birth? <u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Twin, Triplet, Illegitimate or Still-born. <u>-</u>	<u>-</u>	<u>-</u>
Name of Informant. <u>Mrs E M Clark</u>	<u>Mrs W O Young</u>	<u>Miss Furlong</u>
Address. <u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Date of Return. <u>June 17th 1916</u>	<u>June 17th 1916</u>	<u>June 19th 1916</u>
Surname First	Surname First	Surname First
Surname of child. <u>Eden</u>	<u>Morrison</u>	<u>Bearson</u>
Christian name. <u>George Albert</u>	<u>Grace Edith</u>	<u>Agnes Beatrice</u>
Date of Birth. <u>June 6th 1916</u>	<u>May 22nd 1916</u>	<u>Mar 25th 1914</u>
Where born? <u>Unsett. C.</u>	<u>Unsett. C.</u>	<u>Unsett. C.</u>
Sex. <u>Male</u>	<u>Female</u>	<u>Female</u>
Are the Parents married? <u>Yes</u>	<u>Yes</u>	<u>Yes</u>
When and when married. <u>Ingersoll Sept 1st 1913</u>	<u>Marine City June 6th 1911</u>	<u>Ingersoll June 25th 1914</u>
Full name of Father. <u>Frederick James Eden</u>	<u>Lester Morrison</u>	<u>Charles Bearson</u>
Address. <u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Occupation. <u>Inspector</u>	<u>Miller</u>	<u>Mechanic</u>
Maiden name of Mother. <u>Amy Eleanor Cooper</u>	<u>Elizabeth McKenzie</u>	<u>Bessie McDonald</u>
Is she single or a widow? <u>Widow</u>	<u>-</u>	<u>-</u>
Name of Physician in attendance. <u>Dr. Furlong</u>	<u>Dr. Campbell</u>	<u>Dr. McKay</u>
Were you in house at time of Birth? <u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Twin, Triplet, Illegitimate or Still-born. <u>-</u>	<u>-</u>	<u>-</u>
Name of Informant. <u>Miss Furlong</u>	<u>Dr Morrison</u>	<u>Mrs Char Bearson</u>
Address. <u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Date of Return. <u>June 20th 1916</u>	<u>June 22nd 1916</u>	<u>June 24th 1916</u>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1916

Given under my hand this 11th day of July A.D. 1916
Division Registrar of Ingersoll

W.A. Smith

BIRTHS

Leslie leard cousins, elsworth hicks cousins, louisa bidena edwards, john wesley armstrong frank armstrong, malinda hutchinson, menata eileen case, joseph case, henretta quinn quinn, agnes redfern, arthur redfern, edith greenwood, george lat anderson, alexander anderson, isabel lat, frank alderon, joseph alderon, harriet newsome.

County of Windsor Division of Windsor

Surname of child.	Surname first.	Surname first.
<u>Cousins</u>	<u>Case</u>	<u>Anderson</u>
<u>Beatie Beate</u>	<u>Maudie Eileen</u>	<u>George Earl</u>
<u>Mar 15th 1916</u>	<u>Mar 15th 1916</u>	<u>Mar 27th 1916</u>
<u>W in a hospital give its name</u>	<u>W in a hospital give its name</u>	<u>W in a hospital give its name</u>
<u>Male</u>	<u>Female</u>	<u>Male</u>
<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
<u>Bramsville Jan 5th 1898</u>	<u>Ingersoll Mar 12th 1913</u>	<u>Toronto July 19th 1912</u>
<u>Elsworth Hicks Cousins</u>	<u>Joseph Case</u>	<u>Alexander Anderson</u>
<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
<u>Labourer</u>	<u>Labourer</u>	<u>Labourer</u>
<u>Marina Beate Eileen</u>	<u>Maudie Eileen</u>	<u>Beatie Earl</u>
<u>-</u>	<u>-</u>	<u>-</u>
<u>Dr. Corrish</u>	<u>Dr. Wickham</u>	<u>Dr. Corrish</u>
<u>Yes</u>	<u>No</u>	<u>No</u>
<u>-</u>	<u>-</u>	<u>-</u>
<u>Mrs. E. H. Cousins</u>	<u>Joseph Case</u>	<u>Alex. Anderson</u>
<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
<u>Apr 14th 1916</u>	<u>Apr 14th 1916</u>	<u>Apr 14th 1916</u>
Surname first.	Surname first.	Surname first.
<u>Armstrong</u>	<u>Redfern</u>	<u>Anderson</u>
<u>John Wesley</u>	<u>Agnes</u>	<u>Frank</u>
<u>Apr 15th 1916</u>	<u>Apr 2nd 1916</u>	<u>Apr 15th 1916</u>
<u>W in a hospital give its name</u>	<u>W in a hospital give its name</u>	<u>W in a hospital give its name</u>
<u>Male</u>	<u>Female</u>	<u>Male</u>
<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
<u>London Mar 21st 1904</u>	<u>England Dec 26th 1912</u>	<u>Toronto July 14th 1910</u>
<u>John Armstrong</u>	<u>Arthur Redfern</u>	<u>Joseph Anderson</u>
<u>Sharnford</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
<u>Farmer</u>	<u>Soldier</u>	<u>Labourer</u>
<u>Malinda Hutchinson</u>	<u>Edith Greenwood</u>	<u>Marion Newsome</u>
<u>-</u>	<u>-</u>	<u>-</u>
<u>Dr. Babel</u>	<u>Dr. Williams</u>	<u>Dr. Furlong</u>
<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
<u>-</u>	<u>-</u>	<u>-</u>
<u>John Armstrong</u>	<u>Arthur Redfern</u>	<u>Joseph Anderson</u>
<u>Sharnford</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
<u>Apr 19th 1916</u>	<u>Apr 19th 1916</u>	<u>Apr 19th 1916</u>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1916
 Given under my hand this 11th day of July 1916
 Division Registrar of Ingersoll Windsor P.O.

BIRTHS

Marjorie irene short, francis james short, elizabeth letta young, katherine margaret messenger, william edward messenger, ruth moss, helen pearl homes, samuel horn, pearl steinacker, lillian gertrude northey, charles northey, berthia byer poyer boyer, micred jean murray, william murray, nellie carroll, ronald galloway skinner, robert alexander skinner, coza galloway

Schedule B
U.S.—Revised all birth records
as well as deaths.

County of Jefferson Division of Jagersall

	Surname First	Surname First	Surname First
Surname of child	Short	Kealms	Murray
Christian name	Margaret Irene	Helen Pearl	Mildred Jean
Date of Birth	Apr 24th 1916	Mar 24th 1916	Apr 24th 1916
Where born? <small>Street number or Con- vention and Loc.</small>	Carroll <i>If in a hospital give its name</i> Jagersall	Idem <i>If in a hospital give its name</i> Jagersall	Idem <i>If in a hospital give its name</i> Jagersall
Sex	Female	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married	Jagersall, Vauphi 1911	Jagersall Sept 7th 1914	Hamilton, July 4th 1900
Full name of Father	James James Short	Lamuel Kealms	William Murray
Address	Jagersall	Jagersall	Jagersall
Occupation	Barber	Mechanic	Minister
Maiden name of Mother	Kathleen Letta Young	Bea Blincher	Nellie Carroll
Is she single or a widow?	-	-	-
Name of Physician in at- tendance	Dr. Williams	Dr. Williams	Dr. Spanish
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or still-born.	-	-	-
Name of Informant	Mrs J. J. Short	Mrs S. Kealms	Mrs W. T. Murray
Address	Jagersall	Jagersall	Jagersall
Date of Return	Apr 24th 1916	Apr 24th 1916	Apr 24th 1916
Surname of child	Messenger	Northey	Skinner
Christian name	Katherine Margaret	Lillian Gertrude	Ronald Galloway
Date of Birth	Mar 24th 1916	Mar 24th 1916	Apr 4th 1916
Where born? <small>Street number or Con- vention and Loc.</small>	<i>If in a hospital give its name</i> Jagersall	<i>If in a hospital give its name</i> Jagersall	<i>If in a hospital give its name</i> Jagersall
Sex	Female	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married	England Apr 15th 1911	Brooklyn, N.Y. Oct 12th 1902	Jagersall Oct 8th 1907
Full name of Father	William Edward Messenger	Charles Northey	Robert Alexander Skinner
Address	Jagersall	Jagersall	Jagersall
Occupation	Barber	Barber	Merchant
Maiden name of Mother	Ruth Moss	Bertha Kyle	Liza Galloway
Is she single or a widow?	-	-	-
Name of Physician in at- tendance	Dr. Jurlong	Dr. Jurlong	Dr. Cantler
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or still-born.	Ruth Messenger +	-	-
Name of Informant	+ Chas Northey	Chas Northey	R. A. Skinner
Address	Jagersall	Jagersall	Jagersall
Date of Return	Apr 24th 1916	Apr 27th 1916	May 1st 1916

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1916
 Given under my hand this 11th day of July 1916
 Division Registrar of Jagersall W. Admish

BIRTHS

Doris caroline tillet, john william tillet, nellie leigh, william frederick douglas, william bolton douglas, mary ramering romney, dorothy marie rose, alexander-rose, carnilla armstrong, clarence edwin connors, harry connors, violet alia mcreedy, heleen margaret vance, davis vance, rose desmond, margaret elizabeth payne, william john payne, hazel pearl sanders

County of Chippewa Division of Ingersoll

	Surname first	Surname first	Surname first
Surname of child.	Tillet	Rose	Vance
Christian name.	Doris Caroline	Dorothy Marie	Heleen Margaret
Date of Birth.	Apr 19th 1916	Apr 19th 1916	Apr 21st 1916
Where born? Street number or Con- cession and Lot	Alexandra Washlet	Alexandra Washlet	Alexandra Washlet
Sex.	Female	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingersoll, Dec 20th 1910	Ingersoll, June 20th 1912	Ingersoll, Aug 15th 1910
Full name of Father.	John William Tillet	Alexander Rose	David Vance
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Teacher	Farmer	Machinist
Maiden name of Mother.	Nellie Leigh	Carnilla Armstrong	Rose Desmond
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Cornish	Dr. Williams	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Mrs J. W. Tillet	Alex Rose	David Vance
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	May 2nd 1916	May 4th 1916	May 4th 1916
Surname first	Douglas	Connors	Payne
Christian name.	William Frederick	Charles Edwin	Margaret Elizabeth
Date of Birth.	Apr 24th 1916	May 7th 1916	Apr 20th 1916
Where born? Street number or Con- cession and Lot	Alexandra Washlet	Ingersoll	Ingersoll
Sex.	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Washlet, Aug 7th 1910	London, Aug 20th 1916	Ingersoll Dec 6th 1913
Full name of Father.	William Bolton Douglas	Harry Connors	William John Payne
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Machinist	Machinist	Machinist
Maiden name of Mother.	Mary Raming	Violet Alia Mcreedy	Hazel Carl Henderson
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Cornish	Dr. Cornish	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	W. B. Douglas	Mrs. Connors	W. J. Payne
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	May 9th 1916	May 11th 1916	May 12th 1916

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1916

Given under my hand this
Division Registrar of

11th day of July
W. B. Douglas
Ingersoll

John wesley cuthbert, nellie jarvis, edna kathleen smith, james smith, mary pickard, beverly archer smith, floyd featherstone smith, mabel archer, edward victor williams, william allan williams, rhoda bostock, stanley leroy crooker, stanley rogerson crooker, annie larrant, donald lachlan stevens groves, william george groves, clara mildred stevens.

BIRTHS

Schedule B.
N.B.—Record all still-births as births, as well as deaths.

County of Offord

Division of Sugarsale

Surname of child.	Surname first.	Surname first.	Surname first.
Cuthbert	Smith	Crocker	
Christian name.	Beverly Archer	Stanley Leroy	
Date of Birth.	Mar 11th 1916	Apr 1st 1916	
Where born? Street number or Con- cession and Lot.	Alexandra Hospital If in a hospital give its name Sugarsale	If in a hospital give its name Sugarsale	If in a hospital give its name Sugarsale
Sex.	Female	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	West Offord 1904	Culham, July 8th 1913	Windsor Nov 12 1912
Full name of Father.	John Wesley Cuthbert	Floyd Featherstone Smith	Stanley Rogerson Crocker
Address.	Ballens Corner	Sugarsale	Sugarsale
Occupation.	Farmer	Machinist	Machinist
Maiden name of Mother.	Nellie Jarvis	Mabel Archer	Annie Larrant
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Counter	Dr. Carrick
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	Still born	-	-
Name of Informant.	Edith Mac Bain	Mrs J. D. Lewis	Mrs Stephenson
Address.	Sugarsale	Sugarsale	Sugarsale
Date of Return.	Apr 2nd 1916	Apr 3rd 1916	Apr 7th 1916
Surname of child.	Smith, Edna Kathleen	Williams	Brown
Christian name.	Edna Kathleen	Edward Victor	Donald Leslie Stephen
Date of Birth.	March 10th 1916	Mar 13th 1916	Mar 21st 1916
Where born? Street number or Con- cession and Lot.	Alexandra St. Sugarsale If in a hospital give its name.	Alexandra If in a hospital give its name Sugarsale	Alexandra Hospital If in a hospital give its name Sugarsale
Sex.	Female	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	St. Catharines Sept 11th 1911	England 1911	Sussex Mar 20th 1909
Full name of Father.	Smith James C.	William Allan Williams	William George Brown
Address.	Alexandra St. Sugarsale	Sugarsale	Sugarsale
Occupation.	Machinist	Machinist	Farmer
Maiden name of Mother.	Mary Pickard	Rhoda Bastien	Clara Mildred Steerin
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Counter	Dr. Counter	Dr. Carrick
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Mrs J. C. Smith	W. A. Williams	L. S. Weaver
Address.	Sugarsale	Sugarsale	Sugarsale
Date of Return.	April 4th 1916	Apr 11th 1916	Apr 12th 1916

I hereby certify the foregoing to be the true and correct entries of all births returned to me for the quarter year ending June 30th 1916
 Given under my hand this 11th day of July A.D. 1916
 District Registrar of Sugarsale P.O.

Helen barbara wilson, william ewart wilson, ada irene morley, donald ross mckee, frederick gilbert mckee, vera mcmillan, henry john leslie daniel, john leslie daniel, 1916

Schedule B.
M.B.—Record all still-births as births, as well as deaths.

BIRTHS

County of Jefferson Division of Ingersoll

	Surname first	Surname first	Surname first
Surname of child.	Wilson	Mckee	Daniel
Christian name.	Helen Barbara	Donald Ross	Henry John Leslie
Date of Birth.	June 6th 1916	June 27th 1916	June 2nd 1916
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Female	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingersoll, Sept 2nd 1914	Ingersoll, Mar 2nd 1916	Ingersoll July 2nd 1904
Full name of Father.	William Ewart Wilson	Frederick Gilbert Mckee	John Leslie Daniel
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Electrician	Soldier	Machinist
Maiden name of Mother.	Ada Irene Morley	Vera D. McMillan	Mary Beigh
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Luntzer	Dr. Williams	Dr. Luntzer
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	Still born	-
Name of Informant.	Mrs. W. E. Wilson	Paul S. Mckee	Mrs. J. L. Daniel
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	June 27th 1916	June 28th 1916	June 30th 1916
Surname first		Surname first	Surname first
Surname of child.			
Christian name.			
Date of Birth.			
Where born? Street number or Con- cession and Lot.	If in a hospital give its name.	If in a hospital give its name.	If in a hospital give its name.
Sex.			
Are the Parents married?			
Where and when married.			
Full name of Father.			
Address.			
Occupation.			
Maiden name of Mother.			
Is she single or a widow?			
Name of Physician in at- tendance.			
Were you in house at time of Birth?			
Twin, Triplet, Illegitimate or Still-born.			
Name of Informant.			
Address.			
Date of Return.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1916

Given under my hand this 11th day of July
Division Registrar of Ingersoll

W. E. Smith

P.O.

Irene Elizabeth Rutherford, William Rutter, Susan Spence, Eugenia Andon, Maria Brungio, Ad-
 bringio, Cungiello Carmello, James Leo Ranger, Leo John Ranger, Merian Pearl Wiltshire, Cath-
 jane Cussons, Laura Ann Pooley, Harold Goodwin Hill, Rowland Hill, Elizabeth Goodwin, William
 John Langdon, Charles Langdon, Eliza Rebecca Garland.

Schedule B.
 Form 10—Record all still-births as births,
 as well as deaths.

BIRTHS

County of Jefferson

Division of Wyersdale

	Surname first	Surname first	Surname first
Surname of child	Rutherford	Ranger	Heice
Christian name	Irene Elizabeth	James Leo	Harold Goodwin
Date of Birth	Aug 2nd 1916	Aug 27th 1916	Sept 2nd 1916
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Are the Parents married?	Yes	Yes	Yes
When and when married	Broomfield, Sept 12th 1911	Orindon, April 2nd 1915	England Sept 14th 1906
Full name of Father	William Rutherford	Leo John Ranger	Rowland Heice
Address	Ingersoll	Ingersoll	Ingersoll
Occupation	Mid Constable	Expressman	Coal Miner
Maiden name of Mother	Susan Spence	Merian Pearl Wiltshire	Elizabeth Goodwin
Is she single or a widow?	-	-	-
Name of Physician in at- tendance	Dr Williams	Dr Carnish	Dr Coulter
Were you in house at time of Birth?	No	Yes	No
Twin, Triplet, Illegitimate or Still born	-	-	-
Name of Informant	Wm Rutherford	Leo J Ranger	Rowland Heice
Address	Ingersoll	Ingersoll	Ingersoll
Date of Return	Aug 30th 1916	Sept 6th 1916	Sept 12th 1916
Surname first	Brungio	Cussons	Langdon
Surname of child	Brungio	Catherina John	William John
Christian name	Catherina	Wiltshire	Langdon
Date of Birth	Sept 6th 1916	Sept 9th 1916	Aug 20th 1916
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex	Male	Female	Male
Are the Parents married?	Yes	Yes	Yes
When and when married	22th Dec 1908	England 1913	England Mar 14th 1914
Full name of Father	Angelo Carmello + Fredmer Cussons		Charles Langdon
Address	Ingersoll	Ingersoll	Ingersoll
Occupation	Printer	Soldier	Miner
Maiden name of Mother	Agulis Brungio + Emma Ann Bailey		Elizabeth Rebecca Garland
Is she single or a widow?	-	-	-
Name of Physician in at- tendance	Dr Rogers	Dr Gurling	Dr Rogers
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still born	-	-	-
Name of Informant	W. Brungio	F Cussons	Mrs. Chas Langdon
Address	Ingersoll	Ingersoll	Ingersoll
Date of Return	Sept 12th 1916	Sept 14th 1916	Sept 14th 1916

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30 1916
 Given under my hand this 12th day of Oct A.D. 1916
 Division Registrar of Ingersoll

Tyrus raymon markham, walter frederick markham, sarah dales, mary elizabeth nelson, charles nelson, annie pearl wilson, william parke rogers, john morrison rogers, edythe bell hambridge, john william nelson, charles nelson, annie pearl wilson, hilda margaret tees, william herbert tees, margaret, addison leroy pyatt, samuel adolphus pyatt, mary jane hill.

BIRTHS

Schedule B.
N.B.—Record all still-births as births,
as well as deaths.

County of Jefferson

Division of Ingersoll

	Surname and Birth	Surname and Birth	Surname and Birth
Surname of child.	Markham	Rogers	Tees
Christian name.	Tyrus Raymon	William Burke	Hilda Margaret
Date of Birth.	June 2 nd 1916	June 15 th 1916	June 17 th 1916
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Married Oct 19 th 1900	Aug 1902	Married June 30 th 1909
Full name of Father.	Walter Fredrick Markham	John Morrison Rogers	William Herbert Tees
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Drayman	Physician	Mechanic
Maiden name of Mother.	Sarah Dales	Eduytha Bell Hambridge	Margaret
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Coulter	Dr. Rogers
Were you in house at time of Birth?	No	No	Yes
Twin, Triple, Illegitimate or Still-born.	-	-	-
Name of Informant.	W. F. Markham	J. M. Rogers	J. M. Rogers
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	July 2 nd 1916	July 15 th 1916	July 15 th 1916
Surname and Birth	Nelson	Nelson	Pyatt
Christian name.	Mary Elizabeth	John Wilson	Addison Leroy
Date of Birth.	July 13 th 1916	July 13 th 1916	June 27 th 1916
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Female	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingersoll Sept 17 th 1913	Ingersoll Sept 17 th 1916	Ingersoll, Nov 29 th 1916
Full name of Father.	Charles Nelson	Charles Nelson	Samuel Adolphus Pyatt
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Accountant	Accountant	Mechanic
Maiden name of Mother.	Annie Beaul Wilson	Annie Beaul Wilson	Mary Jane Hill
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Williams	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triple, Illegitimate or Still-born.	Swim	Swim	-
Name of Informant.	Char Nelson	Char Nelson	S. A. Pyatt
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	July 17 th 1916	July 17 th 1916	July 27 th 1916

I hereby certify the foregoing to be the true and correct copies of all Births returned to me for the quarter year ending Sept 30
 Given under my hand this 12th day of Oct A.D. 1916
 Division Registrar of Ingersoll

BIRTHS

Willard arden crane, william crane, olive crane, richard stephenson, charles milton stephenson, mary graydon, dorothy irene caughtley, gordon jackson caughtley, pearl white, william sidney spencer, wesley spencer, florence agnes waters, william henry duke, william duke, isabella metcalf, anna frances tanton, francis tanton.

County of Offard

Division of Ingersall

	Surname First	Surname First	Surname First
Surname of child.	Crane	Caughtley	Duke
Christian name.	Willard Arden	Dorothy Irene	William Henry
Date of Birth.	July 26th 1916	June 24th 1916	July 31st 1916
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersall	If in a hospital give its name Ingersall	If in a hospital give its name Ingersall
Sex.	Male	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingersall July 22nd 1916	London, Ont. 20th 1915	Ingersall, March 1914
Full name of Father.	William Crane	Gordon Jackson Caughtley	William Duke
Address.	Ingersall	Ingersall	Ingersall
Occupation.	Mechanic	Butcher	Mechanic
Maiden name of Mother.	Olive Vandusen	Carl White	Isabella Metcalf
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Carmick	Dr. Williams	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	William Crane	H. G. Caughtley	William Duke
Address.	Ingersall	Ingersall	Ingersall
Date of Return.	July 27th 1916	July 25th 1916	July 31st 1916
Surname First	Stephenson	Spencer	Tanton
Christian name.	Bulah	William Sidney	Anna Frances
Date of Birth.	July 30th 1916	July 6th 1916	June 23rd 1916
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersall	If in a hospital give its name Ingersall	If in a hospital give its name Ingersall
Sex.	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Camden, N.J. 10th 1905	Ingersall, Oct 13th 1914	Engle, June 25th 1906
Full name of Father.	Charles Milton Stephenson	Wesley Spencer	Francis Tanton
Address.	Ingersall	Dixville, O.D.	Ingersall
Occupation.	Barryman	Baptist Minister	Soldier
Maiden name of Mother.	Mary Graydon	Florence Agnes Waters	-
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Carmick	Dr. Lambert	Dr. Rogers
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	Still Born	-	-
Name of Informant.	Chas. M. Stephenson	F. W. Waters	Mrs. Tanton
Address.	Ingersall	Ingersall	Ingersall
Date of Return.	Aug 1st 1916	Aug 5th 1916	Aug 4th 1916

I hereby certify the foregoing to be the true and correct copies of all Births returned to me for the quarter year ending Sept 30 1916

Given under my hand this 12th day of Oct A.D. 1916
Division Registrar of Ingersall

Mildred russell, george russell, lousia barnett, leo frank harold, leo frank harold, arthur william harold, ada laura oliver, georgie simmons, joseph simmons, emily jackson, margaret graham copeland, james copeland, mary shields, margaret reta whitfield, william storey whitfield, alice lydia pellow, evelyn jean hayward, william edward hayward, gertude cummings

BIRTHS

Schedule B.
W.B.—Record all still-births as births,
as well as deaths.

County of Jefferson

Division of Ingersoll

	Surname first.	Surname first.	Surname first.
Surname of child.	Russell	Simmons	Whitfield
Christian name.	Mildred	George	Margaret Reta
Date of Birth.	July 1st 1916	Aug 9th 1916	July 26th 1916
Where born? Street number or Concession and Lot.	At home	At home	At home
Sex.	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingersoll June 25th 1915	Ingersoll Aug 7th 1907	Ingersoll Nov 2nd 1912
Full name of Father.	George Russell	Joseph Simmons	William Henry Whitfield
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Carpenter	Labourer	Artist
Maiden name of Mother.		Emily Jackson	Alice Lyda Pellow
Is she single or a widow?	Single	Single	Single
Name of Physician in attendance.	Dr. Williams	Dr. Carter	Dr. Rogers
Were you in house at time of Birth?	Yes	Yes	No
Twin, Triplet, Illegitimate or Still-born.	No	One	No
Name of Informant.	Geo Russell	Mrs J. Simmons	W. S. Whitfield
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Aug 10th 1916	Aug 10th 1916	Aug 17th 1916
Surname first.			
Surname of child.	Harold	Copeland	Hayward
Christian name.	Leo Frank	Margaret Braham	Evelyn Jean
Date of Birth.	June 16th 1916	Aug 17th 1916	Aug 8th 1916
Where born? Street number or Concession and Lot.	At home	At home	At home
Sex.	Male	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Infant, Dec 26th 1911	London, Oct 2nd 1915	Sarantis, Sept 1st 1915
Full name of Father.	Arthur William Harold	James Copeland	William Edward Hayward
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Soldier	Labourer	Machinist
Maiden name of Mother.	Ada Laura Oliver	Mary Shields	Bertrude Cummings
Is she single or a widow?	Single	Single	Single
Name of Physician in attendance.	Dr. Williams	Dr. Gynsburg	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	No	No	No
Name of Informant.	Mrs A W Harold	James Copeland	W E Hayward
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Aug 19th 1916	Aug 29th 1916	Aug 29th 1916

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30 1916
Given under my hand this 12th day of Oct A.D. 1916
Division Registrar of Ingersoll

P.O.

BIRTHS

Donald james cronk, earl emerson cronk, esther annie edwards, louise may hagel, charles henry hagel, grace annie nichols, mildred may glancy, russell glancy, annie may tewell, ethel agnes may rowlinson, john joseph rowlinson, lily may demmery smith, james ernest harry blackman, margaret mae thomas, frances louise parker, arthur ormsby parker, annie murray borrowman

County of Jefferson

Division of Ingersoll

	Surname First	Surname First	Surname First
Surname of child.	Cronk	Glancy	Blackman
Christian name.	Donald James	Mildred May	James Ernest Henry
Date of Birth.	Sept 22nd 1916	Sept 13th 1916	Sept 21st 1916
Where born? Street number or Con- cession and Lot.	If in a hospital give its name <u>Ingersoll</u>	If in a hospital give its name <u>Ingersoll</u>	<u>Alexandra Hospital</u> If in a hospital give its name <u>Ingersoll</u>
Sex.	Male	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	<u>Ingersoll, Oct 20th 1900</u>	<u>Deloit June 10th 1909</u>	<u>Henry Blackman +</u>
Full name of Father.	<u>Earl Emerson Cronk</u>	<u>Russell Glancy</u>	<u>Paul & Bertha</u>
Address.	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Sullivan</u>
Occupation.	<u>Carpenter</u>	<u>Mechanical</u>	<u>Ingersoll Mar 1st 1916 +</u>
Maiden name of Mother.	<u>Bessie Annie Edwards</u>	<u>Annie May Jewell</u>	<u>Margaret Mae Thomas</u>
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	<u>Dr. Coulter</u>	<u>Dr. McFarland</u>	<u>Dr. Rogers</u>
Were you in house at time of Birth?	Yes	Yes	No
Twin, Triplet, Illegitimate or Still-born	-	-	-
Name of Informant.	<u>E. Cronk</u>	<u>Mr. R. Glancy</u>	<u>Mrs. E. J. Thomas</u>
Address.	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Date of Return.	<u>Oct 16th 1916</u>	<u>Oct 16th 1916</u>	<u>Oct 20th 1916</u>
	Surname First	Surname First	Surname First
Surname of child.	Hagel	Rowlinson	Barker
Christian name.	Louise May	Ethel Agnes May	Frances Louise
Date of Birth.	Sept 26th 1916	Oct 11th 1916	Sept 20th 1916
Where born? Street number or Con- cession and Lot.	If in a hospital give its name <u>Ingersoll</u>	If in a hospital give its name <u>Ingersoll</u>	If in a hospital give its name <u>Ingersoll</u>
Sex.	Female	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	<u>Ingersoll Dec 15th 1910</u>	<u>Ingersoll, Oct 7th 1916</u>	<u>Blakethames Oct 22nd 1901</u>
Full name of Father.	<u>Charles Henry Hagel</u>	<u>John Joseph Rowlinson</u>	<u>Arthur Ormsby Barker</u>
Address.	<u>Springfield</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Occupation.	<u>Teacher</u>	<u>Soldier</u>	<u>Teacher</u>
Maiden name of Mother.	<u>Bessie Annie Nichols</u>	<u>Lily May Demmery Smith</u>	<u>Annie Munday Borrowman</u>
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	<u>Dr. Rogers</u>	<u>Dr. Williams</u>	<u>Dr. Coulter</u>
Were you in house at time of Birth?	No	No	No
Twin, Triplet, Illegitimate or Still-born	-	-	-
Name of Informant.	<u>L. H. Hagel</u>	<u>J. J. Rowlinson</u>	<u>A. O. Barker</u>
Address.	<u>Springfield</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Date of Return.	<u>Oct 21st 1916</u>	<u>Oct 21st 1916</u>	<u>Oct 22nd 1916</u>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1916
Given under my hand this 4th day of January A.D. 1917
Division Registrar of Ingersoll

Schedule B.
 N. B. - Record all still-births as births,
 as well as deaths.

BIRTHS

Gladys Alberta Macbeth; Thomas Albert Macbeth; Maggie Corless; Frederick Manzer; Gordon Frederick Manzer; Laura Bell Kaitting; Coraline Jane Cussans; Frederick Cussans; Laura Pooley; Jessie Ruth Marie Titus; Charles Titus; Mary Jane Kennedy; Roger William Reaves; Arthur William Reaves; Lottie May Haylock; Cyrus Jack Warren; Kimberley; Fred Angus Kimberley; Myrtle Irene Furtney.

County of Jefferson

Division of Ingersoll

	Surname First	Surname First	Surname First
Surname of child.	Macbeth	Cussans	Reaves
Christian name.	Gladys Alberta	Caroline Jane	Roger William
Date of Birth.	Sept 20th 1916	Sept 20th 1916	Aug 30th 1916
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Female	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Danchester Dec 20th 1911	England, Oct 30th 1912	Danham Mar 21st 1913
Full name of Father.	Thomas Albert Macbeth	Frederic Cussans	Orbin William Reaves
Address.	Ingersoll	Ingersoll	Salford
Occupation.	Well Driller	Soldier	Farmer
Maiden name of Mother.	Maggie Corless	Barra Coaley	Battie May Haylock
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Carnish	Dr. Furlong	D. Rogers
Were you in house at time of Birth?	Yes	Yes	No
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Mrs. S. A. Macbeth	Mrs. Furlong	D. W. Reaves
Address.	Ingersoll	Ingersoll	Salford Ingersoll
Date of Return.	Oct 2nd 1916	Oct 4th 1916	Oct 7th 1916
Surname of child.	Manzer	Titus	Kimberley
Christian name.	Frederic	Jessie Ruth Marie	Cyrus Jack Warren
Date of Birth.	Oct 1st 1916	Sept 20th 1916	Sept 13th 1916
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Male	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Washburn, Dec 20th 1915	Washburn, June 13th 1908	Callahan July 19th 1913
Full name of Father.	Charles Frederick Manzer	Charles S. Titus	Fred Angus Kimberley
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Machinist	Labourer	Labourer
Maiden name of Mother.	Anna Bell Kaitting	Mary Jane Kennedy	Myrtle Irene Furtney
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Carulin	Dr. W. H. Hammett	Dr. Carnish
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	Still born	-	-
Name of Informant.	F. J. Manzer	Chas S. Titus	L. S. Harper
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Oct 7th 1916	Oct 10th 1916	Oct 14th 1916

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1916.
 Given under my hand this 4th day of January A.D. 1917

BIRTHS

Jessie christine healy, laurence verne healy, isabella murrow, ruth savage, george william savage, lillian turner, myra elizabeth doreen gray, edward gray, myra booker, ruby savage, george william savage, lillian turner, aima emma lee, george lee, wong hee, charles fenton, fred james fenton, mary anna houghton.

County of Offard Division of Ingersoll

	Surname first	Surname first	Surname first
Surname of child.	Healy	Gray	Lee
Christian name.	Jessie Christina	Myra Elizabeth Doreen	Alma ^{Ann}
Date of Birth.	Oct 26th 1916	Oct 13th 1916	Oct 26th 1916
Where born? Street number or Con- cession and Lot.	If in a hospital give its name <u>Ingersoll</u>	<u>Alexandra Hospital</u> If in a hospital give its name <u>Ingersoll</u>	If in a hospital give its name <u>Ingersoll</u>
Sex.	Female	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Sarault, Oct 10th 1915	Sarault May 22nd 1913	China 1902
Full name of Father.	Lawrence Dennis Healy	Edward Gray	George Lee
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Merchant	Wool Carver	Laundryman
Maiden name of Mother.	Isabella Murrow	Myra Booker	Wong Hee
Is the single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Coulter	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	Still Born	-	-
Name of Informant.	L. W. Healy	L. S. Hooper	George Lee
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Oct 26th 1916	Oct 27th 1916	Oct 24th 1916
Surname first	Savage	Savage	Fulton
Christian name.	Ruth	Ruby	Charles
Date of Birth.	Oct 20th 1916	Oct 20th 1916	Nov 3rd 1916
Where born? Street number or Con- cession and Lot.	If in a hospital give its name <u>Ingersoll</u>	If in a hospital give its name <u>Ingersoll</u>	<u>Alexandra Hospital</u> If in a hospital give its name <u>Ingersoll</u>
Sex.	Female	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	England July 13th 1909	England July 13th 1909	West Offord Oct 2nd 1907
Full name of Father.	George William Savage	George William Savage	Ed James Fulton
Address.	Ingersoll	Ingersoll	Wt Elgin
Occupation.	Soldier	Soldier	Farmer
Maiden name of Mother.	Lillian Turner	Lillian Turner	Mary Anna Houghton
Is the single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Coulter	Dr. Coulter	Dr. Rogers
Were you in house at time of Birth?	No	No	No
Twin, Triplet, Illegitimate or Still-born.	Still	Still	Still Born
Name of Informant.	L. W. Savage	L. W. Savage	J. Fulton
Address.	Ingersoll	Ingersoll	Wt Elgin
Date of Return.	Oct 30th 1916	Oct 30th 1916	Nov 4th 1916

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1916

Given under my hand this 4th day of January A.D. 1917

Division Registrar of Ingersoll

P.O.

Jackson heatherrington, william john hetherington, laura bain, donald folden guthrie, james murray guthrie, marian edith folden, james clayton asling, robert asling, ella brown, rosie helen brooks, albert william brooks, katharine chapman, pearl louise coxon, clarence william nuttle coxon, ellen grace barrow, jack percival mayberry, percy floyd mayberry, edna steven

BIRTHS

Schedule B.
W.B. - Record all births as births,
as well as deaths.

County of *Offord*

Division of *Ingersoll*

	Surname First	Surname First	Surname First
Surname of child	<i>Hetherington</i>	<i>Asling</i>	<i>Coxon</i>
Christian name	<i>Jackson</i>	<i>James Clayton</i>	<i>Bears Laurie</i>
Date of Birth	<i>Oct 14th 1916</i>	<i>Nov 1st 1916</i>	<i>Oct 26th 1916</i>
Where born? Street number or Con- vention and Lot.	<i>Alexandra Hospital If in a hospital give its name Ingersoll</i>	<i>Alexandra Hospital If in a hospital give its name Ingersoll</i>	<i>John St If in a hospital give its name Ingersoll</i>
Sex	<i>Male</i>	<i>Male</i>	<i>Female</i>
Are the Parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Where and when married.	<i>Silsbury June 1915</i>	<i>Chicago, Ill. Dec 16th 1903</i>	<i>Ingersoll, Sept 29th 1915</i>
Full name of Father.	<i>William John Hetherington</i>	<i>Robert Asling</i>	<i>Clarence William Nuttle Coxon</i>
Address	<i>Silsbury</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Occupation	<i>Banker</i>	<i>Cement Finisher</i>	<i>Machinist</i>
Maiden name of Mother.	<i>Laura Bain</i>	<i>Ella Brown</i>	<i>Ellen Grace Barrow</i>
Is she single or a widow?	-	-	-
Name of Physician in at- tendance	<i>Dr. Williams</i>	<i>Dr. Fairley</i>	<i>Dr. Lumbin</i>
Were you in house at time of Birth?	<i>No Yes</i>	<i>No</i>	<i>No</i>
Twin, Triplet, Illegitimate or Still born.	-	-	-
Name of Informant.	<i>Ralph Williams</i>	<i>Robert Asling</i>	<i>G. W. T. Coxon</i>
Address	<i>Ingersoll</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Date of Return	<i>Nov 6th 1916</i>	<i>Nov 7th 1916</i>	<i>Nov 13th 1916</i>
Surname of child	<i>Guthrie</i>	<i>Brooks</i>	<i>Mayberry</i>
Christian name	<i>Donald Folden</i>	<i>Rosie Helen</i>	<i>John Bertram</i>
Date of Birth	<i>Oct 22nd 1916</i>	<i>Nov 1st 1916</i>	<i>Nov 4th 1916</i>
Where born? Street number or Con- vention and Lot.	<i>Alexandra Hospital If in a hospital give its name Ingersoll</i>	<i>William St If in a hospital give its name Ingersoll</i>	<i>Alexandra Hospital If in a hospital give its name Ingersoll</i>
Sex	<i>Male</i>	<i>Female</i>	<i>Male</i>
Are the Parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Where and when married.	<i>West Offord Nov 31st 1914</i>	<i>England 1904</i>	<i>Dereham 27 May 23rd 1912</i>
Full name of Father.	<i>James Murray Guthrie</i>	<i>Albert William Brooks</i>	<i>Percy Floyd Mayberry</i>
Address	<i>Beachville</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Occupation	<i>Farmer</i>	<i>Labourer</i>	<i>Tradesman</i>
Maiden name of Mother.	<i>Marian Edith Folden</i>	<i>Katharine Chapman</i>	<i>Edna Stevens</i>
Is she single or a widow?	-	-	-
Name of Physician in at- tendance	<i>Dr. Williams</i>	<i>Dr. Lumbin</i>	<i>Dr. Lumbin</i>
Were you in house at time of Birth?	<i>No</i>	<i>No</i>	<i>Yes</i>
Twin, Triplet, Illegitimate or Still born.	-	-	-
Name of Informant.	<i>J. M. Guthrie</i>	<i>G. W. Brooks</i>	<i>Samuelson</i>
Address	<i>Beachville Ingersoll</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Date of Return	<i>Nov 13th 1916</i>	<i>Nov 13th 1916</i>	<i>Nov 17th 1916</i>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter-year ending *Dec 31st* 1916
Given under my hand this *4th* day of *January* A.D. 1917

BIRTHS

Margaret maud mcdougall, william alexander mcdougall, violet annie phipps, walter wallis douglas shales, william elmo sholes, emma sprey boyer boyes, thomas george henderson, george arthur henderson, emmabel davey, herman ernest mcmillan, benjamin alexander mcmillan, mary heard, thomas william turton, thomas william turton, fanny simpson, margaret elizabeth moyer, ernest moyer, esther wilford

County of *Jefferson* Division of *Jagersall*

	Surname First	Surname First	Surname First
Surname of child.	<i>McKenzell</i>	<i>Henderson</i>	<i>Durlan</i>
Christian name.	<i>Margaret Maud</i>	<i>Thomas George</i>	<i>Thomas Williams</i>
Date of Birth.	<i>Nov 5th 1916</i>	<i>Nov 24th 1916</i>	<i>Dec 14th 1916</i>
Where born? Street number or Con- cession and Lot.	<i>Jagersall</i> If in a hospital give its name	<i>Jagersall</i> If in a hospital give its name	<i>Jagersall</i> If in a hospital give its name
Sex.	<i>Female</i>	<i>Male</i>	<i>Male</i>
Are the Parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Where and when married.	<i>Washington Oct 9th 1914</i>	<i>Jagersall July 5th 1909</i>	<i>England Oct 4th 1902</i>
Full name of Father.	<i>William Alexander McKenzell</i>	<i>Henry Arthur Henderson</i>	<i>Wm William Durlan</i>
Address.	<i>Jagersall</i>	<i>Jagersall</i>	<i>Jagersall</i>
Occupation.	<i>Tracer</i>	<i>Machinist</i>	<i>Nut maker</i>
Maiden name of Mother.	<i>Violet Annie Chiffos</i>	<i>Emmabel Davey</i>	<i>Fanny Simpson</i>
Is the single or a widow?	<i>-</i>	<i>-</i>	<i>-</i>
Name of Physician in at- tendance.	<i>Dr. Williams</i>	<i>Dr. Williams & Lauder</i>	<i>Dr. Williams</i>
Were you in house at time of Birth?	<i>Yes</i>	<i>Yes</i>	<i>No</i>
Twin, Triplet, Illegitimate or Still-born.	<i>-</i>	<i>-</i>	<i>-</i>
Name of Informant.	<i>W. A. McKenzell</i>	<i>H. A. Henderson</i>	<i>Thos. W. Durlan</i>
Address.	<i>Jagersall</i>	<i>Jagersall</i>	<i>Jagersall</i>
Date of Return.	<i>Dec 4th 1916</i>	<i>Dec 18th 1916</i>	<i>Dec 20th 1916</i>
Surname of child.	<i>Shuler</i>	<i>McMillan</i>	<i>Mayer</i>
Christian name.	<i>William Bayles</i>	<i>Herman Ernest</i>	<i>Margaret Elizabeth</i>
Date of Birth.	<i>Nov 13th 1916</i>	<i>Nov 25th 1916</i>	<i>Nov 29th 1916</i>
Where born? Street number or Con- cession and Lot.	<i>Jagersall</i> If in a hospital give its name	<i>Jagersall</i> If in a hospital give its name	<i>Jagersall</i> If in a hospital give its name
Sex.	<i>Male</i>	<i>Male</i>	<i>Female</i>
Are the Parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Where and when married.	<i>Lydenham Aug 29th 1912</i>	<i>Jagersall Oct. 1899</i>	<i>Jagersall Nov 2nd 1903</i>
Full name of Father.	<i>William Elmo Shuler</i>	<i>Benjamin Alexander McMillan</i>	<i>Ernest G. H. Mayer</i>
Address.	<i>Jagersall</i>	<i>Jagersall</i>	<i>Jagersall</i>
Occupation.	<i>Teacher</i>	<i>Butcher</i>	<i>Machinist</i>
Maiden name of Mother.	<i>Emma Sprey Mayer</i>	<i>Mary Heard</i>	<i>Esther T. Wilford</i>
Is the single or a widow?	<i>-</i>	<i>-</i>	<i>-</i>
Name of Physician in at- tendance.	<i>Dr. Rogers</i>	<i>Dr. Williams</i>	<i>Dr. Larnick</i>
Were you in house at time of Birth?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Twin, Triplet, Illegitimate or Still-born.	<i>-</i>	<i>-</i>	<i>-</i>
Name of Informant.	<i>W. A. Shuler</i>	<i>B. A. McMillan</i>	<i>E. G. H. Mayer</i>
Address.	<i>Jagersall</i>	<i>Jagersall</i>	<i>Jagersall</i>
Date of Return.	<i>Dec 25th 1916</i>	<i>Dec 23rd 1916</i>	<i>Dec 29th 1916</i>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending *Dec 31st 1916*Given under my hand this *4th* day of *January*
Division Registrar of *Jagersall*

A. D. 1917

Frances may uncer, frank uncer, bessie kelloway kelloway, corothy p... richard latford, margaret may robinson, philip ferne murray, john murray, agnes lawson phillip, harold arthur parsons, william david parsons, anabel roberts, hilda edith neill, james vance neill, edith huckle, reuben james bodwell, oswald reginald bodwell, ruby bell smith

Schedule B.
U.S.—Record all still-births as births,
as well as deaths.

BIRTHS

County of Jefferson Division of Jagersall

	Surname first.	Surname first.	Surname first.
Surname of child.	Abner	Murray	Neill
Christian name.	James May	Phillip Fernie	Mailela Edith
Date of Birth.	Nov 10th 1916	Nov 20th 1916	Nov 4th 1916
Where born? Street number or Con- cession and Lot.	If in a hospital give its name. Jagersall	Alexandra Hospital If in a hospital give its name. Jagersall	Suburban If in a hospital give its name. Jagersall
Sex.	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
When and when married.	Jagersall Aug 30th 1915	Sarant's Aug 5th 1915	Jagersall Aug 27th 1912
Full name of Father.	Frank Abner	John Murray	James Bruce Neill
Address.	Jagersall	Jagersall	Jagersall
Occupation.	Domestic	Salesman	Babier
Maiden name of Mother.	Bessie Kelloway	Agnes Hansen Child	Edith Marekka
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Coulter	Dr. Rogers	Dr. Furlong
Were you in house at time of Birth?	Yes	No	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Mrs Frank Abner	John Murray	Mrs J. W. Neill
Address.	Jagersall	Jagersall	Jagersall
Date of Return.	Nov 23rd 1916	Nov 23rd 1916	Nov 24th 1916
Surname of child.	Beatford	Carsons	Radmell
Christian name.	Dorothy Beat	Harold Arthur	Reuben James
Date of Birth.	Oct 24th 1916	Nov 1st 1916	Nov 3rd 1916
Where born? Street number or Con- cession and Lot.	Victoria If in a hospital give its name. Jagersall	If in a hospital give its name. Jagersall	Alexandra Hospital If in a hospital give its name. Jagersall
Sex.	Female	Male	Male
Are the Parents married?	Yes	Yes	Yes
When and when married.	Bethels 1903	Aufman May 22nd	Strehm of Dec 12th 1915
Full name of Father.	Richard Beatford	William David Carson	Daniel Reginald Radmell
Address.	Jagersall	Jagersall	Jagersall
Occupation.	Machinist	Machinist	Farmer
Maiden name of Mother.	Margaret May Robinson	Anabel Roberts	Ruby Bell Smith
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Coulter	Dr. Coulter	Dr. Williams
Were you in house at time of Birth?	Yes	No	No
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Mrs R Beatford	W D Carsons	D R Radmell
Address.	Jagersall	Jagersall	Jagersall
Date of Return.	Nov 25th 1916	Nov 29th 1916	Dec 1st 1916

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1916
Given under my hand this 4th day of January A.D. 1917
Division Registrar of Jagersall

BIRTHS

Schedule B.
M.B. - Record of all births as births, as well as deaths.

County of Jefferson Division of Juniata

	Surname first	Surname first	Surname first
Surname of child.	Canall	Pierce	Wilford
Christian name.	Bobby	Evelyn Bell	Jean Elizabeth
Date of Birth.	Dec 25th 1916	Nov 29th 1916	Dec 13th 1916
Where born? Street number or Con- cession and Lot.	Allegheny Hospital If in a hospital give its name.	Allegheny Hospital If in a hospital give its name.	Allegheny Hospital If in a hospital give its name.
Sex.	Male	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Chicago Aug 17th 1915	Cumberland Md Aug 2nd 1910	London, Sept 26th 1906
Full name of Father.	William M. Canall	Thomas M. Pierce	William Wallace Wilford
Address.	Juniata	Juniata	Juniata
Occupation.	Butcher	Mechanic	Seaman
Maiden name of Mother.	Catharine Corbett	Della Briscoe	Lois Ethel Stephenson
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Cairish	Dr. Williams
Were you in house at time of Birth?	No.	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	See Born	-	-
Name of Informant.	W M Canall	Thomas M. Pierce	W W Wilford
Address.	Juniata	Juniata	Juniata
Date of Return.	Dec 29th 1916	Dec 29th 1916	Dec 25th 1916
Surname first			
Surname of child.			
Christian name.			
Date of Birth.			
Where born? Street number or Con- cession and Lot.	If in a hospital give its name.	If in a hospital give its name.	If in a hospital give its name.
Sex.			
Are the Parents married?			
Where and when married.			
Full name of Father.			
Address.			
Occupation.			
Maiden name of Mother.			
Is she single or a widow?			
Name of Physician in at- tendance.			
Were you in house at time of Birth?			
Twin, Triplet, Illegitimate or Still-born.			
Name of Informant.			
Address.			
Date of Return.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1916
Given under my hand this 4th day of January A.D. 1917
Division Registrar of Juniata

BIRTHS

Lucy clayton, james henry clayton, clara jessie bell, mary eliza dickson, mary frederick dickson, mary jackson, marshall carthew, william thomas carthew, elizabeth sabell marshall, orville andrew leifer, william oruse leifer, amy smith, zelma grace wright, freeman wright, mary eliza bogarth, daniel reginald freeman, herbert edmund freeman, rose mary daniel

County of Jefferson

Division of Luzerne

	Surname First	Surname First	Surname First
Surname of child	Clayton	Carthew	Wright
Christian name	Henry	Marshall	Julia Grace
Date of Birth	July 20th 1917	July 1st 1917	July 22nd 1917
Where born Street number or Con- cession and Lot.	At a hospital give its name Ingersoll	At a hospital give its name Ingersoll	At a hospital give its name Ingersoll
Sex	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	England July 20th 1915	Oregon Sept 15th 1912	Windsor May 10th 1900
Full name of Father.	James Henry Clayton	William Thomas Carthew	Freeman M Wright
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Cabinet-Maker	Accountant	Accountant
Maiden name of Mother.	Clara Jessie Bell	Elizabeth Jessie Marshall	Mary Eliza Bogarth
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Rogers	Dr. Williams	Dr. Williams
Were you in house at time of Birth?	Yes	No	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Jos H Clayton	W J Carthew	J M Wright
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return	Mar 5th 1917	Mar 7th 1917	Mar 12th 1917
Surname First	Dickson	Leifer	Freeman
Christian name.	Mary Eliza	Orville Andrew	Daniel Reginald
Date of Birth.	Mar 2nd 1917	Mar 10th 1917	July 22nd 1917
Where born Street number or Con- cession and Lot.	At a hospital give its name Ingersoll	At a hospital give its name Ingersoll	At a hospital give its name Ingersoll
Sex.	Female	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Windsor, Ohio 20th 1914	Delhi Oct 25th 1909	Windsor Mar 15th 1911
Full name of Father.	William Jackson Dickson	William Oruse Leifer	Herbert Edmund Freeman
Address.	Ingersoll	England	Windsor, Ont.
Occupation.	Moulder	Soldier	Machinist
Maiden name of Mother.	Mary Jackson	Amy Smith	Rose Mary Daniel
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Corriah	Dr. Corriah	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	No
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Mrs W J MacMillan	Mrs W O Leifer	H E Freeman
Address.	Ingersoll	Ingersoll	Windsor
Date of Return.	Mar 17th 1917	Mar 21st 1917	Mar 22nd 1917

I hereby certify the foregoing to be the true and correct entries of all Births returned for the quarter year ending Mar 31st 1917.
GIVEN under my hand this 12th day of April A.D. 1917
Division Registrar of Ingersoll

Beatrice ellen jones, charles janes, ellen cummings, jean lowe, abram lowe, helen winifred metherell, helen mornison wallace, mcdonald wallace, jessie dross, william alan hargan, john edgar hargan, annie jones, david william hagar, frederic lewis hagan, mary louse hamilton, violet mabel moore, frederick walter moore, effie cornwell

BIRTHS

Schedule B.
N.S. - Record all still-births as well as deaths.

County of Offord

Division of Ingersoll

Surname first.	Surname first.	Surname first.
Surname of child. <u>Jones</u>	<u>Wallace</u>	<u>Hagan</u>
Christian name. <u>Beatrice Helen</u>	<u>Helen Marison</u>	<u>Doris William</u>
Date of Birth. <u>July 10th 1917</u>	<u>July 2nd 1917</u>	<u>Mar 1st 1917</u>
Where born? Street number or Concession and Lot. <u>If in a hospital give its name</u> <u>Ingersoll</u>	<u>If in a hospital give its name</u> <u>Ingersoll</u>	<u>If in a hospital give its name</u> <u>Ingersoll</u>
Sex. <u>Female</u>	<u>Female</u>	<u>Male</u>
Are the Parents married? <u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Where and when married. <u>Charles Jones + London. Oct 30th 1907</u>	<u>London. Oct 30th 1907</u>	<u>Port Huron June 14th 1906</u>
Full name of Father. <u>Ingersoll Geo 2nd 1915 +</u>	<u>McDonald Wallace</u>	<u>Frederic Lewis Hagan</u>
Address. <u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Occupation. <u>Machinist</u>	<u>Gen</u>	<u>Contractor</u>
Maiden name of Mother. <u>Ellen Cumming</u>	<u>Lucie Barbara Reed</u>	<u>Mary Louise Hamilton</u>
Is she single or a widow? <u>-</u>	<u>-</u>	<u>-</u>
Name of Physician in attendance. <u>Dr Carmick</u>	<u>Dr. Williams</u>	<u>Dr. Williams</u>
Were you in house at time of Birth? <u>Yes</u>	<u>No</u>	<u>Yes</u>
Twin, Triplet, Illegitimate or Still-born. <u>-</u>	<u>-</u>	<u>-</u>
Name of Informant. <u>Charles Jones</u>	<u>M.D. Wallace</u>	<u>Geo L. Hagan</u>
Address. <u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Date of Return. <u>July 24th 1917</u>	<u>July 26th 1917</u>	<u>Mar 2nd 1917</u>
Surname first.	Surname first.	Surname first.
Surname of child. <u>Low</u>	<u>Hargan</u>	<u>Moore</u>
Christian name. <u>Jean</u>	<u>William Alan</u>	<u>Violet Mabel</u>
Date of Birth. <u>Mar 4th 1917</u>	<u>July 19th 1917</u>	<u>July 8th 1917</u>
Where born? Street number or Concession and Lot. <u>If in a hospital give its name</u> <u>Ingersoll</u>	<u>If in a hospital give its name</u> <u>Ingersoll</u>	<u>If in a hospital give its name</u> <u>Ingersoll</u>
Sex. <u>Female</u>	<u>Male</u>	<u>Female</u>
Are the Parents married? <u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Where and when married. <u>Burlington Jan 4th 1907</u>	<u>Ingersoll Sept 17th 1907</u>	<u>Ingersoll July 25th 1901</u>
Full name of Father. <u>Abraham James Low</u>	<u>John Edgar Hargan</u>	<u>Frederic James Walter Moore</u>
Address. <u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Occupation. <u>Bank Manager</u>	<u>Superintendent</u>	<u>Teacher</u>
Maiden name of Mother. <u>Helen Winifred Mitchell</u>	<u>Annie Jones</u>	<u>Effie B Carmick</u>
Is she single or a widow? <u>-</u>	<u>-</u>	<u>-</u>
Name of Physician in attendance. <u>Dr. Williams</u>	<u>Dr. Williams</u>	<u>Dr. Carmick</u>
Were you in house at time of Birth? <u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Twin, Triplet, Illegitimate or Still-born. <u>Still Born</u>	<u>-</u>	<u>-</u>
Name of Informant. <u>Dr. Carmick</u>	<u>John Edgar Hargan</u>	<u>Mrs Carmick</u>
Address. <u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Date of Return. <u>Mar 5th 1917</u>	<u>Mar 5th 1917</u>	<u>Mar 5th 1917</u>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1917

Given under my hand this 12th day of April

A.D. 1917

Rose pauline johnson, edward johnson, rosemaria, viola marian salmon, salmon, charles asa martin cornish, charles cecil cornish, eleanor pearl eggler konggas, andrew konggas, marjorie laondartin, francis donald schofield, francis schofield, clara strowbridge, leila simmons, burton orin simmons, mabel rogem

BIRTHS

Schedule B.
N.B.—Record all still-births as births, as well as deaths.

County of *Jefferson* Division of *Ingersoll*

	Surname First	Surname First	Surname First
Surname of child.	<i>Johnson</i>	<i>Cornish</i>	<i>Behafield</i>
Christian name.	<i>Rose Caroline</i>	<i>Charles Asa Martin</i>	<i>Francis Bernard</i>
Date of Birth.	<i>Jan 16th 1917</i>	<i>Jan 29th 1917</i>	<i>Jan 22nd 1917</i>
Where born? Street number or Con- cession and Lot.	<i>If in a hospital give its name Ingersoll</i>	<i>If in a hospital give its name Ingersoll</i>	<i>Alexander Washfield If in a hospital give its name Ingersoll</i>
Sex.	<i>Female</i>	<i>Male</i>	<i>Male</i>
Are the Parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Where and when married.	<i>Ingersoll June 22nd 1914</i>	<i>Kanlan. Jan 5th 1916</i>	<i>Ingersoll. Apr 11th 1912</i>
Full name of Father.	<i>Edward Johnson</i>	<i>Charles Cecil Cornish</i>	<i>Francis Charles Behafield</i>
Address.	<i>Ingersoll</i>	<i>Ingersoll</i>	<i>Sarsula</i>
Occupation.	<i>Merchant</i>	<i>Physician</i>	<i>Accountant</i>
Maiden name of Mother.	<i>Rose Minard</i>	<i>Eleanor Pearl Eggler</i>	<i>Clara Strowbridge</i>
Is she single or a widow?	<i>-</i>	<i>-</i>	<i>-</i>
Name of Physician in at- tendance.	<i>Dr. Coulter</i>	<i>Dr. Coulter</i>	<i>Dr. Coulter</i>
Were you in house at time of Birth?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Twin, Triplet, Illegitimate or Still born.	<i>-</i>	<i>-</i>	<i>-</i>
Name of Informant.	<i>Mrs E Johnson</i>	<i>E E Cornish</i>	<i>E M Sanderson</i>
Address.	<i>Ingersoll</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Date of Return.	<i>July 2nd 1917</i>	<i>July 5th 1917</i>	<i>July 7th 1917</i>
Surname of child.	<i>Salmon</i>	<i>Konggas</i>	<i>Simmons</i>
Christian name.	<i>Viola Marian</i>	<i>Ellen</i>	<i>Leila</i>
Date of Birth.	<i>Jan 21st 1917</i>	<i>Jan 12th 1917</i>	<i>Jan 22nd 1917</i>
Where born? Street number or Con- cession and Lot.	<i>If in a hospital give its name Ingersoll</i>	<i>If in a hospital give its name Ingersoll</i>	<i>If in a hospital give its name Ingersoll</i>
Sex.	<i>Female</i>	<i>Female</i>	<i>Female</i>
Are the Parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Where and when married.	<i>Kanlan St. Dec 12th 1912</i>	<i>Ingersoll. Jan 29th 1915</i>	<i>Jefferson. Apr 11th 1915</i>
Full name of Father.	<i>George Edwin Salmon</i>	<i>Orville Konggas</i>	<i>Burton Orin Simmons</i>
Address.	<i>Ingersoll</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Occupation.	<i>Mechanic</i>	<i> Clerk</i>	<i>Butcher</i>
Maiden name of Mother.	<i>Viola Theresa Coleman</i>	<i>Marjorie Sanderson</i>	<i>Mabel Ingersoll</i>
Is she single or a widow?	<i>-</i>	<i>-</i>	<i>-</i>
Name of Physician in at- tendance.	<i>Dr. Coulter</i>	<i>Dr. Williams</i>	<i>Dr. Coulter</i>
Were you in house at time of Birth?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Twin, Triplet, Illegitimate or Still born.	<i>Yes. S. Salmon</i>	<i>-</i>	<i>B. O. Simmons</i>
Name of Informant.	<i>G. E. Salmon</i>	<i>O. Konggas</i>	<i>B. O. Simmons</i>
Address.	<i>Ingersoll</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Date of Return.	<i>July 9th 1917</i>	<i>July 10th 1917</i>	<i>July 20th 1917</i>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending *Mar 31st 1917*
Given under my hand this *12th* day of *April* A.D. 1917
Division Registrar of *Ingersoll*

Henry Joseph James, Frederick William Jones, Edith May McGeer; Margaret Pat...
 William James Alexander Allen, Agnes Grieve Long Lang, Emma June Lockett, William G...
 Lockett, Iva Ina Cook, James Brown; Margaret Sutherland, Herbert John Boynton, Mary
 Cumming, Charles Chester Chadwick, Olive Maude Millett

BIRTHS

Schedule B.
 M.B.—Record all still-births as births,
 as well as deaths.

County of Offord

Division of Sengsbury

	Surname first	Surname first	Surname first
Surname of child.	Jones	Lockett	Boydston
Christian name.	Henry Joseph	Emma June	Herbert John
Date of Birth.	Jan 27th 1917	July 11th 1917	Jan 27th 1917
Where born? Street number or Co- mmission and Lot.	If in a hospital give its name Sengsbury	If in a hospital give its name Sengsbury	If in a hospital give its name Sengsbury
Sex.	Male	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Wheaton Jan 1916	West Offord Oct 15th 1912	Sengsbury Dec 25th 1913
Full name of Father.	Judith William Jones	William Charles Lockett	John Herbert Boydston
Address.	Sengsbury	Sengsbury	Sengsbury
Occupation.	Mechanic	Mechanic	Mechanic
Maiden name of Mother.	Edith May Millett	Sue Cook	Mary Cumming
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Furlong	Dr. Carrish
Were you in house at time of Birth?	No.	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	H. R. Jones	Mrs W. C. Lockett	Mrs J. H. Boydston
Address.	Sengsbury	Sengsbury	Sengsbury
Date of Return.	July 15th 1917	July 20th 1917	July 22nd 1917
Surname first		Surname first	Surname first
Surname of child.	Allen	Brown	Chadwick
Christian name.	Margaret Patricia	James	Baby
Date of Birth.	Jan 20th 1917	Jan 20th 1917	July 16th 1917
Where born? Street number or Co- mmission and Lot.	If in a hospital give its name Sengsbury	If in a hospital give its name Sengsbury	If in a hospital give its name Sengsbury
Sex.	Female	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Sengsbury Mar 11th 1916	Scotland, 1909	London, Jan 22nd 1910
Full name of Father.	W. J. O. Allen	James Brown	Charles Chester Chadwick
Address.	Sengsbury	Sengsbury	Sengsbury
Occupation.	Clerk	Teacher	Mechanic
Maiden name of Mother.	Agnes Briene Long	Margaret J. Sutherland	Olive Maude Millett
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Coulter	Dr. Carrish	Dr. Carrish
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	Still Born
Name of Informant.	Mrs W. J. O. Allen	Mrs. James Brown	Mrs J. C. Chadwick
Address.	Sengsbury	Sengsbury	Sengsbury
Date of Return.	July 23rd 1917	July 22nd 1917	July 23rd 1917

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1917
 Given under my hand this 12th day of April A.D. 1917

BIRTHS

jean elizabeth naylor, george naylor, mary netty olmstead, dorothy lydia maxwell, lydia cook, wilfred douglas fitzmorris, thomas william fitzmorris, lilly william richardson, robert william richardson, daisy charlotte kibble, elizabeth tait, john malcolm tait, viola simmons, howard verdan griffin, charles nathaniel griffin, ethel louise aerial jenkins

County of Offord

Division of Sagersall

	Surname first	Surname first	Surname first
Surname of child	Naylor	Fitzmorris	Saile
Christian name	Jean Elizabeth	Wilfred Douglas	Elizabeth
Date of Birth	Dec 21st 1916	Dec 20th 1916	Jan 17th 1917
Where born? Street number or Con- cession and Lot.	If in a hospital give its name	If in a hospital give its name	If in a hospital give its name
Sex	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married	Widhamer, April 10th 1907	Bel Rausen July 15th 1903	Sagersall, Jan 1st 1917
Full name of Father	George Naylor	Thomas William Fitzmorris	John Malcolm Saile
Address	Sagersall	Sagersall	Sagersall
Occupation	Merchant	Machinist	Farmer
Maiden name of Mother	Mary Netty Olmstead	Billy May Cales	Viola Simmons
Is she single or a widow?	-	-	-
Name of Physician in at- tendance	Dr Williams	Dr Rogers	Dr Coulter
Were you in house at time of Birth?	Yes	Yes	No
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant	Geo Naylor	J W Fitzmorris	J M Saile
Address	Sagersall	Sagersall	Sagersall
Date of Return	Jan 15th 1917	Jan 15th 1917	Jan 14th 1917
Surname first	Mafuree	Richardson	Griffin
Christian name	Dorothy Isabella	William	Howard Verdan
Date of Birth	Dec 29th 1916	Jan 29th 1917	Jan 4th 1917
Where born? Street number or Con- cession and Lot.	If in a hospital give its name	If in a hospital give its name	If in a hospital give its name
Sex	Female	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married	Olmstead June 23rd 1913	Onis Oct 1st 1907	Sagersall, July 9th 1913
Full name of Father	Herbert Mafuree	Robert William Richardson	Charles Nathaniel Griffin
Address	Sagersall	Sagersall	Sagersall
Occupation	Builder	Driver	Farmer
Maiden name of Mother	Isabella Cook	Viola Charlotte Kibble	Ethel Louise Aerial Jenkins
Is she single or a widow?	-	-	-
Name of Physician in at- tendance	Dr Rogers	Dr Williams	Dr Coulter
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	Still Born	-
Name of Informant	Mr H. Mafuree	R W Richardson	C. N. Griffin
Address	Sagersall	Sagersall	Sagersall
Date of Return	Jan 19th 1917	Jan 29th 1917	Jan 31st 1917

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1917.
Given under my hand this 12th day of April A.D. 1917
Division Registrar of Sagersall

BIRTHS

jean caroline english, william english, hazel nowell, wellington hubert beatty, ma
kennedy, ralph arthur williams, constance jackson, donald john cornfoot, archibald
cornfoot, thursa may smith, james henry gilbert, robert henry gilbert, mary elsie pag
mcmillan vance, neil mcmillan vance, mary edith boydCounty of JeffersonDivision of Singersville

Surname first	Surname first	Surname first	
Surname of child.	English	Williams	Gilbert
Christian name.	Jean Caroline	Ralph Arthur	James Henry
Date of Birth.	Dec 14th 1916	Jan 2nd 1917	Dec 19th 1916
Where born? Street number or Con- cession and Lot.	Home If in a hospital give its name Singersville	Home If in a hospital give its name Singersville	Home If in a hospital give its name Singersville
Sex	Female	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married	Beechville June 11th 1914	New York Sept 3rd 1913	England Dec. 1897
Full name of Father	William H. English	Ralph Arthur Williams	Robert Henry Gilbert
Address	Singersville	Singersville	Singersville
Occupation	Finisher	Physician	Machinist
Maiden name of Mother	Nezget Natwell	Constance Jackson	Mary Elsie Boye
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Coulter	Dr. Williams	None
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still born	-	-	-
Name of Informant	Wm. H. English	Ralph A. Williams	R. H. Gilbert
Address	Singersville	Singersville	Singersville
Date of Return	Jan 2nd 1917	Jan 2nd 1917	Jan 6th 1917
Surname first	Surname first	Surname first	
Surname of child.	Beatty	Cornfoot	Dance
Christian name.	Beatty	Donald John	John McMillan
Date of Birth.	Jan 7th 1917	Dec 12th 1916	Dec 4th 1916
Where born? Street number or Con- cession and Lot.	Home If in a hospital give its name Singersville	Home If in a hospital give its name Singersville	Dependable Hospital If in a hospital give its name Singersville
Sex	Male	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married	Singersville, Nov 10th 1909	Singersville, Dec 21st 1916	Edmondston, Feb 24th 1916
Full name of Father	Wellington Hubert Beatty	Archibald James Cornfoot	Neil McMillan Dance
Address	Singersville	Singersville	Singersville
Occupation	Accountant	Electrician	Mary Edith Boye +
Maiden name of Mother	Mary Kennedy	Thursa May Mary Howard Smith	Machinist +
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Williams	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still born	-	-	-
Name of Informant	Wm. H. Beatty	Miss Henry Smith	Neil McMillan Dance
Address	Singersville	Singersville	Singersville
Date of Return	Jan 9th 1917	Jan 10th 1917	Jan 13th 1917

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st

1917

Given under my hand this

12th

day of April

A.D. 1917

Schedule B.
M.B. - Record all still-births as births,
as well as deaths.

BIRTHS

County of Jefferson Division of Ingersoll

	Surname first	Surname first	Surname first
Surname of child	<u>Tupper</u>	<u>Routledge</u>	<u>Leffaine</u>
Christian name	<u>Irene Clara</u>	<u>Alfred Arthur</u>	<u>Doris O'Leary</u>
Date of Birth	<u>Mar 28th 1917</u>	<u>Mar 12th 1917</u>	<u>Feb 27th 1917</u>
Where born? Street number or Con- cession and Loc.	<u>Alma</u> If in a hospital give its name.	<u>Charles</u> If in a hospital give its name.	<u>Ingersoll</u> If in a hospital give its name.
Sex	<u>Female</u>	<u>Male</u>	<u>Female</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Where and when married.	<u>Ingersoll Apr 28th 1916</u>	<u>Ingersoll Jan. 19th 1916</u>	<u>Ingersoll May 10th 1916</u>
Full name of Father.	<u>Arthur Harry Tupper</u>	<u>Arthur William Routledge</u>	<u>Alfred Leffaine</u>
Address.	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Occupation.	<u>Salesman</u>	<u>Salesman</u>	<u>Mechanic</u>
Maiden name of Mother.	<u>Clara E. Duboy</u>	<u>Beatrice Maude Underwood</u>	<u>Esther May Rice</u>
Is she single or a widow?	<u>-</u>	<u>-</u>	<u>-</u>
Name of Physician in at- tendance.	<u>Dr. Durland</u>	<u>Dr. Coulter</u>	<u>Dr. Williams</u>
Were you in home at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Twin, Triplet, Illegitimate or Still-born.	<u>-</u>	<u>-</u>	<u>-</u>
Name of Informant.	<u>Mrs. A. H. Tupper</u>	<u>Mrs. J. Underwood</u>	<u>Mrs. Alfred Leffaine</u>
Address.	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Date of Return.	<u>Mar 29th 1917</u>	<u>Mar 31st 1917</u>	<u>Mar 31st 1917</u>
Surname of child			
Christian name			
Date of Birth			
Where born? Street number or Con- cession and Loc.	If in a hospital give its name.	If in a hospital give its name.	If in a hospital give its name.
Sex			
Are the Parents married?			
Where and when married.			
Full name of Father.			
Address.			
Occupation.			
Maiden name of Mother.			
Is she single or a widow?			
Name of Physician in at- tendance.			
Were you in home at time of Birth?			
Twin, Triplet, Illegitimate or Still-born.			
Name of Informant.			
Address.			
Date of Return.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1917
Given under my hand this 12th day of April A.D. 1917

Division Registrar of

P.O.

Meddley verna halton, herbert halton, alice maud heard, samuel george collins, james collins, fannie jane young, margaret wood, george harris wood, sarah alberta playton, george leslie tribe, thomas frank leigh, nina garden tribe, john joseph morris, francis thomas morris, jessie hutchinson, gertrude jean mcreedy, george albert mcreedy, clara bell atkins.

Schedule B.
N.B.—Record all still-births as births,
as well as deaths.

BIRTHS

County of Offord Division of Ingersoll

	Surname first	Surname first	Surname first
Surname of child	Kealton	Woods	Morris
Christian name	Mildley Anna	Margaret	John Joseph
Date of Birth	Mar 17th 1917	Mar 22nd 1917	July 20th 1917
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex	Female	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married	Seneca Apr 4th 1909	Seneca May 21st 1913	Seneca Thomas Morris &
Full name of Father	Herbert Kealton	George Harris Woods	Ingersoll
Address	Ingersoll	Ingersoll	Ingersoll Jan 5th 1916
Occupation	carlier	inspector	farmer
Maiden name of Mother	Alice Maud Heard	Sarah Alberta Clayton	Jessie Hutchinson
Is she single or a widow?	-	-	-
Name of Physician in at- tendance	Dr. Williams	Dr. McDonald	Dr. Williams
Were you in house at time of Birth?	Yes	No	Yes
Twin, Triplet, Illegitimate or Still-born	-	Single Born	-
Name of Informant	Mrs W. Kealton	Mrs. W. Woods	Francis D. Morris
Address	Ingersoll	Ingersoll	Ingersoll
Date of Return	Mar 22nd 1917	Mar 24th 1917	Mar 26th 1917
Surname of child	Collins	Tribe	Mcreedy
Christian name	Samuel George	George Leslie	Gertrude Jean
Date of Birth	Mar 11th 1917	Mar 20th 1917	July 27th 1917
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married	Ingersoll June 14th 1902	Ingersoll Nov 15th 1910	Seneca July 1st 1911
Full name of Father	James Collins	Thomas Frank Tribe	George Albert Mcreedy
Address	Ingersoll	Ingersoll	Ingersoll
Occupation	Cement Worker	Mechanic	Mechanic
Maiden name of Mother	Fannie Jane Young	Nina Garden Tribe	Clara Bell Atkins
Is she single or a widow?	-	-	-
Name of Physician in at- tendance	Dr. McDonald	Dr. Furlong	Dr. Williams
Were you in house at time of Birth?	Yes	No	Yes
Twin, Triplet, Illegitimate or Still-born	-	-	-
Name of Informant	James Collins	G. Tribe	Mrs G. Mcreedy
Address	Ingersoll	Ingersoll	Ingersoll
Date of Return	Mar 27th 1917	Mar 25th 1917	Mar 29th 1917

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1917
Given under my hand this 10th day of Apr 1917

BIRTHS

Florence aida king, john william king, aida rose blane, thomas beattie henderson, j. henderson, sarah fairgrieve fairgrave, pearl violet sheldon, fred joseph sheldon, violet maud bailey, doris elsie petrie, george edgar petrie, elsie alice calon colon, irene mildred wurker, fredenck wurker, mary emma buckley, mary frances counter, jathro wordan counter, bianche richardson

County of Jefferson

Division of Surgeon General

	Surname first	Surname first	Surname first
Surname of child.	King	Henderson	Wurker
Christian name.	Florence Aida	Bea Violet	Irene Mildred
Date of Birth.	Mar 12th 1917	Mar 20th 1917	Mar 19th 1917
Where born? Street number or Con- cession and Lot.	Carnegie If in a hospital give its name <u>Ingersoll</u>	Carnegie If in a hospital give its name <u>Ingersoll</u>	If in a hospital give its name <u>Ingersoll</u>
Sex.	Female	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Columbus, July 9th 1916	Ingersoll, Oct. 12th 1912	England, Oct. 19th 1900
Full name of Father.	John William King	Fred Joseph Sheldon	Fredrick Wurker
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Bookkeeper	Night Watchman	Mechanic
Maiden name of Mother.	Aida Rose Blane	Violet Maud Bailey	Mary Emma Buckley
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. McDonald	Dr. Carnish	Dr. Carnish
Were you in house at time of Birth?	Yes	No	No
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Mrs J W King	F. J. Sheldon	Fred Wurker
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Apr 4th 1917	Apr 4th 1917	Apr 9th 1917
Surname of child.	Henderson	Betrie	Counter
Christian name.	Thomas Beattie	Doris Elsie	Mary Frances
Date of Birth.	Mar 27th 1917	April 2nd 1917	Mar 15th 1917
Where born? Street number or Con- cession and Lot.	If in a hospital give its name <u>Ingersoll</u>	If in a hospital give its name <u>Ingersoll</u>	If in a hospital give its name <u>Ingersoll</u>
Sex.	Male	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Aug. 1905	Ingersoll June 25th 1910	Ingersoll, Sept 21st 1915
Full name of Father.	John O Henderson	George Edgar Betrie	Jathro Wordan Counter
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Engineer	Mechanic	Physician
Maiden name of Mother.	Sarah Fairgrieve	Elsie Alice Colon	Bianche Richardson
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Carnish	Dr. Carnish	Dr. Carnish
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	J. O. Henderson	George & Betrie	J. W. Counter
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Apr 9th 1917	Apr 11th 1917	Apr 17th 1917

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1917
Given under my hand this 10th day of July 1917

Alfred george mcdonald wilson, james wilson, ethel cook cooke, marjorie jean murray, james garfield murray, mabel harris, lloyd george barton, ernest barton, frances edna hall, walter joseph hogan, thomas joseph hogan, barbara ernest, earl crane, royal edward crane, emma emma elstone, donald vance wade, samuel wade, elizabeth jane macdonald

BIRTHS

Schedule B.
B. B. - Record of Births, Deaths and Marriages.

County of

Division of

	Surname First	Surname First	Surname First
Born name of child:	Wilson	Barlow	Crane
Christian name:	Alfred George Macdonald	Rayald George	Earl
Date of Birth:	Apr 15th 1917	Apr 15th 1917	Apr 14th 1917
Where born? Street number or Con- cession and Loc.	Ingersoll If in a hospital give its name	Ingersoll If in a hospital give its name	Ingersoll If in a hospital give its name
Sex:	Male	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married:	Welland July 1st 1916	Welland June 14th 1914	Ingersoll Jan 25th 1916
Full name of Father:	James Wilson	Ernest Barlow	Rayald Edward Crane
Address:	Ingersoll	Ingersoll	Ingersoll
Occupation:	Munition Inspector	Mechanic	Upholsterer
Maiden name of Mother:	Carrie Cook	Francis Edna Keale	Emma Kelatano
Is she single or a widow?	-	-	-
Name of Physician in at- tendance:	Dr. Lumbin	Dr. Lumbin	Dr. Lumbin
Were you in house at time of Birth?	Yes	Yes	No
Twin, Triplet, Illegitimate or Still born.	-	-	-
Name of Informant:	James Wilson	Edna Barlow	R. E. Crane
Address:	Ingersoll	Ingersoll	Ingersoll
Date of Return:	Apr 26th 1917	Apr 25th 1917	Apr 20th 1917
Born name of child:	Murray	Hogan	Wade
Christian name:	Margaret Jean	Walter Joseph	Samuel Vance
Date of Birth:	Mar 31st 1917	Apr 15th 1917	Apr 14th 1917
Where born? Street number or Con- cession and Loc.	Ingersoll If in a hospital give its name	Ingersoll If in a hospital give its name	Ingersoll If in a hospital give its name
Sex:	Female	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married:	Ingersoll Sept 1st 1914	Welland Aug 20th 1910	Ingersoll June 20th 1916
Full name of Father:	James Barclay Murray	Thomas Joseph Hogan	Samuel Wade
Address:	Ingersoll	Ingersoll	Ingersoll
Occupation:	Det. Sergeant	Mechanic	Mechanic
Maiden name of Mother:	Mabel Harris	Barbara Ernest	Elizabeth Jane Macdonald
Is she single or a widow?	-	-	-
Name of Physician in at- tendance:	Dr. Lumbin	Dr. Lumbin	Dr. Williams
Were you in house at time of Birth?	Yes	-	-
Twin, Triplet, Illegitimate or Still born.	-	Yes	Yes
Name of Informant:	J. S. Murray	J. J. Hogan	Samuel Wade
Address:	Ingersoll	Ingersoll	Ingersoll
Date of Return:	Apr 20th 1917	May 1st 1917	May 7th 1917

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending

June 30th 1917

Given under my hand this 10th day of July

1917

Laura may luno, edward luno, margaret edna rourke, patrick devlin, john charles devlin, eleanor jane shearon, lillian maude bichener, harry bichener, emily cox, harry gordon sanders, james george sanders, eliza alvira case, eileen mary gill, percival ewart gill, alicia norina scott, william dickout, joseph dickout, sara ann rice

Schedule B.

N.B.—Record all still-births as births, as well as deaths.

BIRTHS

County of *Offord*

Division of *Singersall*

	Surname first.	Surname first.	Surname first.
Surname of child.	<i>Luna</i>	<i>Bichener</i>	<i>Hill</i>
Christian name.	<i>Luna May</i>	<i>Lillian Maude</i>	<i>Eileen Mary</i>
Date of Birth.	<i>Apr 21st 1917</i>	<i>Apr 21st 1917</i>	<i>Apr 12th 1917</i>
Where born? Street number or Concession and Lot.	<i>If in a hospital give its name Singersall</i>	<i>If in a hospital give its name Singersall</i>	<i>If in a hospital give its name Singersall</i>
Sex.	<i>Female</i>	<i>Female</i>	<i>Female</i>
Are the Parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Where and when married.	<i>Singersall June 1st 1913</i>	<i>England, Apr 21st 1894</i>	<i>Windsor July 2nd 1913</i>
Full name of Father.	<i>Edward C Luna</i>	<i>Harry Bichener</i>	<i>Ormond Ewart Hill</i>
Address.	<i>Singersall</i>	<i>Singersall</i>	<i>Singersall</i>
Occupation.	<i>Blacksmith</i>	<i>Labourer</i>	<i>Inspector</i>
Maiden name of Mother.	<i>Mary Eilva Ranker</i>	<i>Emily East</i>	<i>Oliver Maria Beatt</i>
Is she single or a widow?	<i>-</i>	<i>-</i>	<i>-</i>
Name of Physician in attendance.	<i>Dr. Luntin</i>	<i>Dr. Furlong</i>	<i>Dr. Rogers</i>
Were you in house at time of Birth?	<i>No</i>	<i>Yes</i>	<i>No</i>
Twin, Triple, Illegitimate or Still born.	<i>-</i>	<i>-</i>	<i>-</i>
Name of Informant.	<i>Edward C Luna</i>	<i>W. Furlong</i>	<i>O. E. Hill</i>
Address.	<i>Singersall</i>	<i>Singersall</i>	<i>Singersall</i>
Date of Return.	<i>May 7th 1917</i>	<i>May 7th 1917</i>	<i>May 11th 1917</i>
Surname first.	<i>Berlin</i>	<i>Sanders</i>	<i>Dickout</i>
Christian name.	<i>Cathie</i>	<i>Harry Gordon</i>	<i>William</i>
Date of Birth.	<i>Apr 14th 1917</i>	<i>Apr 21st 1917</i>	<i>May 13th 1917</i>
Where born? Street number or Concession and Lot.	<i>If in a hospital give its name Singersall</i>	<i>If in a hospital give its name Singersall</i>	<i>If in a hospital give its name Singersall</i>
Sex.	<i>Male</i>	<i>Male</i>	<i>Male</i>
Are the Parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Where and when married.	<i>Singersall Nov 1st 1911</i>	<i>England June 7th 1897</i>	<i>East Offord July 1st 1895</i>
Full name of Father.	<i>John Charles Berlin</i>	<i>James George Sanders</i>	<i>Joseph Dickout</i>
Address.	<i>Singersall</i>	<i>Singersall</i>	<i>Singersall</i>
Occupation.	<i>Blacksmith</i>	<i>Labourer</i>	<i>Farmer</i>
Maiden name of Mother.	<i>Eleanor Jane Shearon</i>	<i>Eliza Alvira Case</i>	<i>Sara Ann Rice</i>
Is she single or a widow?	<i>-</i>	<i>-</i>	<i>-</i>
Name of Physician in attendance.	<i>Dr. Williams</i>	<i>Dr. Luntin</i>	<i>Dr. Rogers</i>
Were you in house at time of Birth?	<i>Yes</i>	<i>Yes</i>	<i>-</i>
Twin, Triple, Illegitimate or Still born.	<i>-</i>	<i>-</i>	<i>-</i>
Name of Informant.	<i>J. C. Berlin</i>	<i>J. G. Sanders</i>	<i>Joseph Dickout</i>
Address.	<i>Singersall</i>	<i>Singersall</i>	<i>Singersall</i>
Date of Return.	<i>May 14th 1917</i>	<i>May 19th 1917</i>	<i>May 19th 1917</i>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending *June 30th 1917*

GIVEN under my hand this *10th* day of *July* 1917

Division Registrar of

P.O.

Mabel blanch owen, horace roy owen, lillian margaret turner, eleanor jean mckee, frederick gilbert mckee, vera agnes mcmillan, eleanor may long, edwin joseph long, ellen gibbs, esther stone, leslie stone, sarah sweden, william maurice jenkinson, william mokey jenkinson, ivy beatrice backing, george alfred tracey dodd, alfred thomas dodd, orpha tracey dickson.

Schedule B.
M.B.—Record all still-births as Births,
as well as deaths.

BIRTHS

County of Jefferson Division of Engersace

	Surname first.	Surname first.	Surname first.
Surname of child.	Owen	Long	Jenkinson
Christian name.	Mabel Blanch	Eleanor May	William Maurice
Date of Birth.	Apr 24th 1917	Apr 29th 1917	May 22nd 1917
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Engersace	If in a hospital give its name Engersace	If in a hospital give its name Engersace
Sex.	Female	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Engersace Dec 9th 1912	Engersace May 2nd 1916	Port Arthur Jan 1st 1912
Full name of Father.	Harold Roy Owen	Edwin Joseph Long	William Mahey Jenkinson
Address.	Engersace	Engersace	Engersace
Occupation.	Washer Boarder	Labourer	Contractor
Maiden name of Mother.	Lillian Margaret Turner	Eileen Hibbs	Ivy Beatrice Backing
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Furlong	Dr. Williams	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Mrs H. R. Owen	Mrs Walter Hibbs	W. Jenkinson
Address.	Engersace	Engersace	Engersace
Date of Return.	May 22nd 1917	May 23rd 1917	May 25th 1917
Surname first.			
Surname of child.	Mike	Blaine	Dodd
Christian name.	Eleanor Jean	Esther	George Alfred Tracey
Date of Birth.	May 22nd 1917	May 2nd 1917	May 29th 1917
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Engersace	If in a hospital give its name Engersace	If in a hospital give its name Engersace
Sex.	Female	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Engersace Mar 2nd 1916	Port Arthur Sept 2nd 1902	St Marys May 24th 1916
Full name of Father.	Frederick Gilbert Mckee	Leslie Stone	Alfred Thomas Dodd
Address.	Engersace	Engersace	Engersace
Occupation.	Soldier	Merchant	Machinist
Maiden name of Mother.	Vera Agnes McMillan	Sarah Sweden	Orpha Tracey Dickson
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Coulter	Dr. Carrick	Dr. Carrick
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Mrs J. S. Mckee	Leslie Stone	Alfred Thomas Dodd
Address.	Engersace	Engersace	Engersace
Date of Return.	May 20th 1917	June 1st 1917	June 4th 1917

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1917
Given under my hand this 10th day of July 1917

BIRTHS

George norman connor, harry connor, violet mccready, william lindsay, rose wilson,
oliver james scott, william james scott, ethel jane carey, frank ralph mckillan, behan
mcmilian, rachel ham hallam, phyllis audrey guggin, harry oswald guggin, ethel
sutherland bodwell, catharine cameron kidd, daniel cameron kidd, isabella spittal

County of Offord Division of Sengersall

	Surname first.	Surname first.	Surname first.
Surname of child.	<u>Lanman</u>	<u>Seatt</u>	<u>Budgin</u>
Christian name.	<u>George Norman</u>	<u>Oliver James</u>	<u>Phyllis Audrey</u>
Date of Birth.	<u>May 26th 1917</u>	<u>June 20th 1917</u>	<u>May 29th 1917</u>
Where born? Street number or Con- cession and Lot.	If in a hospital give its name <u>Sengersall</u>	If in a hospital give its name <u>Sengersall</u>	If in a hospital give its name <u>Sengersall</u>
Sex.	<u>Male</u>	<u>Male</u>	<u>Female</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Where and when married.	<u>Kanlon, Aug 20th 1914</u>	<u>Seafort, July 20th 1913</u>	<u>Saranta, May 12th 1911</u>
Full name of Father.	<u>Harry Lanman</u>	<u>William James Seatt</u>	<u>Harry Howard Budgin</u>
Address.	<u>Sengersall</u>	<u>Sengersall</u>	<u>Beckton, (back),</u>
Occupation.	<u>Mechanic</u>	<u>Munitions</u>	<u>Barber</u>
Maiden name of Mother.	<u>Violet McCreedy</u>	<u>Ethel Jane Carey</u>	<u>Ethel Sutherland Bodwell</u>
Is she single or a widow?	<u>-</u>	<u>-</u>	<u>-</u>
Name of Physician in at- tendance.	<u>Dr. Lumbin</u>	<u>Dr. Gurlong</u>	<u>Dr. Williams</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Twin, Triplet, Illegitimate or Still-born.	<u>-</u>	<u>-</u>	<u>-</u>
Name of Informant.	<u>Harry Lanman</u>	<u>Mrs W. J. Seatt</u>	<u>Ethel S. Budgin</u>
Address.	<u>Sengersall</u>	<u>Sengersall</u>	<u>Beckton</u>
Date of Return.	<u>June 19th 1917</u>	<u>June 22nd 1917</u>	<u>June 22nd 1917</u>
	Surname first.	Surname first.	Surname first.
Surname of child.	<u>Lindsay</u>	<u>McKellan</u>	<u>Kidd</u>
Christian name.	<u>Baby</u>	<u>Frank Ralph</u>	<u>Catharine Cameron</u>
Date of Birth.	<u>June 24th 1917</u>	<u>June 24th 1917</u>	<u>June 9th 1917</u>
Where born? Street number or Con- cession and Lot.	If in a hospital give its name <u>Sengersall</u>	If in a hospital give its name <u>Sengersall</u>	If in a hospital give its name <u>Sengersall</u>
Sex.	<u>Female</u>	<u>Male</u>	<u>Female</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Where and when married.	<u>Hamilton 1913</u>	<u>Kanlon, Aug 22nd 1901</u>	<u>Sengersall, July 2nd 1913</u>
Full name of Father.	<u>William Lindsay</u>	<u>Benjamin McKellan</u>	<u>Daniel Cameron Kidd</u>
Address.	<u>Sengersall</u>	<u>Sengersall</u>	<u>Sengersall</u>
Occupation.	<u>Mechanic</u>	<u>Manager</u>	<u>Mechanic</u>
Maiden name of Mother.	<u>Rose Wilford</u>	<u>Richard Keaton</u>	<u>Isabella S. Spittal</u>
Is she single or a widow?	<u>-</u>	<u>-</u>	<u>-</u>
Name of Physician in at- tendance.	<u>Dr. Lumbin</u>	<u>Dr. Williams</u>	<u>Dr. Lumbin</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Twin, Triplet, Illegitimate or Still-born.	<u>Still Born</u>	<u>-</u>	<u>-</u>
Name of Informant.	<u>Mrs J. Wilford</u>	<u>B. McKellan</u>	<u>D. C. Kidd</u>
Address.	<u>Sengersall</u>	<u>Sengersall</u>	<u>Sengersall</u>
Date of Return.	<u>June 24th 1917</u>	<u>June 27th 1917</u>	<u>June 29th 1917</u>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1917
Given under my hand this 10th day of July AD. 1917

James herbert fuller, herbert charles fuller, anne wright, blanch montgomery, meri daniel montgomery, della morgan, doris evelyn rine, joseph algernon rine, evelyn maud greenaway, william hunter meek, ernest roy meek, ida maud hunter, dorothy-marguerite case, joseph case, henrietta quinn, margaret mabel anne-marcey, arthur merney, emma ella mcintyre

Schedule B.
N.B. - Record all still-births as births, as well as deaths.

BIRTHS

County of Jefferson Division of Singersville

	Surname First	Surname First	Surname First
Surname of child.	Fuller	Rine	Case
Christian name.	James Herbert	Doris Evelyn	Dorothy Marguerite
Date of Birth.	May 10th 1917	May 17th 1917	May 25th 1917
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Singersville	If in a hospital give its name Singersville	If in a hospital give its name Singersville
Sex.	Male	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Wadesboro Oct 5th 1907	Singersville Oct 21st 1914	Singersville Mar 12th 1914
Full name of Father.	Herbert Charles Fuller	Joseph Algermon Rine	Joseph Case
Address.	Singersville	Singersville	Singersville
Occupation.	Carpenter	Machinist	Labourer
Maiden name of Mother.	Annie Wright	Evelyn Maud Greenaway	Henrietta Quinn
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Canfield	Dr. Williams	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Mrs. H. C. Fuller	Wm Rine	Joseph Case
Address.	Singersville	Singersville	Singersville
Date of Return.	June 9th 1917	June 12th 1917	June 14th 1917
	Surname First	Surname First	Surname First
Surname of child.	Montgomery	Meek	Merney
Christian name.	Blanch	William Hunter	Margaret Mabel Annie
Date of Birth.	June 15th 1917	June 2nd 1917	June 1st 1917
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Singersville	If in a hospital give its name Singersville	If in a hospital give its name Singersville
Sex.	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Singersville June 20th 1916	Sarantoga July 5th 1915	Quincy Oct. 1898
Full name of Father.	Mrs. Daniel Montgomery	Ernest Roy Meek	Arthur Merney
Address.	Singersville	Singersville	Singersville
Occupation.	Manager	Farmer	Labourer
Maiden name of Mother.	Della Morgan	Ida Maud Hunter	Emma Ella McIntyre
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Rogers	Dr. Rogers	Dr. Furlong
Were you in house at time of Birth?	Yes	No	Yes
Twin, Triplet, Illegitimate or Still-born.	W. D. Montgomery	-	-
Name of Informant.	Lise Sam	E. R. Meek	Mrs. A. Merney
Address.	Singersville	Singersville	Singersville
Date of Return.	June 15th 1917	June 19th 1917	June 19th 1917

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1917
Given under my hand this 10th day of July A.D. 1917

Leslie leroi knott, roy knott, gladys lewis, vera marie daniel, george daniel, evelyn m. yelland, james borden craig, frederick george craig, tena dennis, jean taylor, louis evelyn taylor, mabel spence, evelyn may campbell, james edward campbell, elizabeth isabella bruce, margaret helen macdonald, john donald macdonald, helen cojridge.

BIRTHS

Standard No. 11.8 - Record all still-births as births, as well as deaths.

County of Jefferson Division of Superior

	Surname first.	Surname first.	Surname first.
Surname of child.	<u>Knott</u>	<u>Graig</u>	<u>Campbell</u>
Christian name.	<u>Beulah Beray</u>	<u>James Borden</u>	<u>Evelyn May</u>
Date of Birth.	<u>June 11th 1917</u>	<u>June 23rd 1917</u>	<u>July 15th 1917</u>
Where born / Street number or Location and Lot.	<u>Superior</u>	<u>Superior</u>	<u>Superior</u>
Sex.	<u>Male</u>	<u>Male</u>	<u>Female</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Where and when married.	<u>Superior June 14th 1916</u>	<u>Superior, Aug 2nd 1908</u>	<u>Superior, July 25th 1914</u>
Full name of Father.	<u>Ray Knott</u>	<u>Frederick George Craig</u>	<u>James Edward Campbell</u>
Address.	<u>Superior</u>	<u>Superior</u>	<u>Superior</u>
Occupation.	<u>Mechanic</u>	<u>Mechanic</u>	<u>Farmer</u>
Maiden name of Mother.	<u>Bladys Kevin</u>	<u>Tena Dennis</u>	<u>Elizabeth Isabella Bruce</u>
Is she single or a widow?	<u>-</u>	<u>-</u>	<u>-</u>
Name of Physician in attendance.	<u>Dr. Williams</u>	<u>Dr. Williams</u>	<u>Dr. Canuel</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>No</u>	<u>Yes</u>
Twin, Triplet, Illegitimate or Still-born.	<u>-</u>	<u>-</u>	<u>-</u>
Name of Informant.	<u>Mrs. M. J. Kevin</u>	<u>Jack Craig</u>	<u>James E. McKay</u>
Address.	<u>Superior</u>	<u>Superior</u>	<u>Superior</u>
Date of Return.	<u>July 5th 1917</u>	<u>July 23rd 1917</u>	<u>July 23rd 1917</u>
Surname of child.	<u>Daniel</u>	<u>Taylor</u>	<u>Macdonald</u>
Christian name.	<u>Vera Marie</u>	<u>Jean</u>	<u>Margaret Helen</u>
Date of Birth.	<u>July 22nd 1917</u>	<u>July 10th 1917</u>	<u>July 22nd 1917</u>
Where born? Street number or Location and Lot.	<u>Superior</u>	<u>Superior</u>	<u>Superior</u>
Sex.	<u>Female</u>	<u>Female</u>	<u>Female</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Where and when married.	<u>Superior Oct 20th 1910</u>	<u>Superior June 22nd 1912</u>	<u>John Donald Macdonald</u>
Full name of Father.	<u>George Daniel</u>	<u>Kevin Evelyn Taylor</u>	<u>Superior</u>
Address.	<u>Superior</u>	<u>Superior</u>	<u>Superior</u>
Occupation.	<u>Farmer</u>	<u>Farmer</u>	<u>Physician</u>
Maiden name of Mother.	<u>Evelyn MacKelsand</u>	<u>Mabel O. Spence</u>	<u>Superior Sept 1912</u>
Is she single or a widow?	<u>-</u>	<u>-</u>	<u>-</u>
Name of Physician in attendance.	<u>Dr. Canuel</u>	<u>Dr. Canuel</u>	<u>Dr. Williams</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Twin, Triplet, Illegitimate or Still-born.	<u>-</u>	<u>-</u>	<u>-</u>
Name of Informant.	<u>Mrs. Geo Daniel</u>	<u>L. E. Taylor</u>	<u>J. D. Macdonald</u>
Address.	<u>Superior</u>	<u>Superior</u>	<u>Superior</u>
Date of Return.	<u>July 25th 1917</u>	<u>July 29th 1917</u>	<u>July 31st 1917</u>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1917
 Given under my hand this 9th day of October A.D. 1917
 Division Registrar of Jefferson

Schedule B.
N.B. - Record all still-births as births,
as well as deaths.

BIRTHS

Carl stanley arnold, charles stanley arnold, myrtle isabelle service, robert francis sexsmith, george merton sexsmith, sadie smith, john david morgan, russell morgan, elsie isabelle cline, leonard ronald tye, hilda cranham, winifred may boniface, alfred boniface, mary edith ellen coombs, lloyd richard pate, gordon martin houghton, pate, beatrice emmaline tune.

County of Alford Division of Sugersall

Surname first.	Surname first.	Surname first.
Surname of child. Arnold	Morgan	Boniface
Christian name. Carl Stanley	John David	Winifred May
Date of Birth. July 28th 1917	July 16th 1917	July 7th 1917
Where born? Street number or Con- cession and Lot. Wales If in a hospital give its name Sugersall	If in a hospital give its name Sugersall	If in a hospital give its name Sugersall
Sex. Male	Male	Female
Are the Parents married? Yes	Yes	Yes
Where and when married. Sugersall Aug 22d 1913	Sugersall, May 12th 1913	Sugersall, July 9th 1914
Full name of Father. Charles Stanley Arnold	Russell Morgan	Alfred Boniface
Address. Sugersall	Sugersall	Sugersall
Occupation. Mechanic	Blacksmith	Mechanic
Maiden name of Mother. Myrtle Isabelle Service	Elsie Isabelle Cline	Mary Edith Ellen Coombs
Is she single or a widow? -	-	-
Name of Physician in at- tendance. Dr. Coulter	Dr. Coulter	Dr. Williams
Were you in house at time of Birth? No	Yes	Yes
Twin, Triplet, Illegitimate or Still-born. -	-	-
Name of Informant. C.S. Arnold	Russell Morgan	Mrs D Boniface
Address. Sugersall	Sugersall	Sugersall
Date of Return. Aug 6th 1917	Aug 6th 1917	Aug 6th 1917
Surname first.	Surname first.	Surname first.
Surname of child. Befamit	Tye	Dale
Christian name. Robert Francis	Leonard Ronald	Clayton Richard
Date of Birth. July 10th 1917	Aug 5th 1917	July 20th 1917
Where born? Street number or Con- cession and Lot. Sugersall	If in a hospital give its name Sugersall	If in a hospital give its name Sugersall
Sex. Male	Male	Male
Are the Parents married? Yes	Yes	Yes
Where and when married. Sugersall, Aug 2nd 1907	Walesbury, Nov 16th 1912	Walesbury, Jan 24th 1914
Full name of Father. George Nelson Befamit	Ronald Tye	Gordon Martin Houghton Dale
Address. Sugersall	Sugersall	Sugersall
Occupation. Labourer	Farmer	Mechanic
Maiden name of Mother. Sadie Smith	Hilda Cranham	Beatrice Emmaline Service
Is she single or a widow? -	-	-
Name of Physician in at- tendance. Dr. Williams	Dr. Furlong	Dr. Coulter
Were you in house at time of Birth? Yes	Yes	No
Twin, Triplet, Illegitimate or Still-born. -	-	-
Name of Informant. Mrs B.M. Befamit	Ronald Tye	B. H. Dale
Address. Sugersall	Sugersall	Sugersall
Date of Return. Aug 6th 1917	Aug 13th 1917	Aug 13th 1917

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1917
Given under my hand this 9th day of October A.D. 1917
Division Registrar of Sugersall

Betty durin, victor john dunn, maude olive evaline stephenson, charles milton stephenson, mary graydon, harry douglas payne, gordon james payne, mary douglas edward reeves long, claude keith lang, eveline annie mackay, doris mabel gertrude smith, lloyd smith, mabel archer, frances allan, hessiebauer, edward garfield hessenauer, nora ellen cotter.

Schedule B.
N. B. - Record all still-births as births,
as well as deaths.

BIRTHS

County of Jefferson Division of Ingersoll

	Surname first	Surname first	Surname first
Surname of child.	Dunn	Bayne	Smith
Christian name.	Betty	Mary Douglas	Doris Mabel Gertrude
Date of Birth.	Aug 2nd 1917	Sept 2nd 1917	Aug 1st 1917
Where born? Street number or Con- cession and Lot.	Wellington and If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	London April 1916	Ingersoll Oct 9th 1916	Chatham July 9th 1914
Full name of Father.	Victor John Dunn	Harold James Bayne	Clayd J Smith
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Salesman	Clerk	Machinist
Maiden name of Mother.	Maude Law	Mary Douglas	Mabel Archer
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr Carvish	Dr Carvish	Dr Carvish
Were you in house at time of birth?	No	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	V J Dunn	S. J. Bayne	Wm S. Braun
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Sept 5th 1917	Sept 5th 1917	Sept 5th 1917
Surname of child.	Stephenson	Lang	Hessenauer
Christian name.	Olive Evaline	Edward Reeves	Frances Allon
Date of Birth.	Aug 14th 1917	Aug 30th 1917	Aug 26th 1917
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Camthorn Jan 15th 1905	Chatham June 1st 1910	Ingersoll July 19th 1916
Full name of Father.	Charles Milton Stephenson	Claude Keith Lang	Edward Garfield Hessenauer
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Machinist	Shoe Maker	Accountant
Maiden name of Mother.	Mary E. Graydon	Eveline Annie Mackay	Nora Ellen Cotter
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr Carvish	Dr Furlong	Dr Furlong
Were you in house at time of birth?	Yes	No	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	C M Stephenson	C K Lang	E S Hessenauer
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Sept 13th 1917	Sept 30th 1917	Sept 13th 1917

I hereby certify the foregoing to be the true and correct copies of all Births returned to me for the quarter year ending Sept 30th 1917
Given under my hand this 9th day of October A.D. 1917
Division Registrar of Ingersoll

Stanley mervin sipes, orwell clayton sipes, ada evelyn warden worten, merna uan longfield, preston longfield, mildred atkins, reginald clayton cade, william richard cade, dora ellen johnson, grace elizabeth bell, albert alexander bell, cora edlington, dorothy lucille ledgley, alfred amos ledgley, helena doe, florence eva macphee, charles macphee, margaret eva rose.

Schedule B.

B. B. - Record all still-births as births, as well as deaths.

BIRTHS

County of Jefferson

Division of Wyersdale

Surname first.	Surname first.	Surname first.
<u>Sipes</u>	<u>Cade</u>	<u>Ledgley</u>
<u>Stanley Mervin</u>	<u>Reginald Clayton</u>	<u>Dorothy Lucille</u>
<u>July 15th 1917</u>	<u>Aug 1st 1917</u>	<u>April 19th 1917</u>
<u>Where born? Street number or Concession and Loc.</u> If in a hospital give its name <u>Wyersdale</u>	<u>Where born? Street number or Concession and Loc.</u> If in a hospital give its name <u>Wyersdale</u>	<u>Where born? Street number or Concession and Loc.</u> If in a hospital give its name <u>Wyersdale</u>
<u>Sex</u> <u>Male</u>	<u>Sex</u> <u>Male</u>	<u>Sex</u> <u>Female</u>
<u>Are the Parents married?</u> <u>Yes</u>	<u>Are the Parents married?</u> <u>Yes</u>	<u>Are the Parents married?</u> <u>Yes</u>
<u>Where and when married</u> <u>Wyersdale Sept 20th 1914</u>	<u>Where and when married</u> <u>Denham Nov 11th 1914</u>	<u>Where and when married</u> <u>England June 19th 1910</u>
<u>Full name of Father</u> <u>Orwell Clayton Sipes</u>	<u>Full name of Father</u> <u>William Richard Cade</u>	<u>Full name of Father</u> <u>Alfred Amos Ledgley</u>
<u>Address</u> <u>Wyersdale</u>	<u>Address</u> <u>Wyersdale</u>	<u>Address</u> <u>Wyersdale</u>
<u>Occupation</u> <u>Mechanic</u>	<u>Occupation</u> <u>Farmer</u>	<u>Occupation</u> <u>Wyersdale</u>
<u>Maiden name of Mother</u> <u>Ada Evelyn Warden</u>	<u>Maiden name of Mother</u> <u>Dora Ellen Johnson</u>	<u>Maiden name of Mother</u> <u>Helena Doe</u>
<u>Is she single or a widow?</u> <u>-</u>	<u>Is she single or a widow?</u> <u>-</u>	<u>Is she single or a widow?</u> <u>-</u>
<u>Name of Physician in attendance</u> <u>Dr. Carnish</u>	<u>Name of Physician in attendance</u> <u>Dr. Carnish</u>	<u>Name of Physician in attendance</u> <u>Dr. Rogers</u>
<u>Were you in house at time of Birth?</u> <u>Yes</u>	<u>Were you in house at time of Birth?</u> <u>Yes</u>	<u>Were you in house at time of Birth?</u> <u>Yes</u>
<u>Twin, Triplet, Illegitimate or Still-born</u> <u>-</u>	<u>Twin, Triplet, Illegitimate or Still-born</u> <u>-</u>	<u>Twin, Triplet, Illegitimate or Still-born</u> <u>-</u>
<u>Name of Informant</u> <u>O. C. Sipes</u>	<u>Name of Informant</u> <u>Mary C. Cade</u>	<u>Name of Informant</u> <u>Mrs O. A. Ledgley</u>
<u>Address</u> <u>Wyersdale</u>	<u>Address</u> <u>Springfield Ave</u>	<u>Address</u> <u>Wyersdale</u>
<u>Date of Return</u> <u>Aug 17th 1917</u>	<u>Date of Return</u> <u>Aug 15th 1917</u>	<u>Date of Return</u> <u>Aug 29th 1917</u>
<u>Surname first.</u>	<u>Surname first.</u>	<u>Surname first.</u>
<u>Longfield</u>	<u>Bell</u>	<u>MacPhee</u>
<u>Morris Swan</u>	<u>Grace Elizabeth</u>	<u>Florence Eva</u>
<u>May 29th 1917</u>	<u>Aug 4th 1917</u>	<u>July 31st 1917</u>
<u>Where born? Street number or Concession and Loc.</u> If in a hospital give its name <u>Wyersdale</u>	<u>Where born? Street number or Concession and Loc.</u> If in a hospital give its name <u>Wyersdale</u>	<u>Where born? Street number or Concession and Loc.</u> If in a hospital give its name <u>Wyersdale</u>
<u>Sex</u> <u>Male</u>	<u>Sex</u> <u>Female</u>	<u>Sex</u> <u>Female</u>
<u>Are the Parents married?</u> <u>Yes</u>	<u>Are the Parents married?</u> <u>Yes</u>	<u>Are the Parents married?</u> <u>Yes</u>
<u>Where and when married</u> <u>Wyersdale Dec 1st 1909</u>	<u>Where and when married</u> <u>Denham Nov 4th 1905</u>	<u>Where and when married</u> <u>Beltsville 1914</u>
<u>Full name of Father</u> <u>Oswell Bee Longfield</u>	<u>Full name of Father</u> <u>Albert Alexander Bell</u>	<u>Full name of Father</u> <u>Charles O. MacPhee</u>
<u>Address</u> <u>Wyersdale</u>	<u>Address</u> <u>W. B. Edger</u>	<u>Address</u> <u>Wyersdale</u>
<u>Occupation</u> <u>Mechanic</u>	<u>Occupation</u> <u>Farmer</u>	<u>Occupation</u> <u>Butcher</u>
<u>Maiden name of Mother</u> <u>Mildred Atkins</u>	<u>Maiden name of Mother</u> <u>Cora Edlington</u>	<u>Maiden name of Mother</u> <u>Margaret Eva Rose</u>
<u>Is she single or a widow?</u> <u>-</u>	<u>Is she single or a widow?</u> <u>-</u>	<u>Is she single or a widow?</u> <u>-</u>
<u>Name of Physician in attendance</u> <u>Dr. Williams</u>	<u>Name of Physician in attendance</u> <u>Dr. Furlong</u>	<u>Name of Physician in attendance</u> <u>Dr. Furlong</u>
<u>Were you in house at time of Birth?</u> <u>Yes</u>	<u>Were you in house at time of Birth?</u> <u>Yes</u>	<u>Were you in house at time of Birth?</u> <u>Yes</u>
<u>Twin, Triplet, Illegitimate or Still-born</u> <u>-</u>	<u>Twin, Triplet, Illegitimate or Still-born</u> <u>-</u>	<u>Twin, Triplet, Illegitimate or Still-born</u> <u>-</u>
<u>Name of Informant</u> <u>O. B. Longfield</u>	<u>Name of Informant</u> <u>Mrs Albert A. Bell</u>	<u>Name of Informant</u> <u>C. A. MacPhee</u>
<u>Address</u> <u>Wyersdale</u>	<u>Address</u> <u>W. B. Edger</u>	<u>Address</u> <u>Wyersdale</u>
<u>Date of Return</u> <u>Aug 29th 1917</u>	<u>Date of Return</u> <u>Aug 29th 1917</u>	<u>Date of Return</u> <u>Aug 31st 1917</u>

I hereby certify the foregoing to be the true and correct copies of all Births returned to me for the quarter year ending Sept 30th 1917

Given under my hand this 9th day of October A.D. 1917

P.O.

Schedule B.
N.B.—Record all still-births as births,
as well as deaths.

BIRTHS

County of Jefferson Division of Louisiana

	Surname first.	Surname first.	Surname first.
Surname of child.	Welt	Crown	Danford
Christian name.	Adelia	George Alan	Rossley Murray
Date of Birth.	Sept 25th 1917	Sept 14th 1917	Sept 2nd 1917
Where born / Street number or Con- cession and Lot.	If in a hospital give its name. <u>Louisiana</u>	If in a hospital give its name. <u>Louisiana</u>	If in a hospital give its name. <u>Louisiana</u>
Sex.	Female	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Louisiana 1910	Louisiana May 24th 1915	Louisiana
Full name of Father.	Ernest Welt	Benjamin Crown	Charles D. Danford
Address.	Louisiana	Louisiana	Louisiana
Occupation.	Farmer	Machinist	Teacher
Maiden name of Mother.	Esther Day Robinson	Augusta R. Bleaker	Anna J. Ireland
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Cantler	Dr. Williams	Dr. Ferguson
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Ernest Wright	Benny Crown	C. D. Danford
Address.	Louisiana	Louisiana	Louisiana
Date of Return.	Sept 29th 1917	Sept 29th 1917	Sept 29th 1917
Surname first.			
Surname of child.			
Christian name.			
Date of Birth.			
Where born / Street number or Con- cession and Lot.	If in a hospital give its name.	If in a hospital give its name.	If in a hospital give its name.
Sex.			
Are the Parents married?			
Where and when married.			
Full name of Father.			
Address.			
Occupation.			
Maiden name of Mother.			
Is she single or a widow?			
Name of Physician in at- tendance.			
Were you in house at time of Birth?			
Twin, Triplet, Illegitimate or Still-born.			
Name of Informant.			
Address.			
Date of Return.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1917
GIVEN under my hand this 9th day of October A.D. 1917
District Registrar of Louisiana

BIRTHS

Mary pearl nunn, john peters nunn, catharine minard, bertha may murray, frederick murray, phoebe cook, thomas lynn foley, frank foley, violet may henry, marion audrey eckhardt, lanson harvey eckhardt, hazel margaret lyons, daniel jackson vannorman, daniel ostrander vannorman, beatrice jackson, aibert edward smith, james henry smith, carry mcwaters.

County of Jefferson

Division of Ingersoll

	Surname first.	Surname first.	Surname first.
Surname of child	Nunn	Foley	Vannorman
Christian name	Mary Beare	Thomas Lynn	Daniel Jackson
Date of Birth	Aug 20th 1917	Aug 24th 1917	Aug 30th 1917
Where born? Street number or Con- cession and Lot	If in a hospital give its name <u>Ingersoll</u>	If in a hospital give its name <u>Ingersoll</u>	If in a hospital give its name <u>Ingersoll</u>
Sex	Female	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married	Ingersoll May 30th 1906	Hamilton June 1st 1914	Ingersoll June 23rd 1915
Full name of Father	John Peters Nunn	Frank P. Foley	Daniel Abraham Vannorman
Address	Ingersoll	Ingersoll	Ingersoll Barber
Occupation	Butcher	Manufacturer	Barber
Maiden name of Mother	Catharine Minard	Violet May Henry	Beatrice Jackson
Is she single or a widow?	-	-	-
Name of Physician in at- tendance	Dr. Carnish	Dr. Macdonald	Dr. Williams
Were you in house at time of Birth?	Yes	No	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant	Mrs J. O. Nunn	F. P. Foley	Beatrice Vannorman
Address	Ingersoll	Ingersoll	Ingersoll
Date of Return	Sept 10th 1917	Sept 20th 1917	Sept 21st 1917
Surname first.	Murray	Eckhardt	Smith
Christian name	Bertha May	Marion Audrey	Albert Edward
Date of Birth	Sept 1st 1917	Sept 9th 1917	Sept 6th 1917
Where born? Street number or Con- cession and Lot	If in a hospital give its name <u>Ingersoll</u>	If in a hospital give its name <u>Ingersoll</u>	If in a hospital give its name <u>Ingersoll</u>
Sex	Female	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married	Ingersoll. Apr 23rd 1917	London. June 1st 1916	Chester. Apr 2nd 1907
Full name of Father	Frederick Murray	Lanson Harvey Eckhardt	James Henry Smith
Address	Ingersoll	Ingersoll	Ingersoll
Occupation	Butcher	Smith	Seaman
Maiden name of Mother	Chaebe Cook	Hazel Margaret Lyons	Carry McWaters
Is she single or a widow?	-	-	-
Name of Physician in at- tendance	Dr. Carnish	Dr. Luntin	Dr. Luntin
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant	F. Murray	L. H. Eckhardt	J. H. Smith
Address	Ingersoll	Ingersoll	Ingersoll
Date of Return	Sept 24th 1917	Sept 28th 1917	Sept 27th 1917

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1917
 Given under my hand this 9th day of October A.D. 1917

Florence cavell edwards, thomas edward edwards, matilda margaret taylor, william thomas redford, william george redford, alberta balkwill, roy cook, joseph crawford cook, mary clarkson, harry parker, annie mary carroll, david john dryden, william dryden, lily archer, monack

Schedule B.
N.B.—Record all still-births as births,
as well as deaths.

BIRTHS

County of Jefferson

Division of Lugersville

	SURNAME FIRST	SURNAME FIRST	SURNAME FIRST
Surname of child.	Edwards	Coak	Dryden
Christian name.	Harvey Cavell	Ray	David John
Date of Birth.	Sept 29th 1917	Sept 25th 1917	Sept 12th 1917
Where born? Street number or Con- nection and Lot.	Shaver If in a hospital give its name <u>Lugersville</u>	King's If in a hospital give its name <u>Lugersville</u>	If in a hospital give its name <u>Lugersville</u>
Sex.	Female	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Lugersville Apr 16th 1914	Detroit Jan 7th 1913	Lugersville 1914
Full name of Father.	Thomas Edward Edwards	Joseph Crawford Coak	William Dryden
Address.	Lugersville	Lugersville	Lugersville
Occupation.	Machinist	Machinist	Machinist
Maiden name of Mother.	Matilda Margaret Sawyer	Mary J Clarkson	Lily Archer
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Cauntler	Dr. Williams	Dr. Cauntler
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Thomas E. Edwards	J. C. Coak	William Dryden
Address.	Lugersville	Lugersville	Lugersville
Date of Return.	Oct 22nd 1917	Oct 24th 1917	Oct 29th 1917
	SURNAME FIRST	SURNAME FIRST	SURNAME FIRST
Surname of child.	Redford	Carker	Manaca
Christian name.	William Thomas	Baldy	Robert
Date of Birth.	Oct 2nd 1917	Oct 20th 1917	Oct 4th 1917
Where born? Street number or Con- nection and Lot.	If in a hospital give its name <u>Lugersville</u>	If in a hospital give its name <u>Lugersville</u>	If in a hospital give its name <u>Lugersville</u>
Sex.	Male	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Mitchell, Apr 22nd 1910	England April 1905	Russia
Full name of Father.	William Henry Redford	Harry Carker	Thimo Manaca
Address.	Lugersville	Lugersville	Lugersville
Occupation.	Blacksmith	Lab Driver	laborer
Maiden name of Mother.	Albera Balkwill	Annie Mary Carroll	Mrs Manaca
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Cauntler	Dr. Cauntler	Dr. Cauntler
Were you in house at time of Birth?	No	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	Still Born	-
Name of Informant.	W. H. Redford	Harry Carker	Dr. Cauntler
Address.	Lugersville	Lugersville	Lugersville
Date of Return.	Oct 29th 1917	Oct 25th 1917	Oct 30th 1917

I hereby certify the foregoing to be the true and correct copies of all Births returned to me for the quarter year ending Dec 31st 1917
Given under my hand this 5th day of January A.D. 1918
Division Registrar of Lugersville

William francis o'rouke, daniel o'rouke, eva forman, john duffey mcabee, john mcauley, iola duffey duffy, alphanzo samuel-berdan, earl claude berdan, nellie maud archer, george lee johnson, george johnson, edith henderson, dora mary fordham, arthur fordham, edith may alborough, reo douglas crane, william crane, olive hudson.

BIRTHS

Schedule B.
R.R.—Record all stillbirths as births,
as well as deaths.

County of Offord Division of Ingersoll

	Surname First	Surname First	Surname First
Surname of child	O'Rourke	Berdan	Fordham
Christian name	William Francis	Alphanzo Samuel	Dora Mary
Date of Birth	Sept 10th 1917	Sept 10th 1917	Oct 2nd 1917
Where born? Street number or Con- cession and Loc.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingersoll, Sept 2nd 1907	Mt. Salem Sept 1st 1910	Ingersoll Dec 11th 1913
Full name of Father.	Daniel O'Rourke	Earl Claude Berdan	Arthur Fordham
Address	Ingersoll	Caladonia	Ingersoll
Occupation	Agent	Farmer	Mechanic
Maiden name of Mother.	Eva O'Farman	Nellie Maud Archer	Edith May Alborough
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Rogers	Dr. Larnish
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born	-	-	-
Name of Informant	Daniel O'Rourke	Mrs E. C. Berdan	Arthur Fordham
Address	Ingersoll	Ingersoll	Ingersoll
Date of Return	Oct 9th 1917	Oct 9th 1917	Oct 11th 1917
Surname of child	McDuffy	Johnson	Crane
Christian name	John Duffey	George Lee	Reo Douglas
Date of Birth	Sept 16th 1917	Oct 11th 1917	Oct 14th 1917
Where born? Street number or Con- cession and Loc.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex	Male	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Windsor, Nov 2nd 1916	Ingersoll 1915	Ingersoll July 22nd 1917
Full name of Father.	John McDuffy	George Johnson	William Crane
Address	Ingersoll	Ingersoll	Ingersoll
Occupation	Coal Duffey & Mechanic	Labourer	Labourer
Maiden name of Mother.	Mechanic	Edith Henderson	Olive Henderson
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Rogers	Dr. Larnish	Dr. Larnish
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born	-	-	-
Name of Informant	John McDuffy	Mrs Bella Martin	Mrs D. McKay
Address	Ingersoll	Ingersoll	Ingersoll
Date of Return	Oct 15th 1917	Oct 16th 1917	Oct 22nd 1917

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1917
Given under my hand this 5th day of January A.D. 1918

Violet Irene Lockey, Albert Lockey, Gertrude Simes, Marjorie Lorene Lasenby, Theodore Lasenby, Jean Redmore Buchanan, Ben Morton, Bea Firth Morton, Catherine Morton, Isabell May Duke, William Henry Duke, Isabell Metcalf, Ronald Gordon Ellis, Gordon Cecil Ellis, Jessie Minnetta Chapman, Doris Livinia Elderkin, James Stevens Elderkin, Eleanor Violet Lygal

BIRTHS

Schedule B.
N.B.—Record all still-births as births,
as well as deaths.

County of Jefferson Division of Virginia

	Surname First	Surname First	Surname First
Surname of child.	Lockey	Morton	Ellis
Christian name.	Violet Irene	Ben	Ronald Gordon
Date of Birth.	Nov 20th 1917	Dec 2nd 1917	Dec 5th 1917
Where born? Street number or Con- cession and Lot.	If in a hospital give its name <u>Ingersoll</u>	<u>Conterbury</u> If in a hospital give its name <u>Ingersoll</u>	If in a hospital give its name <u>Ingersoll</u>
Sex.	Female	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married	Ingersoll, Nov 2nd 1902	Woodstock June 1913	Salt Det. Ark 1914
Full name of Father.	Albert Lockey	Ben Firth Morton	Gordon Cecil Ellis
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Mechanic	Mechanic	Manufacturer
Maiden name of Mother.	Gertrude Simes	Catherine Morton	Jessie Minnetta Chapman
Is she single or a widow?	-	-	-
Name of Physician in attendance.	Dr. Carmick	Dr. Carmick	Dr. Carmick
Were you in house at time of Birth?	Yes	Yes	No
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Albert Lockey	Ben J. Morton	H. G. Ellis
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Dec 7th 1917	Dec 10th 1917	Dec 13th 1917
	Surname First	Surname First	Surname First
Surname of child.	Keasely	Duke	Elderkin
Christian name.	Margaret Louise	Isabell May	Doris Livinia
Date of Birth.	Dec 6th 1917	Dec 2nd 1917	Dec 22nd 1917
Where born? Street number or Con- cession and Lot.	If in a hospital give its name <u>Ingersoll</u>	If in a hospital give its name <u>Ingersoll</u>	If in a hospital give its name <u>Ingersoll</u>
Sex.	Female	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married	Salt Det. Ark 1914	Ingersoll Mar 1914	Woodstock Mar 10th 1917
Full name of Father.	Frederick Charles Keasely	William Henry Duke	James Stevens Elderkin
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Bot. Maker	Dressman	Shell Inspector
Maiden name of Mother.	Jean Redmore Buchanan	Isabell Metcalf	Eleanor Violet Lygal
Is she single or a widow?	-	-	-
Name of Physician in attendance.	Dr. Carmick	Dr. Furlong	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Agnes J. McKay	Wm H. Duke	J. S. Elderkin
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Dec 16th 1917	Dec 22nd 1917	Dec 22nd 1917

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending
GIVEN under my hand this 5th day of January A.D. 1919

Division Registrar of Ingersoll

William Edward Tompkins, James Tompkins, Ada Robson, Cameron Ward, Alexander Anderson, Isabel Tait, Lewis John Clark, Arthur Joseph Clark, Violet Lewis, John Wilkinson Douglas, Mary Kathleen Renning, Eleanor Mary Houghton, James Joseph Houghton, Nellie Barrow, Martha Martin Adams, John Adams, Martha Martin

BIRTHS

Schedule B.
N. B. - Record all still-births as births, as well as deaths.

County of Jefferson Division of Ingersoll

	Surname first.	Surname first.	Surname first.
Surname of child.	Tompkins	Clark	Houghton
Christian name.	William Edward	Henry John	Eleanor Mary
Date of Birth.	Sept 12th 1917	Oct 24th 1917	Nov 8th 1917
Where born? Street number or Con- cession and Lot.	King St If in a hospital give its name	Ingersoll	Ingersoll
Sex.	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Newfry Dec 18th 1908	Beachview Nov 18th 1916	Ingersoll Nov 19th 1914
Full name of Father.	James Tompkins	Arthur Joseph Clark	James Joseph Houghton
Address.	Ingersoll	Salford	Ingersoll
Occupation.	line man	farmer	mechanic
Maiden name of Mother.	Ada Keckson	Violet E. Lewis	Nellie Barrow
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Rogers	Dr. Rogers	Dr. Carnish
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Mrs J. Tompkins	Carl Laurie	Mrs E. Barrow
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Oct 30th 1917	Nov 15th 1917	Nov 14th 1917
Surname first.	Anderson	Douglas	Adams
Christian name.	Carroll Gordon	John Wilkinson	Martha Martin
Date of Birth.	Oct 30th 1917	Nov 2nd 1917	Nov 8th 1917
Where born? Street number or Con- cession and Lot.	Ingersoll	Ingersoll	Ingersoll
Sex.	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Saronto Aug 1912	Woodlawn Aug 11th 1915	Ingersoll Oct 23rd 1914
Full name of Father.	Alexander Anderson	William Bolton Douglas	John Adams
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Weatherman	clerk	Engineer
Maiden name of Mother.	Isabel Tait	Mary Kathleen Renning	Martha Martin
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Coulter	Dr. Carnish	Dr. Carnish
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Alexander Anderson	W. B. Douglas	John Adams
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Nov 22nd 1917	Nov 26th 1917	Dec 3rd 1917

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1917

Given under my hand this

5th

day of January

A. D. 1918

BIRTHS

Schedule B.
N.B.—Record all still-births as births,
as well as deaths.

County of Jefferson

Division of Lingersale

	Surname first.	Surname first.	Surname first.
Surname of child.	<u>Wanda Unger</u>	<u>Burton</u>	<u>Low</u>
Christian name.	<u>Doris Jean</u>	<u>Doris Jean</u>	<u>Douglas Wilson</u>
Date of Birth.	<u>Mar 17th 1916</u>	<u>Mar 17th 1916</u>	<u>Mar 24th 1916</u>
Where born? Street number or Con- cession and Loc.	<u>Lingersale</u> If in a hospital give its name.	<u>Lingersale</u> If in a hospital give its name.	<u>Lingersale</u> If in a hospital give its name.
Sex.	<u>Male</u>	<u>Female</u>	<u>Male</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Where and when married.	<u>Lingersale Aug 30th 1916</u>	<u>Lingersale July 1st 1916</u>	<u>Burlington June 4th 1907</u>
Full name of Father.	<u>Frank Unger</u>	<u>Harry Burton</u>	<u>Abram Thomas Low</u>
Address.	<u>Lingersale</u>	<u>Lingersale</u>	<u>Lingersale</u>
Occupation.	<u>carpenter</u>	<u>mechanic</u>	<u>Bank Manager</u>
Maiden name of Mother.	<u>Beatrice Kellaway</u>	<u>Kathleen Holmes</u>	<u>Helen Winnifred Metherell</u>
Is she single or a widow?	<u>-</u>	<u>-</u>	<u>-</u>
Name of Physician in at- tendance.	<u>Dr. Coulter</u>	<u>Dr. Coulter</u>	<u>Dr. Williams</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>No</u>
Twin, Triplet, Illegitimate or Still-born.	<u>-</u>	<u>-</u>	<u>-</u>
Name of Informant.	<u>Francis Krueger</u>	<u>Harry Burton</u>	<u>G. J. Low</u>
Address.	<u>Lingersale</u>	<u>Lingersale</u>	<u>Lingersale</u>
Date of Return.	<u>Mar 29th 1916</u>	<u>Mar 30th 1916</u>	<u>Mar 30th 1916</u>
Surname of child.			
Christian name.			
Date of Birth.			
Where born? Street number or Con- cession and Loc.	<u>If in a hospital give its name.</u>	<u>If in a hospital give its name.</u>	<u>If in a hospital give its name.</u>
Sex.			
Are the Parents married?			
Where and when married.			
Full name of Father.			
Address.			
Occupation.			
Maiden name of Mother.			
Is she single or a widow?			
Name of Physician in at- tendance.			
Were you in house at time of Birth?			
Twin, Triplet, Illegitimate or Still-born.			
Name of Informant.			
Address.			
Date of Return.			

Charles wilfred wilson, norace wilson, margaret j. wilson, frederick foster, margaret mornton, earl beresford mahood, ernest beresford mahood, letty cornwall, elizabeth irene mason, george harrison mason, mary mcdougall, mabel bermce young, william arthur young, mabel may bairnes, frank murray, william murray, harriet lang

BIRTHS

County of Offord Division of Sugersale

	Surname First	Surname First	Surname First
Surname of child.	Wilson	Mahood	Young
Christian name.	Charles Wilfred	Earl Beresford	Mabel Bernice
Date of Birth.	Dec 31st 1917	Dec 31st 1917	Dec 31st 1917
Where born? Street number or Con- cession and Lot.	Church If in a hospital give its name Sugersale	If in a hospital give its name Sugersale	Merite If in a hospital give its name Sugersale
Sex.	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Sugersale Mar 31st 1917	Sugersale Nov 23rd 1909	Sugersale May 23rd 1911
Full name of Father.	Harold Wilson	Ernest Beresford Mahood	William Arthur Young
Address.	Sugersale	Sugersale	Sugersale
Occupation.	laborer	laborer	Machinist
Maiden name of Mother.	Margaret E. Payne	Letty Lidia Cornwall	Mabel May Bairnes
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Cantler	Dr. Cantler	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still born.	-	-	-
Name of Informant.	H. E. Wilson	E. B. Mahood	Mrs. E. A. Young
Address.	Sugersale	Sugersale	Sugersale
Date of Return.	Jan 2nd 1918	Jan 4th 1918	Jan 4th 1918
	<u>Sugersale First</u>	<u>Sugersale First</u>	<u>Sugersale First</u>
Surname of child.	Foster	Mason	Murray
Christian name.	Mary Theresa	Elizabeth Irene	Frank
Date of Birth.	Dec 31st 1917	Dec 28th 1917	Jan 11th 1918
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Sugersale	If in a hospital give its name Sugersale	If in a hospital give its name Sugersale
Sex.	Female	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Sugersale Aug 12th 1902	Sugersale Aug 21st 1916	West Offord May 4th 1892
Full name of Father.	Fredrick Foster	George Harrison Mason	William J. Murray
Address.	Sugersale	Sugersale	Beachville
Occupation.	Coinyman	Theatre Proprietor	Farmer
Maiden name of Mother.	Margaret Hamilton	Mary Irene McDougall	Harriet Cairny
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Furlong	Dr. Williams	Dr. Reiger
Were you in house at time of Birth?	Yes	No	No
Twin, Triplet, Illegitimate or Still born.	-	-	-
Name of Informant.	H. S. Furlong	H. S. Mason	W. J. Murray
Address.	Sugersale	Sugersale	Beachville
Date of Return.	Jan 4th 1918	Jan 6th 1918	Jan 11th 1918

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31
 Given under my hand this 6 day of Apr A.D. 19 18
 Division Registrar of Sugersale P.O.

mary pickard, george willis wyant, vernon duke wyant, albert edmund mccreey, samuel mccreey, laurita edmunds, lloyd george armstrong, george armstrong, laura reavely, mildred helen durrant, ernest ralph durrant, hazel ingham

BIRTHS

Schedule K.
 1914 - Record all still-births as Births,
 as well as Deaths.

County of Jefferson Division of Jagersdale

	Surname first.	Surname first.	Surname first.
Surname of child.	Smith	Cameron	Armstrong
Christian name.	John William Clinton	Lucius Bruce	Clayd George
Date of Birth.	Dec 12th 1917	Dec 16th 1917	Dec 27th 1917
Where born | Street number or Con- cession and Lot.	If in a hospital give its name Jagersdale	If in a hospital give its name Jagersdale	If in a hospital give its name Jagersdale
Sex.	Male	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Jagersdale Sept 11th 1911	Jagersdale 1913	Thamesport, Sept 4th 1907
Full name of Father.	James Smith	William Henry Cameron	George S. Armstrong
Address.	Jagersdale	Jagersdale	Jagersdale
Occupation.	Machinist	Machinist	Drayman
Maiden name of Mother.	Mary Pickard	Clara Helenie Keenies	Hanna B. Reavely
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Cameron	Dr. Williams	Dr. Cameron
Were you in house at time of Birth?	Yes	Yes	No
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Mrs Mary Smith	Wm Cameron	H B Armstrong
Address.	Jagersdale	Jagersdale	Jagersdale
Date of Return.	Jan 11th 1918	Jan 15th 1918	Jan 15th 1918
	Surname first.	Surname first.	Surname first.
Surname of child.	Wyant	Mccreey	Durrant
Christian name.	Harold Willis	Albert Edmund	Mildred Helen
Date of Birth.	Dec 2nd 1917	Jan 4th 1918	Dec 23rd 1917
Where born | Street number or Con- cession and Lot.	If in a hospital give its name Jagersdale	If in a hospital give its name Jagersdale	If in a hospital give its name Jagersdale
Sex.	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	London, Oct 9th 1914	Port William, March 1913	Aylmer, Sept 4th
Full name of Father.	Barnard W. Wyant	Samuel J. Mccreey	Ernest Ralph Durrant
Address.	Jagersdale	Jagersdale	Jagersdale
Occupation.	Merchant	Munition Worker	Labourer
Maiden name of Mother.	Alberta Maud Willis	Barnetta Edmunds	Hazel Ingham
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Cameron	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	W. O. Wyant	Mrs J. Mccreey	Hazel Durrant
Address.	Jagersdale	Jagersdale	Jagersdale
Date of Return.	Jan 19th 1918	Jan 19th 1918	Jan 19th 1918

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31 1918
 Given under my hand this 6th day of Apr A.D. 1918

BIRTHS

County of JeffersonDivision of Register

	Surname First	Surname First	Surname First
Surname of child.	Hefaine	Turner	Henderson
Christian name.	Keelen May	Alma Olive	Caris Roberts
Date of Birth.	Jan 21st 1915	July 1st 1914	Jan 15th 1915
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Female	Female	Female
Are the Parents married?	yes	yes	yes
Where and when married.	Ingersoll, May 10th 1916	Ingersoll, July 2nd 1917	Ingersoll, Jan 17th 1917
Full name of Father.	Alfred Hefaine	William Turner	Robert Andrew Henderson
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Mechanic	Coder	Clerk
Maiden name of Mother.	Edith May Keel	Jessie McKenzie	Charleville Allison
Is the single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Carville	Dr. Carville
Were you in house at time of Birth?	yes	yes	yes
Twin, Triplet, Illegitimate or Still born.	-	Still Born	-
Name of Informant.	Mrs Alfred Hefaine	William Turner	Robert A. Henderson
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Jan 29th 1915	July 1st 1914	Jan 2nd 1915
Surname of child.	Baylan	Betrie	William
Christian name.	Max Donald	Bruce Willard	Max Robertson
Date of Birth.	Jan 12th 1915	Jan 16th 1915	July 24th 1914
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Male	Male	Male
Are the Parents married?	yes	yes	yes
Where and when married.	Ingersoll, Aug 1st 1914	Ingersoll, Oct 6th 1915	Ingersoll, Dec 22nd 1915
Full name of Father.	George Edward Baylan	Harry James Betrie	James Earl William
Address.	Ingersoll	Mechanic + Ingersoll +	Ingersoll
Occupation.	Mechanic		Physician
Maiden name of Mother.	Beatrice Marie Davis	Vera Cuskey	Grace to Robertson
Is the single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Rager	Dr. Carville	Dr. Sinclair
Were you in house at time of Birth?	yes	yes	yes
Twin, Triplet, Illegitimate or Still born.	-	-	-
Name of Informant.	J. E. Baylan	Harry J. Betrie	J. B. William
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	July 5th 1915	July 12th 1915	July 26th 1914

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31 1915
 Given under my hand this 9th day of Sept A. D. 1915

BIRTHS

James Evelyn May Keightley, William Henry Keightley, Sara Helen Clark Clark, Albert Komp, Charles Adolph Komp, Mable Bristol, Helen Margaret Ranger, Leo John Ranger, Merian Pearl Wiltshire.

County of Wagaw Division of Sugerssee

	Surname First	Surname First	Surname First
Surname of child.	Head	Beards	Kampf
Christian name	Robert Richard	Joseph Phillip	Marie Alberti
Date of Birth	Dec 29th 1917	Jan 20th 1918	Jan 13th 1918
Where born? Street number or Con- cession and Lot.	Charles St. If in a hospital give its name Sugerssee.	James If in a hospital give its name Sugerssee.	Kelly St. If in a hospital give its name Sugerssee.
Sex	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married	Sugerssee Dec 22nd 1916	Sugerssee July 4th 1913	United States Nov 14th 1916
Full name of Father	Richard Head	Edward Beards	Charles Adolph Kampf
Address	Sugerssee	Sugerssee	Sugerssee
Occupation	Mechanic	Mechanic	Farmer
Maiden name of Mother	Esther Barnes	Ada Barnes	Mable Bristol
Is she single or a widow?	-	-	-
Name of Physician in at- tendance	Dr. Gurland	Dr. Courtein	Dr. Williams
Were you in house at time of Birth?	No	No	Yes
Twin, Triplet, Illegitimate or Still born	-	-	-
Name of Informant	Richard Head	E Beards	Chas A Kampf
Address	Sugerssee	Sugerssee	Sugerssee
Date of Return	Jan 29th 1918	Jan 21st 1918	Jan 22nd 1918
	Surname First	Surname First	Surname First
Surname of child	Dallant	Keightley	Ranger
Christian name	Margaret Eleanor	Evelyn May	Helen Margaret
Date of Birth	Jan 15th 1918	Dec 21st 1917	Jan 9th 1918
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Sugerssee.	If in a hospital give its name Sugerssee.	If in a hospital give its name Sugerssee.
Sex	Female	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married	Sugerssee Oct 1st 1912	England Oct 1st 1906	Britain Apr 2nd 1915
Full name of Father	John B Dallant	William Henry Keightley	Leo John Ranger
Address	Sugerssee	Sugerssee	Sugerssee
Occupation	Mechanic	Labourer	Express Agent
Maiden name of Mother	Annie Keultin	Sara Helen Clark	Merian Pearl Wiltshire
Is she single or a widow?	-	-	-
Name of Physician in at- tendance	Dr. Williams	Dr. Woodward	Dr. Williams
Were you in house at time of Birth?	Yes	No	Yes
Twin, Triplet, Illegitimate or Still born	-	-	-
Name of Informant	John B Dallant	Oral Harris	Leo J Ranger
Address	Sugerssee	Sugerssee	Sugerssee
Date of Return	Jan 22nd 1918	Jan 22nd 1918	Jan 9th 1918

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31 1918

GIVEN under my hand this 6 day of Apr A.D. 1918

Division Registrar of Sugerssee

BIRTHS

... Frances Sarah Dorothy ...
 ... Albert James Huard, Grace Knowles, George Grant Fenton, John Fenton,
 Margaret Rennie, Ellen Florence Messenger, William Edward Messenger, Ruth ...
 John Wesley Edwards, John William Edwards, Minnie Rowsom

County of

Division of

	Surname First	Surname First	Surname First
Surname of child.	Clark	Heward	Messenger
Christian name.	Charles Archibald	Kathleen Nellie	Ellen Florence
Date of Birth.	July 13th 1914	March 5th 1914	July 15th 1914
Where born? Street number or Con- cession and Loc.	Abandoned Hospital <i>If in a hospital give its name</i>	Muritt <i>If in a hospital give its name</i>	<i>If in a hospital give its name</i>
Sex.	Male	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Woburn May 16th 1907	England Sept 25th 1907	William Edward Messengers +
Full name of Father.	Hugh Mackintosh Clark	Albert James Heward	England. Sept 15th 1911 +
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Farmer	Blat Glass	Mechanist
Maiden name of Mother.	Josephine Victoria Smith	Grace Knowles	Ruth Mass
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Furlong	Dr. Furlong
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Frank Koverie	Albert J. Heward	W. E. Messenger
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Mar 12th 1915	Mar 12th 1915	Mar 12th 1915
Surname of child.	Druman	Fenton	Edwards
Christian name.	Minnie Kathleen	George Grant	John Wesley
Date of Birth.	July 23rd 1914	Mar 1st 1915	Mar 13th 1915
Where born? Street number or Con- cession and Loc.	<i>If in a hospital give its name</i>	<i>If in a hospital give its name</i>	<i>If in a hospital give its name</i>
Sex.	Female	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingersoll Sept 9th 1914	Ingersoll 1914	Ingersoll Sept 29th 1915
Full name of Father.	Kidney Albert Druman	John W. Fenton	John William Edwards
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Soldier	Mechanist	Mechanic
Maiden name of Mother.	Francis Sarah Dorothy Weeks	Margaret K. Rennie	Minnie Rowsom
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Ferguson	Dr. Lamont	Dr. Rogers
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Mrs. A. Druman	John W. Fenton	Mar. H. Marley
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Mar 22nd 1915	Mar 28th 1915	Mar 25th 1915

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending **Mar 31 1915**
 Given under my hand this **4th** day of **Apr** A.D. 19**15**
 Division Registrar of **Ingersoll** P.O.

W. B. Smith

BIRTHS

(Traces of new gaffed du...)

as well as deaths.

Offord

D

Sugersall

Surname of child.	Surname first.	Surname first.	Surname first.
	Hettlewell	McMillan	Breen
	Anna Layne	Mary	Elisha
	July 9th 1915	July 26th 1915	July 14th 1915
	If in Sugersall	Sugersall	Sugersall
Sex.	Female	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Sugersall June 1st 1904	Sugersall Aug 19th 1899	Kandlan 1912
Full name of Father.	Douglas Hettlewell	Benjamin Alexander McMillan	Elisha Breen
Address.	Sugersall Fletcher Bertha Cook	Sugersall Butcher Mary Ward	Sugersall Masan May Bradley
	Dr Williams	Dr Williams	Dr Cantler
	Yes	Yes	Yes
	-	Stee Barn	-
	Ralph Williams	B. O. McMillan	Mrs J Adams
	Sugersall	Sugersall	Sugersall
	July 27th 1915	Mar 1st 1915	Mar 2nd 1915
	Surname first.	Surname first.	Surname first.
	Simmons	Wallace	Dunn
	Albert Barclay	Lourence May	Andrew Barfield
	July 20th 1915	July 17th 1915	Jan 26th 1915
	Sugersall	Mitral	Alexandra Hospital
	If in a hospital give its name Sugersall	If in a hospital give its name Sugersall	If in a hospital give its name Sugersall
	Male	Female	Male
	Yes	Yes	Yes
	Sugersall Sept 2nd 1911	England July 27th 1908	Sugersall May 6th 1910
	Albert Alfred Simmons	James Rupert Wallace	Herbert Dunn
	Sugersall	Sugersall	Sugersall
	machinist	Bricklayer	Farmer
	Kana Rose Johnson	Annie Burlan	Esther Marshall
	-	-	-
	Dr Cantler	Dr Durling	Dr Williams
	Yes	Yes	No
	-	-	-
	Al Simmons	J. R. Wallace	Herbert Dunn
	Sugersall	Sugersall	Sugersall
	Mar 5th 1915	Mar 5th 1915	Mar 6th 1915
Were you in house at time of Birth?			

Mar 31st 1915

Sugersall

age

P.O.

BIRTHS

Clarence Herbert Chadwick, Charles Chester Chadwick, Eliza Rebecca Garland, Freda Margarte Stanton, Frederick George Stanton, Ethel Davidson, Margaret Jane Cragg, William Edward Cragg, Norah Margaret Wilson, Donald Raymond Cussons, Frederick Cussors, Laura Pooley, Annie Marie Coxon, Clarence Coxon, Ellen Grace Barrow

County of OpferdDivision of Dungessau

	Surname first	Surname first	Surname first
Surname of child.	Chadwick	Stanton	Cussans
Christian name.	Clarence Herbert	Freda Margarte	Donald Raymond
Date of Birth	Mar 20th 1914	Apr 4th 1914	Mar 21st 1914
Where born? Street number or Con- cession and Lot.	If in a hospital give its name <u>Dungessau</u>	If in a hospital give its name <u>Dungessau</u>	If in a hospital give its name <u>Dungessau</u>
Sex.	Male	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	London Jan 22nd 1910	Woodlawn Jan 26th 1911	England, Apr 30th 1913
Full name of Father.	Charles Chester Chadwick	Frederick George Stanton	Frederick Cussans
Address.	<u>Dungessau</u>	<u>Dungessau</u>	<u>Dungessau</u>
Occupation.	Labourer	Machinist	Labourer
Maiden name of Mother.	Eliza Maud Millitt	Ethel Danubson	Laura Dudley
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Carnish	Dr. Carnter	Dr. Furlong
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still born.	-	-	-
Name of Informant	Chas C Chadwick	E. M. Stanton	F Cussans
Address.	<u>Dungessau</u>	<u>Dungessau</u>	<u>Dungessau</u>
Date of Return	Apr 16th 1914	Apr 14th 1914	Apr 15th 1914
	Surname first	Surname first	Surname first
Surname of child.	Langdown	Cragg	Coxon
Christian name	Robert Kearney	Margaret Jane	Annie Marie
Date of Birth	Mar 22nd 1914	Apr 3th 1914	Mar 20th 1914
Where born? Street number or Con- cession and Lot.	If in a hospital give its name <u>Dungessau</u>	If in a hospital give its name <u>Dungessau</u>	If in a hospital give its name <u>Dungessau</u>
Sex.	Male	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	England, Mar 14th 1914	<u>Dungessau</u> , Sept 12th 1911	<u>Dungessau</u> , Sept 9th 1913
Full name of Father	Charles Langdown	William Edward Cragg	Clarence W. Coxon
Address.	<u>Dungessau</u>	<u>Dungessau</u>	<u>Dungessau</u>
Occupation.	Labourer	Clerk	Machinist
Maiden name of Mother.	Eliza Rebecca Barland	Norah Margaret Wilson	Ellen Grace Barrow
Is she single or a widow?	-	-	-
Name of Physician in at- tendance	Dr. Rogers	Dr. Williams	Dr. Carnter
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still born.	W R Langdown x	-	-
Name of Informant.	-	W E Cragg	W. W. Coxon
Address.	<u>Dungessau</u>	<u>Dungessau</u>	<u>Dungessau</u>
Date of Return.	Apr 15th 1914	Apr 19th 1914	Apr 19th 1914

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending

June 30 1914

Given under my hand this

12th

day of July

A. D. 1914

Division Registrar of

DungessauW. A. Smith

P.O.

Emily doris weekes, roy smith, eileen weekes, alexander mcdonald pearson, charles pearson, bessie mcdonald, ida may canford, isaac camford, esther eta garner, helen marie delaney, thomas alfred delaney, annie galbraith, doris mary andrews, ernest william andrews, alice mary edwards, francis joseph lacombe, harry frederick lacombe, anna helena mcmillan

Schedule B.
B. B.—Record all still-births as Births,
as well as deaths.

BIRTHS

County of Jefferson Division of Jurgensall

	Surname First.	Surname First.	Surname First.
Surname of child.	Weekes	Canford	Andrews
Christian name.	Emily Doris	Ida May	Doris Mary
Date of Birth.	Mar 27th 1914	April 14th 1914	Apr 14th 1914
Where born? Street number or Con- cession and Loc.	If in a hospital give its name Jurgensall	If in a hospital give its name Jurgensall	If in a hospital give its name Jurgensall
Sex.	Female	Female	Female
Are the Parents married?	No	Yes	Yes
Where and when married.	-	London, May 26th 1917	Winnon, S. D. Sept 9th 1909
Full name of Father.	Ray Smith	Isaac Canford	Ernest William Andrews
Address.	Jurgensall	Jurgensall	Jurgensall
Occupation.	Soldier	Rice and Maker	Machinist
Maiden name of Mother.	Eileen D. Weekes	Bessie Etta Garner	Alice Mary Edwards
Is she single or a widow?	Single	-	-
Name of Physician in at- tendance.	Dr. McDonald	Dr. Williams	Dr. Canfield
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimacy or Still-born.	Legitimate	-	-
Name of Informant.	Eileen D. Weekes	Mrs W. S. Garner	E. W. Edwards
Address.	Jurgensall	Jurgensall	Jurgensall
Date of Return.	Apr 22nd 1914	May 11th 1914	May 13th 1914
	Surname First.	Surname First.	Surname First.
Surname of child.	Bearson	Delaney	Lacombe
Christian name.	Alexander McDonald	Helen Marie	Francis Joseph
Date of Birth.	Apr 13th 1914	May 8th 1914	Apr 27th 1914
Where born? Street number or Con- cession and Loc.	If in a hospital give its name Jurgensall	If in a hospital give its name Jurgensall	If in a hospital give its name Jurgensall
Sex.	Male	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Jurgensall June 2nd 1914	Jurgensall Oct 21st 1914	Jurgensall, Sept 1st 1913
Full name of Father.	Charles Bearson	Thomas Alfred Delaney	Harry Frederick Lacombe
Address.	Jurgensall	Jurgensall	Jurgensall
Occupation.	Shoe Maker	Farmer	Printer
Maiden name of Mother.	Bessie McDonald	Annie Galbraith	Anna Helena McMillan
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Williams	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	No
Twin, Triplet, Illegitimacy or Still-born.	-	-	-
Name of Informant.	Mrs Chas. Bearson	Mrs A. Delaney	H. F. Lacombe
Address.	Jurgensall	Jurgensall	Jurgensall
Date of Return.	May 13th 1914	May 21st 1914	May 25th 1914

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30 1914
Given under my hand this 12th day of July A.D. 1914
Division Registrar at Jurgensall S.D.

BIRTHS

Lorne millson moon, william ewart gladstone moon, gladys millson, may archer, may kettlewell, donald francis kerr, william james kerr, eleanor marshall, o. humphrey, earl thomas humphrey, kathleen jenvey, martha elizabeth scott, ernst frederick scott, myrtle phillips, james halpin, michael halpin, martha moore

County of Jefferson Division of Juniata

	Surname First	Surname First	Surname First
Surname of child.	Moan	Kerr	Beath
Christian name.	horne Millson	Daniel Francis	Martha Elizabeth
Date of Birth.	May 2nd 1915	May 6th 1915	June 5th 1915
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Juniata	If in a hospital give its name Juniata	If in a hospital give its name Juniata
Sex.	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Juniata Dec 16th 1911	Washington Mar 16th 1904	Juniata July 2nd 1912
Full name of Father.	William Ewart Gladstone Moan	William James Kerr	Ernest Frederick Beath
Address.	Juniata	Juniata	Juniata
Occupation.	Insurance Agent	Merchant	Machinist
Maiden name of Mother.	Blahy B. Millson	Eleana Marshall	Myrtle Phillips
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Rogers	Dr. Macdonald	Dr. Gurling
Were you in house at time of Birth?	Yes	No	Yes
Twin, Triplet, Illegitimate or Still born.	-	-	-
Name of Informant.	W. B. Moan	W. J. Kerr	E. J. Beath
Address.	Juniata	Juniata	Juniata
Date of Return.	June 3rd 1915	June 6th 1915	June 14th 1915
	Surname First	Surname First	Surname First
Surname of child.	Archer	Humphrey	Halpin
Christian name.	May	Emma	James
Date of Birth.	May 26th 1915	June 15th 1915	June 17th 1915
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Juniata	If in a hospital give its name Juniata	If in a hospital give its name Juniata
Sex.	Female	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	England Nov 1912	Beachville May 15th 1915	Juniata Nov 11th 1913
Full name of Father.	Richard Archer	Earl Thomas Humphrey	Michael Halpin
Address.	Juniata	Juniata	Juniata
Occupation.	Farmer	Machinist	Farmer
Maiden name of Mother.	May Kettlewell	Kathleen Jenvey	Martha Moore
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Rogers	Dr. Rogers	Dr. Carmel
Were you in house at time of Birth?	Yes	No	No
Twin, Triplet, Illegitimate or Still born.	-	Still Born	Still Born
Name of Informant.	Richard Archer	Earl D. Humphrey	Fred W. Keeler
Address.	Juniata	Juniata	Juniata
Date of Return.	June 15th 1915	June 15th 1915	June 17th 1915

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30 1915

Given under my hand this 12th day of July

A.D. 1915

P.O.

Juniata

11228

John louis mcsherry, louis frederick mcsherry, mary jane burns, john george hall, harold hall, tina bain, annie parnell andrews, edward andrews, annie parnell, francis moyer, squire francis moyer, sarah may cooper, charles archibald northey, charles northey, berthia boyer, myrtle beatrice dunn, francis john dunn, melinda janet taylor.

Schedule B.
B. B. - Record all still-births as births, as well as deaths.

BIRTHS

County of Jefferson Division of St. Louis

	Surname First	Surname First	Surname First
Surname of child.	McSherry	Andrews	Northey
Christian name.	John Harris	Annie Parnell	Charles Archibald
Date of Birth.	Apr 30th 1915	May 24th 1915	Apr 26th 1915
Where born? Street number or Con- cession and Lot.	If in a hospital give its name <u>St. Louis</u>	If in a hospital give its name <u>St. Louis</u>	If in a hospital give its name <u>St. Louis</u>
Sex.	Male	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married	St. Louis Sept 7th 1905	England July 22nd 1910	Brooklyn, N.Y. 1902
Full name of Father.	Louis Gabriel McSherry	Edward Andrews	Charles Northey
Address.	St. Louis	St. Louis	St. Louis
Occupation.	Driver	Farmer	Barber
Maiden name of Mother.	Mary Jane Burns	Annie Parnell	Bertha Boyer
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Carnish	Dr. Furlong
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	L. G. McSherry	E. Andrews	W. Furlong
Address.	St. Louis	St. Louis	St. Louis
Date of Return.	May 25th 1915	May 24th 1915	May 26th 1915
Surname First	Keese	Mayer	Dunn
Christian name.	John George	Francis	Myrtle Beatrice
Date of Birth.	May 4th 1915	June 1st 1915	May 29th 1915
Where born? Street number or Con- cession and Lot.	If in a hospital give its name <u>St. Louis</u>	If in a hospital give its name <u>St. Louis</u>	If in a hospital give its name <u>St. Louis</u>
Sex.	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married	Wendover, Kan 9th 1911	Silsdenburg, Mar 31st 1915	London, Oct 29th 1901
Full name of Father.	Harold B. Keese	Squire Francis Mayer	Francis John Dunn
Address.	St. Louis	St. Louis	St. Louis
Occupation.	Capt. U.S. Army	Machinist	Cross Fitter
Maiden name of Mother.	Sara S. Bain	Sarah May Cooper	Melinda Janet Taylor
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Coulter	Dr. Coulter	Dr. Carnish
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Ada S. Hedges	S. J. Mayer	F. J. Dunn
Address.	St. Louis	St. Louis	St. Louis
Date of Return.	May 29th 1915	June 1st 1915	June 2nd 1915

I hereby certify the foregoing to be the true and correct copies of all Births returned to me for the quarter year ending June 30 1915
Given under my hand this 12th day of July A.D. 1915
Division Registrar of St. Louis 1772 Saint-
F.D.

Schedule B.
N.B.—Record all still-births as births,
as well as deaths.

BIRTHS

County of Jefferson Division of Boonesville

	Surname first.	Surname first.	Surname first.
Surname of child.	Crane	Mcready	Smith
Christian name.	Enid Laurine	Clara Marie	Arnold Gallinger
Date of Birth.	May 25th 1915	May 25th 1915	May 25th 1915
Where born? Street number or Con- cession and Lot.	If in a hospital give its name.	If in a hospital give its name.	If in a hospital give its name.
Sex.	Female	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Edwin Co. May 18th 1901	London July 6th 1916	Uniondale Aug 20th 1915
Full name of Father.	John William Crane	George Albert Mcready	Charles Elmer Smith
Address.	Boonesville	Boonesville	Boonesville
Occupation.	Fire Man	Machinist	Butcher
Maiden name of Mother.	Lenora Mae Case	Clara Belle Atkins	Mabel Clarinda Gallinger
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Coulter	Dr. Williams	Dr. Coulter
Were you in house at time of Birth?	Yes	Yes	No
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Belle Crane	Geo. A. Mcready	Charles E. Smith
Address.	Boonesville	Boonesville	Boonesville
Date of Return.	June 17th 1915	June 20th 1915	June 24th 1915

	Surname first.	Surname first.	Surname first.
Surname of child.			
Christian name.			
Date of Birth.			
Where born? Street number or Con- cession and Lot.	If in a hospital give its name.	If in a hospital give its name.	If in a hospital give its name.
Sex.			
Are the Parents married?			
Where and when married.			
Full name of Father.			
Address.			
Occupation.			
Maiden name of Mother.			
Is she single or a widow?			
Name of Physician in at- tendance.			
Were you in house at time of Birth?			
Twin, Triplet, Illegitimate or Still-born.			
Name of Informant			
Address.			
Date of Return.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1915
Given under my hand this 12th day of July A.D. 1915

Division Registrar of

Boonesville

P.O.

Fred brooks, elizabeth wallace, douglas haig copeland, jami orlie huntley, george huntley, bella margaret peake, camera garfield turpin, vera hansford, helen taylor scott, james telford mclean taylor, john manley matthews, earl matthews, bernie

Substitute B.
M.B.—Record all still-births as births,
as well as deaths.

BIRTHS

County of *Jefferson* Division of *Ingersoll*

	Surname First.	Surname First.	Surname First.
Surname of child	<i>Brooks</i>	<i>Huntley</i>	<i>Scott</i>
Christian name.	<i>Baby</i>	<i>Orlie</i>	<i>Kelen Taylor</i>
Date of Birth.	<i>July 2nd 1915</i>	<i>July 2nd 1915</i>	<i>June 17th 1915</i>
Where born? Street number or Con- cession and Lot.	<i>If in a hospital give its name Ingersoll</i>	<i>If in a hospital give its name Ingersoll</i>	<i>If in a hospital give its name Ingersoll</i>
Sex.	<i>Female</i>	<i>Male</i>	<i>Female</i>
Are the Parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Where and when married.		<i>Prince Co Sept 4th 1912</i>	<i>Scotland. June 14th 1907</i>
Full name of Father.	<i>Fred Brooks</i>	<i>George Huntley</i>	<i>James Selzer Scott</i>
Address.	<i>Ingersoll</i>	<i>Beltrian</i>	<i>Ingersoll</i>
Occupation.	<i>Farmer</i>	<i>Farmer</i>	<i>Milk Dealer</i>
Maiden name of Mother.	<i>Elizabeth Wallace</i>	<i>Bess Margaret Peake</i>	<i>Kelen William Taylor</i>
Is she single or a widow?	<i>-</i>	<i>-</i>	<i>-</i>
Name of Physician in at- tendance.	<i>Dr. Carnick</i>	<i>Dr. Williams</i>	<i>Dr. Carnick</i>
Were you in house at time of Birth?	<i>Yes</i>	<i>No</i>	<i>No</i>
Twin, Triplet, Illegitimate or Still born.	<i>Still Born</i>	<i>-</i>	<i>-</i>
Name of Informant.	<i>L. L. Carnick</i>	<i>George Huntley</i>	<i>James S. Scott</i>
Address.	<i>Ingersoll</i>	<i>Beltrian</i>	<i>Ingersoll</i>
Date of Return.	<i>July 2nd 1915</i>	<i>July 2nd 1915</i>	<i>July 2nd 1915</i>
	Surname First.	Surname First.	Surname First.
Surname of child.	<i>Copeland</i>	<i>Turpin</i>	<i>Matthews</i>
Christian name.	<i>Douglas Haig</i>	<i>Cameron William</i>	<i>John Manley</i>
Date of Birth.	<i>June 29th 1915</i>	<i>June 16th 1915</i>	<i>June 22nd 1915</i>
Where born? Street number or Con- cession and Lot.	<i>If in a hospital give its name Ingersoll</i>	<i>If in a hospital give its name Ingersoll</i>	<i>If in a hospital give its name Ingersoll</i>
Sex.	<i>Male</i>	<i>Male</i>	<i>Male</i>
Are the Parents married?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Where and when married.	<i>London. Oct 2nd 1915</i>	<i>Banner, Sept 4th 1911</i>	<i>Ingersoll. Dec 29th 1915</i>
Full name of Father.	<i>James Copeland</i>	<i>Henry Garfield Turpin</i>	<i>Earl Matthews</i>
Address.	<i>Ingersoll</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Occupation.	<i>Teacher</i>	<i>Shipping Clerk</i>	<i>Machinist</i>
Maiden name of Mother.	<i>Mary Shields</i>	<i>Vera Hansford</i>	<i>Bernie Muriel Forsyth</i>
Is she single or a widow?	<i>-</i>	<i>-</i>	<i>-</i>
Name of Physician in at- tendance.	<i>Dr. Furlong</i>	<i>Dr. Carnick</i>	<i>Dr. Carnick</i>
Were you in house at time of Birth?	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Twin, Triplet, Illegitimate or Still born.	<i>-</i>	<i>-</i>	<i>-</i>
Name of Informant.	<i>James Copeland</i>	<i>H. H. Turpin</i>	<i>Earl Matthews</i>
Address.	<i>Ingersoll</i>	<i>Ingersoll</i>	<i>Ingersoll</i>
Date of Return.	<i>July 5th 1915</i>	<i>July 5th 1915</i>	<i>July 9th 1915</i>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending *Sept 30th* 19 *15*
 Given under my hand this *5th* day of *Oct* A.D. *1915*
 Division Registrar of *Ingersoll* P.O.

BIRTHS

County of Jefferson Division of Demersale

	Surname, First	Surname, First	Surname, First
Name of child.	Clayton	Dickson	Wyllie
Christian name.	Jessie	Ralph Frederick	Herbert Joseph
Date of Birth.	June 21st 1915	June 25th 1915	July 29th 1915
Where born? Street number or Concession and Lot.	If in a hospital give its name <u>Demersale</u>	If in a hospital give its name <u>Demersale</u>	If in a hospital give its name <u>Demersale</u>
Sex.	Female	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	England July 13th 1913	Washington June 20th 1911	Ball June 26th 1907
Full name of Father.	James Henry Clayton	William J Dickson	George Herbert Wyllie
Address.	Demersale	Demersale	Demersale
Occupation.	Mechanic	Moulder	Sails
Maiden name of Mother.	Clara Jessie Bell	Mary H Jackson	Lottie Bart
Is she single or a widow?	-	-	-
Name of Physician in attendance.	Dr Rogers	Dr Carrish	Dr Furlong
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	James H Clayton	Mrs Ed Jackson	W H Wyllie
Address.	Demersale	Demersale	Demersale
Date of Return.	July 11th 1915	July 12th 1915	July 29th 1915
	SURNAME, FIRST	SURNAME, FIRST	SURNAME, FIRST
Surname of child.	Dodd	Kentt	Healy
Christian name.	Sarahy Jennie	John Stuart	Baby
Date of Birth.	July 1st 1915	July 6th 1915	Aug 4th 1915
Where born? Street number or Concession and Lot.	If in a hospital give its name <u>Demersale</u>	If in a hospital give its name <u>Demersale</u>	If in a hospital give its name <u>Demersale</u>
Sex.	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	St Marys, May 21st 1916	Demersale Oct 30th 1906	Saraula, Sept 14th 1914
Full name of Father.	Alfred Thomas Dodd	Hubert Erastus Kentt	Lawrence W. Healy
Address.	Demersale	Fennell +	Demersale
Occupation.	Mechanic	Demersale +	Broker
Maiden name of Mother.	Orpha Lucy Dickson	Elizabeth Ann Stuart	Isabella Murro
Is she single or a widow?	-	-	-
Name of Physician in attendance.	Dr Carrish	Dr Rogers	Dr Carrish
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	Still Born
Name of Informant.	Alfred T. Dodd	H. E. Kentt	L. W. Healy
Address.	Demersale	Demersale	Demersale
Date of Return.	July 30th 1915	Aug 6th 1915	Aug 6th 1915

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1915 20th day of Oct A.D. 1915

Division Registrar of Demersale

BIRTHS

Charles appleby, frederick james appleby, ada rawn, marguerite ferné murray, garfield murray, mabel harris, margaret jean edwards, alexander hume edwards, evelyn pearl blackwell, ralph john graham beck, george devin beck, pera horseman, orrin albert simmons, burton orrin simmons, mabel ingram, lorne roland marlatt, lorne manson marlatt, luella belle stoneman

County of _____

Division of _____

	Surname first	Surname first	Surname first
Surname of child.	Appleby	Edwards	Simmons
Christian name	Charles	Margaret Jean	Orrin Albert
Date of Birth	Aug 2nd 1914	July 28th 1914	Aug 1st 1914
Where born? Street number or Con- cession and Lot.	Sugarsall If in a hospital give its name	Sugarsall If in a hospital give its name	Sugarsall If in a hospital give its name
Sex.	Male	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	England Sept 2/07	Olympian Aug 14th 1914	Aufimer. Sept 11th 1911
Full name of Father.	Frederick James Appleby	Alexander Hume Edwards	Burton Orrin Simmons
Address.	Sugarsall	Sugarsall	Sugarsall
Occupation.	Machinist	Machinist	Butcher
Maiden name of Mother.	Ola Hausdon	Eva Bevel Blackwell	Mabel Ingram
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Furlong	Dr. Coulter
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	With Born	-	-
Name of Informant.	F. J. Appleby	W. H. Furlong	Burton O. Simmons
Address.	Sugarsall	Sugarsall	Sugarsall
Date of Return.	Aug 24th 1914	Aug 24th 1914	Aug 26th 1914
	Surname first	Surname first	Surname first
Surname of child.	Murray	Beck	Marlatt
Christian name	Marguerite Ferné	Ralph John Graham	Lorne Ronald
Date of Birth	July 26th 1914	Aug 5th 1914	Aug 21st 1914
Where born? Street number or Con- cession and Lot.	Sugarsall If in a hospital give its name	Sugarsall If in a hospital give its name	Sugarsall If in a hospital give its name
Sex.	Female	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Sugarsall. Sept 14th 1914	Sugarsall. Oct 16th 1917	Sugarsall. June 14th 1917
Full name of Father.	George Baird Murray	George Devlin Beck	Lorne Manson Marlatt
Address.	Sugarsall	Sugarsall	Sugarsall
Occupation.	Military Surgeon	Fruit Merchant	Accountant
Maiden name of Mother.	Mabel Harris	Bena Horseman	Luella Belle Stoneman
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Coulter	Dr. Rogers	Dr. Coulter
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	F. B. Murray	A. A. Beck	L. M. Marlatt
Address.	Sugarsall	Sugarsall	Sugarsall
Date of Return.	Aug 26th 1914	Aug 27th 1914	Sept 13th 1914

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1914

Given under my hand this 5th day of Oct A.D. 1914

Division Registrar of Sugarsall

BIRTHS

Leslie james daniels, leslie john daniels, mary ellen leigh, william g...
 rine, evelyn greenaway, walter vern glancy, russell glancey, conna te...
 william george fremantle, william james fremantle, millison olive weston...
 burrows, arthur roy burrows, louise mary pitman, mildred ilene nichols, james arthur
 nichols, dorothy cullon cullen

Schedule B.
 To be returned all still-births as births,
 as well as deaths.

County of Jefferson Division of Ingersoll

	Surname First	Surname First	Surname First
Surname of child,	Daniels	Blaney	Burrows
Christian name.	Leslie James	Walter Vern	Ruth Marion
Date of Birth.	July 9th 1914	July 9th 1914	Aug 4th 1914
Where born? <small>(Street number or Con- cession and Lot.)</small>	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingersoll 1908	Detroit June 11th 1911	Arthur Roy Burrows +
Full name of Father.	Leslie John Daniels	Russell Blaney	Saranto June 19th 1911 +
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Lumber Worker	Machinist	Traveler
Maiden name of Mother.	Mary Ellen Leigh	Conna Sewell	Levise Mary Pitman
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Caulter	Dr. Carnish	Dr. Carnish
Were you in house at time of Birth?	Yes	Yes	Yes
Twins, Triplets, Illegitimate or Still-born.	-	-	-
Name of Informant.	Mrs. Sillitt	Russell Blaney	A. R. Burrows
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Aug 7th 1914	Aug 9th 1914	Aug 12th 1914
Surname First	Surname First	Surname First	Surname First
Surname of	Rine	Fremantle	Nichols
Christian name.	William Cole	William George	Mildred Ellen
Date of Birth.	July 17th 1914	Aug 16th 1914	July 27th 1914
Where born? <small>(Street number or Con- cession and Lot.)</small>	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingersoll Oct 21/14	Ingersoll May 21st 1916	Saranto Aug 1st 1912
Full name of Father.	Joseph Rine	William James Fremantle	James Arthur Nichols
Address.	Ingersoll	Ingersoll	Ingersoll R.R. No 2
Occupation.	Machinist	Machinist	Farmer
Maiden name of Mother.	Evelyn Greenaway	Millison Olive Weston	Dorothy Cullen
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Furlong	Dr. Macdonald	Dr. Macdonald
Were you in house at time of Birth?	Yes	Yes	Yes
Twins, Triplets, Illegitimate or Still-born.	-	-	-
Name of Informant.	W. S. Furlong	W. J. Fremantle	J. A. Nichols
Address.	Ingersoll	Ingersoll	Ingersoll R.R. No 2
Date of Return.	Aug 7th 1914	Aug 17th 1914	Aug 22nd 1914

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1914
 Given under my hand and seal this 5th day of Oct A.D. 1914
 Division Registrar of Ingersoll P.O.

Edward henry albroough, edward albroough, berthia brassington, verne edward crane, edward crane, emma louise elfone, kenneth alexander mckay, henry oriel mckay, maud crane.

Schedule B,
N. B.—Record all still-births as births,
as well as deaths.

BIRTHS

County of Jefferson Division of Singersee

Surname first	Surname first	Surname first
Surname of child. <u>Albroough</u>	Surname of child. <u>Crane</u>	Surname of child. <u>Mckay</u>
Christian name. <u>Edward Henry</u>	Christian name. <u>Verne Edward</u>	Christian name. <u>Kenneth Alexander</u>
Date of Birth. <u>Sept 28th 1914</u>	Date of Birth. <u>Sept 20th 1914</u>	Date of Birth. <u>Sept 2nd 1914</u>
Where born? Street number or Con- cession and Lot. <u>If in a hospital give its name Singersee</u>	Where born? Street number or Con- cession and Lot. <u>If in a hospital give its name Singersee</u>	Where born? Street number or Con- cession and Lot. <u>If in a hospital give its name Singersee</u>
Sex. <u>Male</u>	Sex. <u>Male</u>	Sex. <u>Male</u>
Are the Parents married? <u>Yes</u>	Are the Parents married? <u>Yes</u>	Are the Parents married? <u>Yes</u>
Where and when married. <u>Singersee Dec 1st 1913</u>	Where and when married. <u>Singersee 1914</u>	Where and when married. <u>Singersee Mar 1st 1913</u>
Full name of Father. <u>Edward H. Albroough</u>	Full name of Father. <u>Rayel Edward Crane</u>	Full name of Father. <u>Henry Oriel Mckay</u>
Address. <u>Singersee</u>	Address. <u>Singersee</u>	Address. <u>Singersee</u>
Occupation. <u>Inspector</u>	Occupation. <u>Section Man</u>	Occupation. <u>Electrician</u>
Maiden name of Mother. <u>Bertha Brassington</u>	Maiden name of Mother. <u>Emma Louise Elfone</u>	Maiden name of Mother. <u>Oliver Maud Crane</u>
Is she single or a widow? <u>-</u>	Is she single or a widow? <u>-</u>	Is she single or a widow? <u>-</u>
Name of Physician in at- tendance. <u>Dr. Larnish</u>	Name of Physician in at- tendance. <u>Dr. Larnish</u>	Name of Physician in at- tendance. <u>Dr. Larnish</u>
Were you in house at time of Birth? <u>No</u>	Were you in house at time of Birth? <u>No</u>	Were you in house at time of Birth? <u>Yes</u>
Twin, Triplet, Illegitimate or Still-born. <u>-</u>	Twin, Triplet, Illegitimate or Still-born. <u>-</u>	Twin, Triplet, Illegitimate or Still-born. <u>-</u>
Name of Informant. <u>E. H. Albroough</u>	Name of Informant. <u>R. Elfone</u>	Name of Informant. <u>Henry O. Mckay</u>
Address. <u>Singersee</u>	Address. <u>Singersee</u>	Address. <u>Singersee</u>
Date of Return. <u>Sept 14th 1914</u>	Date of Return. <u>Sept 20th 1914</u>	Date of Return. <u>Sept 28th 1914</u>
SURNAME FIRST	SURNAME FIRST	SURNAME FIRST
Surname of child.	Surname of child.	Surname of child.
Christian name.	Christian name.	Christian name.
Date of Birth.	Date of Birth.	Date of Birth.
Where born? Street number or Con- cession and Lot. <u>If in a hospital give its name.</u>	Where born? Street number or Con- cession and Lot. <u>If in a hospital give its name.</u>	Where born? Street number or Con- cession and Lot. <u>If in a hospital give its name.</u>
Sex.	Sex.	Sex.
Are the Parents married?	Are the Parents married?	Are the Parents married?
Where and when married.	Where and when married.	Where and when married.
Full name of Father.	Full name of Father.	Full name of Father.
Address.	Address.	Address.
Occupation.	Occupation.	Occupation.
Maiden name of Mother.	Maiden name of Mother.	Maiden name of Mother.
Is she single or a widow?	Is she single or a widow?	Is she single or a widow?
Name of Physician in at- tendance.	Name of Physician in at- tendance.	Name of Physician in at- tendance.
Were you in house at time of Birth?	Were you in house at time of Birth?	Were you in house at time of Birth?
Twin, Triplet, Illegitimate or Still-born.	Twin, Triplet, Illegitimate or Still-born.	Twin, Triplet, Illegitimate or Still-born.
Name of Informant.	Name of Informant.	Name of Informant.
Address.	Address.	Address.
Date of Return.	Date of Return.	Date of Return.

I hereby certify the foregoing to be the true and correct entries of all births returned to me for the quarter year ending Sept 30th 1914

Given under my hand this 5th day of Oct.
Division Registrar of Singersee

A. D. 1914

P.O.

James arthur ingram, merwyn willard ingram, mildred tyrrell, milton alexander hillman, james leonard hillman, eva louise sumner, mary margaret beatty, wellington herbert beatty, mary gertrude kennedy, douglas everett wright, george wright, mildred thompson, ginopa brasse, aguglia brasse, dangelo carmello.

BIRTHS

Section B.
N.B.—Record all still-births as births, as well as deaths.

County of Jefferson Division of Singersville

	Surname First.	Surname First.	Surname First.
Surname of child.	Simmons	Hillman	Wright
Christian name.	Orin Albert	Milton Alexander	Douglas Everett
Date of Birth.	Aug 1st 1915	Aug 16th 1915	Aug 25th 1915
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Singersville	If in a hospital give its name Singersville	If in a hospital give its name Singersville
Sex.	Male	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingleside Feb 11th 1911	Singersville July 15th 1915	Singersville, Iowa, 1915
Full name of Father.	Burlan Orin Simmons	James Leonard Hillman	George R. B. Wright
Address.	Singersville	Singersville	Singersville
Occupation.	Barber	Military Worker	Machinist
Maiden name of Mother.	Mabel Ingrou	Eva Louise Sumner	Mildred Thompson
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Carmin	Dr. Carmin	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Burlan Simmons	Mrs. J. Hillman	Ralph Williams
Address.	Singersville	Singersville	Singersville
Date of Return.	Sept 12th 1915	Sept 14th 1915	Sept 14th 1915
	SUPPLEMENT	SUPPLEMENT	SUPPLEMENT
Surname of child.	Ingrou	Beatty	Brasse
Christian name.	James Arthur	Mary Margaret	Aguglia
Date of Birth.	Sept 1st 1915	Sept 16th 1915	Sept 17th 1915
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Singersville	If in a hospital give its name Singersville	If in a hospital give its name Singersville
Sex.	Male	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Bartholite March 25th 1905	Singersville Nov 15th 1909	Canada 1911
Full name of Father.	Merwyn Willard Ingrou	Wellington Herbert Beatty	Aguglia Brasse
Address.	Bartholite R.R. No 1	Singersville	Singersville
Occupation.	Farmer	Bookkeeper	Fruit Dealer
Maiden name of Mother.	Mildred Dupree	Mary Gertrude Kennedy	Dangelo Carmello
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Carmin	Dr. Williams	Dr. Williams
Were you in house at time of Birth?	No	No	Yes
Twin, Triplet, Illegitimate or Still-born.	-	Still-born	-
Name of Informant.	M. W. Ingrou	Fred W. Keeler	Carmelo Dangelo
Address.	Bartholite R.R. No 1	Singersville	Singersville
Date of Return.	Sept 16th 1915	Sept 17th 1915	Sept 18th 1915

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1915
 Given under my hand this 5th day of Oct. A.D. 1915
 District Registrar of Singersville

P.O.

BIRTHS

Lillian ruth elston, frederick elston, elston tupper, alice may hayward, arthur
 alma johnson, lida bell wisson, robert arthur wisson, isabell courtts, elsie ruth res
 rest rist, pearl emma johnston, olive glady woolcott, joseph woolcott, margaret
 phyllis irene thompson, edgerton thompson, orpha ulman ulman.

County of Jefferson Division of Ingersoll

	Surname First	Surname First	Surname First
Surname of child.	Elston	Wisson	Woolcott
Christian name.	Lillian Ruth	Lida Belle	Olive Gladys
Date of Birth.	Oct 27th 1918	Oct 14th 1918	Oct 14th 1918
Where born? Street number or Con- cession and Lot.	Home If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	Home If in a hospital give its name Ingersoll
Sex.	Female	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	England, Jan 18th 1913	Deloit, Mar 30th 1902	London, July 21st 1915
Full name of Father.	Frederick W. Elston	Robert Arthur Wisson	Joseph Woolcott
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Shell Inspector	Machine hand	S. A. Carpenter
Maternal name of Mother.	Sarah Tupper	Isabell Courtts	Margaret Roberts
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Carnter	Dr. Carnter	Dr. Carnter
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still born.	-	-	-
Name of Informant.	F. W. Elston	R. A. Wisson	Joseph Woolcott
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Nov 5th 1918	Nov 5th 1918	Nov 5th 1918
Surname First	Surname First	Surname First	Surname First
Surname of child.	Keyward	Reat	Thompson
Christian name.	Alice May	Elsie Ruth	Phyllis Irene
Date of Birth.	Oct 25th 1918	Oct 13th 1918	Oct 31st 1918
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Female	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingersoll, May 1st 1914	Ingersoll, Sept 26th 1917	Wheatlan, Sept 10th 1913
Full name of Father.	Arthur Keyward	Albert Reat	Henry Edgeman Thompson
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Machine hand	Machine hand	Sole Maker
Maternal name of Mother.	Alma Johnson	Beal Emma Johnston	Alpha Almay
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Macdonald	Dr. Carnter	Dr. Carnter
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still born.	-	-	-
Name of Informant.	Mother, Johnson	Arthur Reat	Alpha S. Thompson
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Nov 4th 1918	Nov 11th 1918	Nov 16th 1918

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1918

Given under my hand this 5th day of Jan
 Division Registrar of Ingersoll

BIRTHS

Hilda pearl elizabeth emily ingham, frank jaques ingham, hilda rose un...
 venezelas tampros, john tampros, pato polekiomas, ruth lucille hayward, w...
 edward hayward, gertrude cummings, lloyd russell philips, richard bruce pl...
 gertrude turner, irene sarah sheldon, fred joseph sheldon, violet bailey, lefroy...
 zavitz, edwin zavitz, rena mae arner

County of Jefferson

Division of Registers

	Surname first.	Surname first.	Surname first.
Surname of child.	Ingham	Hayward	Sheldon
Christian name	Hilda Rose Elizabeth Emily	Ruth Lucille	Irene Sarah
Date of Birth.	Nov 11th 1918	Oct 21st 1918	Nov 7th 1918
Where born? Street number or Cor- ner and Lot.	Charles If in a hospital give its name	Helena If in a hospital give its name	Carriage If in a hospital give its name
Sex.	Female	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingersoll, May 2nd 1917	Sarant's Sept 1st 1915	Ingersoll, Oct 12th 1912
Full name of Father.	Frank Jaques Ingham	William Edward Hayward	Fred Joseph Sheldon
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Carpenter	Mechanic	Night Watchman
Maiden name of Mother.	Hilda Rose Underwood	Gertrude Cummings	Violet M. Bailey
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Carnish	Dr. Williams	Dr. Carnter
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Frank J Ingham	W. E. Hayward	F. J. Sheldon
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Nov 21st 1918	Nov 21st 1918	Nov 21st 1918
	SURNAME FIRST.	SURNAME FIRST.	SURNAME FIRST.
Surname of child.	Tampros	Phillips	Gaultz
Christian name	Venezelas	Lloyd Russell	L. Ray Byle
Date of Birth.	Nov 19th 1918	Nov 24th 1918	Nov 22nd 1918
Where born? Street number or Cor- ner and Lot.	If in a hospital give its name	If in a hospital give its name	If in a hospital give its name
Sex.	Male	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Breee 1903	Ingersoll, Oct 30th 1917	Culman, Dec 14th 1912
Full name of Father.	John Tampros	Richard Bruce Phillips	Edwin Gaultz
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Shoeshine Man	Merchant	Farmer
Maiden name of Mother.	Calo Balchiamas	Gertrude Turner	Rena Mae Arner
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Carnter	Dr. Rogers	Dr. Carnish
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	John Tampros	R. B. Phillips	L. Forbes
Address.	Ingersoll	Ingersoll	Ingersoll, (Murray)
Date of Return.	Nov 29th 1918	Dec 2nd 1918	Dec 5th 1918

I hereby certify the foregoing to be the true and correct copies of all Births returned to me for the quarter year ending Dec 31st 1918

Given under my hand this 4th day of Jan A.D. 1919

Division Register of Ingersoll

P.O.

BIRTHS

Ruby rose, alexander rose, mildred arnstrom, mildred pemberton, robert terry pemberton, fena mcCreery, stanley alexander pate, gordon martin haughton pate, beatrice, neil montgomery baker, albert henry baker, florence noxon, rebecca jenora clipson, george charles clipson, clara jane davis, harold george banner, edward howard banner, ada may losee

County of Jefferson Division of Englewood

	Surname First	Surname First	Surname First
Surname of child.	Rose	Bate	Clipsan
Christian name.	Ruby	Stanley Alexander	Rita Kamara
Date of Birth.	Oct 25th 1914	Oct 4th 1914	Oct 25th 1914
Where born? Street number or Concession and Lot.	If in a hospital give its name Englewood	If in a hospital give its name Englewood	If in a hospital give its name Englewood
Sex.	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Englewood 1911	Lawrence, Mo. 11th 1914	Wheaton Mo. 7th 1904
Full name of Father.	Alex Rose	Gordon Martin Haughton Bate	George Charles Clipsan
Address.	Englewood	Englewood	Englewood
Occupation.	Farmer	Teacher	Teacher
Maiden name of Mother.	Mildred Arnstrom	Beatrice E. Lane	Clara Jane Davis
Is she single or a widow?	-	-	-
Name of Physician in attendance.	Dr. Rogers	Dr. Cantler	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Alex Rose	Mrs. M. M. Bate	H. C. Clipsan
Address.	Englewood	Englewood	Englewood
Date of Return.	Oct 25th 1914	Nov 2nd 1914	Nov 4th 1914
Surname of child.	Bamberline	Baker	Banner
Christian name.	Mildred Beulah	Neil Montgomery	Harold George
Date of Birth.	Oct 15th 1914	Mar 20th 1914	Oct 30th 1914
Where born? Street number or Concession and Lot.	If in a hospital give its name Englewood	If in a hospital give its name Englewood	If in a hospital give its name Englewood
Sex.	Female	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Hamilton 1908	Wheaton Mo. Feb 14th 1908	Wheaton Mo. Feb 26th 1912
Full name of Father.	Robert Jerry Bamberline	Albert Henry Baker	Edward Howard Banner
Address.	Englewood	Englewood	Englewood
Occupation.	Saddlemaker	High School Teacher	C.O.R. Farmer
Maiden name of Mother.	Fena McCreery	Florence Noxon	Ada May Losee
Is she single or a widow?	-	-	-
Name of Physician in attendance.	Dr. Williams	Dr. Williams	Dr. Cantler
Were you in house at time of Birth?	No	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Robert Jerry Bamberline	Ralph Williams	C. Farber, Nurse
Address.	Englewood	Englewood	Englewood
Date of Return.	Nov 6th 1914	Nov 6th 1914	Nov 6th 1914

I hereby certify the foregoing to be the true and correct copies of all Births returned to me for the quarter year ending Dec 31st 1914
 Given under my hand this 6th day of Jan A.D. 1915
 Division Registrar of Englewood

BIRTHS

Arthur price, emily whitwell, john arthur mcginn, frank peters, graham verne buchanan, jamieson verne buchanan, lynn redhead, william redhead, annie mae barker, frederick owes, jennie lena haskin hoskin, edith maude wilson, ernest albert maude walsh.

County of Jefferson Division of Ingersoll

	Surname First	Surname First	Surname First
Surname of child	<u>Orice</u>	<u>Buchanan</u>	<u>Lawrence</u>
Christian name	<u>Billy</u>	<u>Graham Verne</u>	<u>Frederic Graham</u>
Date of Birth	<u>Sept 20th 1914</u>	<u>Sept 19th 1914</u>	<u>Sept 10th 1914</u>
Where born / Street number or Concession and Loc.	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Sex	<u>Female</u>	<u>Male</u>	<u>Male</u>
Are the Parents married?	<u>No</u>	<u>Yes</u>	<u>Yes</u>
Where and when married	<u>-</u>	<u>Washburn, Oct 22nd 1912</u>	<u>Beachville, Dec 12th 1912</u>
Full name of Father	<u>Orville Orice</u>	<u>Jamieson Verne Buchanan</u>	<u>Fred Verne Lawrence</u>
Address	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Beachville</u>
Occupation	<u>Soldier</u>	<u>Manufacturer</u>	<u>Farmer</u>
Maiden name of Mother	<u>Emily Whitwell</u>	<u>Wmama Vera Clarke</u>	<u>Jennie Lena Hoskin</u>
Is she single or a widow?	<u>Single</u>	<u>-</u>	<u>-</u>
Name of Physician in attendance	<u>Dr. Coulter</u>	<u>Dr. Williams</u>	<u>Dr. Rogers</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Twin, Triplet, Mergimata or Still born	<u>Legitimate</u>	<u>-</u>	<u>-</u>
Name of Informant	<u>Mrs Whitwell</u>	<u>J. W. Buchanan</u>	<u>Fred W. Lawrence</u>
Address	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Beachville</u>
Date of Return	<u>Oct 2nd 1914</u>	<u>Oct 2nd 1914</u>	<u>Oct 9th 1914</u>
Surname First			
Surname of child	<u>William</u>	<u>Redhead</u>	<u>Wilson</u>
Christian name	<u>John Orville</u>	<u>Allie Lynn</u>	<u>Edith Maude</u>
Date of Birth	<u>Sept 22nd 1914</u>	<u>Oct 1st 1914</u>	<u>Sept 25th 1914</u>
Where born / Street number or Concession and Loc.	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Sex	<u>Male</u>	<u>Male</u>	<u>Female</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Where and when married	<u>Zanulo, Dec 22nd 1917</u>	<u>Chicago Jan 1st 1913</u>	<u>Montreal, Oct 11th 1902</u>
Full name of Father	<u>Francis Cleveland William</u>	<u>William Redhead</u>	<u>Ernest Albert Wilson</u>
Address	<u>Zanulo</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Occupation	<u>Cadet Royal Air Force</u>	<u>Machine hand</u>	<u>Manufacturer</u>
Maiden name of Mother	<u>Oliver Jane Peters</u>	<u>Janie Mae Barker</u>	<u>Sarah Maude Walsh</u>
Is she single or a widow?	<u>-</u>	<u>-</u>	<u>-</u>
Name of Physician in attendance	<u>Dr. Furlong</u>	<u>Dr. Williams</u>	<u>Dr. Rogers</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Twin, Triplet, Mergimata or Still born	<u>-</u>	<u>-</u>	<u>-</u>
Name of Informant	<u>J. S. William</u>	<u>Wm Redhead</u>	<u>E. A. Wilson</u>
Address	<u>Ingersoll</u>	<u>Ingersoll</u>	<u>Ingersoll</u>
Date of Return	<u>Oct 16th 1914</u>	<u>Oct 2nd 1914</u>	<u>Oct 25th 1914</u>

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1914
 Given under my hand this 5th day of Jan A.D. 1915
 Division Registrar of Ingersoll P.O.

County of Oregon Division of Ingersoll

	Surname first.	Surname first.	Surname first.
Surname of child.	Bryke	Hughes	Dale
Christian name.	Israel Victoria	Eleusad	Dorothy Mary
Date of Birth.	Nov 12th 1918	Dec 6th 1918	Nov 20th 1918
Where born? Street number or Con- cession and Lot.	Benham If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll.	Charles 6 If in a hospital give its name Ingersoll
Sex.	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Sarantis July 27th 1915	Sarantis Dec 19th 1917	Woodlawn Nov 22nd 1910
Full name of Father.	Charles Bryke	George Eleusad Hughes	Harry Dale
Address.	Ingersoll	North Harriet	Ingersoll
Occupation.	Suit maker	Farmer	Machinist
Maiden name of Mother.	Elythie Green	Ada Florence ^{W.} Miller	Annabel Morrison
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Coulter	Dr. Rogers	Dr. Williams
Were you in house at time of Birth?	Yes	No	No
Twin, Triplet, Illegitimate or Still born.	-	Still Born	-
Name of Informant.	Mrs. Eliza Bryke	Dr. Hughes	Amelia Berry
Address.	Ingersoll	North Harriet	Ingersoll
Date of Return.	Dec 6th 1918	Dec 7th 1918	Dec 9th 1918
	SURNAME FIRST	SURNAME FIRST	SURNAME FIRST
Surname of child.	Schaefer	Carnfaat	
Christian name.	Margerie Helen	Milred Blanche	
Date of Birth.	Nov 11th 1918	Nov 20th 1918	
Where born? Street number or Con- cession and Lot.	Cherry If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name.
Sex.	Female	Female	
Are the Parents married?	Yes	Yes	
Where and when married.	Carl Paven June 25/18	Ingersoll Dec 21st 1915	
Full name of Father.	Salomon Schaefer	Archie James Carnfaat	
Address.	Ingersoll	Ingersoll	
Occupation.	Blumber	Electrician	
Maiden name of Mother.	Orlie Marie Kutehina	Therza May Smith	
Is she single or a widow?	-	-	
Name of Physician in at- tendance.	Dr. Rogers	Dr. Williams	
Were you in house at time of Birth?	Yes	Yes	
Twin, Triplet, Illegitimate or Still born.	-	-	
Name of Informant.	S Schaefer	A J Carnfaat	
Address.	Ingersoll	Ingersoll	
Date of Return.	Dec 10th 1918	Dec 21st 1918	

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1918

Given under my hand this 5th day of Jan

A.D. 1919

Division Registrar of

Ingersoll

day of

W. Smith

P.O.

BIRTHS

Stella irene connor, violet alea mcreeady, wilfred james cotterell, frank
 lawrence cotterell, edith annie courtney, earl alean dynes, john stanley dynes, alivena
 corbett, pansy ruth wilford, bruce charles wilford, rose o'bright, jean isabell waterhouse,
 lambert waterhouse, minnie bell taylor, frederick adam ellis, frederick charles ellis, a
 henrietta groves graves

County of Offord Division of Sugerale

	Surname first	Surname first	Surname first
Surname of child.	Connor	Dynes	Waterhouse
Christian name.	Stella Irene	Earl Alean	Jean Isabell
Date of Birth.	July 4th 1919	Jan 9th 1919	Jan 24th 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Sugerale	If in a hospital give its name Sugerale	If in a hospital give its name Sugerale
Sex.	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
When and when married.	London Aug 25th 19	Dorchester Dec 19th 1907	London Dec 16th 1911
Full name of Father.	Henry Connor	John Stanley Dynes	Lambert Waterhouse
Address.	Sugerale	Sugerale	Sugerale
Occupation.	Labourer	Mechanic	Machinist
Maiden name of Mother.	Violet Alea Mcreeady	Alivena Corbett	Minnie Bell Taylor
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Lamerie	Dr. Carmish	Dr. Lamerie
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Mr H Connor	Mrs J.S. Dynes	Lambert Waterhouse
Address.	July 2nd 1919	July 6th 1919	July 5th 1919
Date of Return.			
	Surname first	Surname first	Surname first
Surname of child.	Cotterell	Wilford	Ellis
Christian name.	Wilfred James	Pansy Ruth	Frederick Adam
Date of Birth.	Dec 22nd 1918	Jan 30th 1919	Dec 22nd 1918
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Sugerale	If in a hospital give its name Sugerale	If in a hospital give its name Sugerale
Sex.	Male	Female	Male
Are the Parents married?	Yes	Yes	Yes
When and when married.	Windsor March 1911	Sugerale Aug 10th 1918	Woodstock Dec 28th 1916
Full name of Father.	James Lawrence Cotterell	Bruce Charles Wilford	Frederick Charles Ellis
Address.	Sugerale	Sugerale	Sugerale
Occupation.	Labourer	Labourer	Butcher
Maiden name of Mother.	Edith Annie Courtney	Rose O'Bright	Anna Henrietta Graves
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	None	Dr. G.B. Carmish	Dr. Macdonald
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	J. H. Cotterell	Ada C. Hoalger	J. C. Ellis
Address.	Sugerale	Sugerale	Sugerale
Date of Return.	July 15th 1919	July 21st 1919	July 21st 1919

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1919
 Given under my hand this 5th day of April 1919
 Division Registrar of Sugerale W.P. Carmish P.O.

Howard wardle riley, charles wesley riley, margaret elmer ray, william collins, james collins, fannie young, earl john maxwell stephenson, charles mita stephenson, mary esther graydon, mary marsh, tennessee marsh, rose tarmho, arthur robert john springall, arthur john springall, charlotte harris, clifford victor albert barker, albert barker, martha hansler

BIRTHS

County of Jefferson Division of Sturgeon

	Surname First	Surname First	Surname First
Surname of child.	Riley	Stephenson	Springall
Christian name.	Howard Wendle	Earl John	Arthur Robert John
Date of Birth	Dec 9th 1918	Dec 8th 1918	Dec 21st 1918
Where born? Street number or Commission and Lot.	If in a hospital give its name	If in a hospital give its name	If in a hospital give its name
Sex.	Male	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Sturgeon, May 1st 1914	Cantland Jan 10th	England 1910
Full name of Father.	Charles Wesley Riley	Charles Milton Stephenson	Arthur John Springall
Address.	Sturgeon	Sturgeon	Sturgeon
Occupation.	Trades Dealer	Mechanic	Mechanic
Maiden name of Mother.	Margaret Elizabeth White	Margaret Graydon	Charlotte Harris
Is she single or a widow?	-	-	-
Name of Physician in attendance.	Dr. Carnish	Dr. Macdonald	Dr. Coulter
Were you in house at time of Birth?	No	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	C. W. Riley	C. M. Stephenson	Mrs. J. Springall
Address.	Sturgeon	Sturgeon	Sturgeon
Date of Return.	Jan 2nd 1919	Jan 4th 1919	Jan 13th 1919
Surname of child	Collins	Marsh	Barker
Christian name.	William Warren	Mary	Clifford Victor Albert
Date of Birth.	Dec 17th 1918	Jan 17th 1919	Jan 8th 1919
Where born? Street number or Commission and Lot.	If in a hospital give its name	If in a hospital give its name	If in a hospital give its name
Sex.	Male	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Sturgeon June 19th 1902	Audria 1914	Cantland Dec 16th 1910
Full name of Father.	James Collins	Samuel Marsh	Albert O. Barker
Address.	Sturgeon	Sturgeon	Sturgeon
Occupation.	Labourer	Labourer	Mechanic
Maiden name of Mother.	Fannie Young	Rose Lambro	Martha Hannah
Is she single or a widow?	-	-	-
Name of Physician in attendance.	Dr. Carnish	Dr. Coulter	Dr. Coulter
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Mrs. J. Collins	S. Marsh	Albert O. Barker
Address.	Sturgeon	Sturgeon	Sturgeon
Date of Return.	Jan 16th 1919	Jan 20th 1919	Jan 22nd 1919

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1919
 Given under my hand this 5th day of April A.D. 1919
 Division Registrar of Sturgeon P.O.

BIRTHS

Edna pearson, charles pearson, edna parlo, isa bella martin anams, john adams martin, ernest aiderson, joseph aiderson, harriet newsome, russell edwin payne, angela clear, grace edwards, thomas edward edwards, matilda taylor, margie blanch counter, jethro counter, blanch richardson

County of Jefferson

Division of Englewood

	Surname First	Surname First	Surname First
Surname of child.	Beaman	Oldeman	Edwards
Christian name.	Edna	Ernest	Bree
Date of Birth.	Mar 2nd 1919	July 24th 1919	July 20th 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name <u>Englewood</u>	If in a hospital give its name <u>Englewood</u>	If in a hospital give its name <u>Englewood</u>
Sex.	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Englewood, Mar 14th 1912	Sarato, ^{Ind} Feb 14th 1910	Englewood, Oct 16th 1910
Full name of Father.	Charles L. Beaman	Joseph Oldeman	Thomas Edward Edwards
Address.	Englewood	Englewood	Englewood
Occupation.	laborer	laborer	laborer
Maiden name of Mother.	Edna Carter	Harriet Newsome	Matilda M. ^{Taylor} Edwards
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Macdonald	Dr. Cantler	Dr. Cantler
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	Single Born	-	-
Name of Informant.	Chas L. Beaman	Mrs S. Robinson	Mrs Annie B. Taylor
Address.	Englewood	Englewood	Englewood
Date of Return.	Mar 4th 1919	Mar 8th 1919	Mar 5th 1919
Surname of child.	Belamo	Bayne	Cantler
Christian name.	Isa Bella Martin	Russell Edwin	Margaret Blanch
Date of Birth.	July 20th 1919	Mar 10th 1919	July 14th 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name <u>Englewood</u>	If in a hospital give its name <u>Englewood</u>	If in a hospital give its name <u>Englewood</u>
Sex.	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Englewood, Oct 2nd 1914	Englewood, Nov 4th 1911	Englewood 1910
Full name of Father.	John Belamo	Edwin Bayne	Jethro W Cantler
Address.	Englewood	Englewood	Englewood
Occupation.	Stationary Engineer	Machinist	Physician
Maiden name of Mother.	Martina Martin	Angela M. Clear	Blanch Richardson
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Carrish	Dr. Carrish	Dr. Carrish
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	John Belamo	E Bayne	Jethro Cantler
Address.	Englewood	Englewood	Englewood
Date of Return.	Mar 12th 1919	Mar 15th 1919	Mar 19th 1919

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1919
 Given under my hand this 5th day of April A.D. 1919
 Division Registrar of Englewood W. Carrish

BIRTHS

Jean Agnes Vance, David Vance, Rose Desmond, Hugh Herbert Smith, Alfred Charles Smith, Jeana May Keys, Josephine Ruth Taylor, Henry Bruce Taylor, Mary George Terrence, Michael Titus, Charles Leronzie Titus, Mary Jane Kennedy, Alida Louisa Kirkpatrick, James Kirkpatrick, Alida Sites Siles, Charles Frederick Elford, Charles William Elford, Charlotte Garlick

County of Alford Division of Ingersoll

	Surname first.	Surname first.	Surname first.
Surname of child.	Vance	Taylor	Kirkpatrick
Christian name.	Jean Agnes	Josephine Ruth	Alida Louisa
Date of Birth.	Dec 20th 1919	Jan 7th 1919	July 22nd 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Female	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingersoll June 21st 1915	Wetzelin Mar 1st 1911	White Lake Jan 29th 1914
Full name of Father.	David Vance	Henry Bruce Taylor	James Kirkpatrick
Address.	Ingersoll	Wt. Zelgin	Ingersoll
Occupation.	Mechanic	Farmer	Carpenter
Maiden name of Mother.	Rose Desmond	Mary George	Alida Siles
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Carleton	Dr. Macdonald
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Infantant.	David Vance	H. B. Taylor	James Kirkpatrick
Address.	Ingersoll	Wt. Zelgin	Ingersoll
Date of Return.	July 21st 1919	July 21st 1919	July 24th 1919
	Surname first.	Surname first.	Surname first.
Surname of child.	Smith	Siles	Elford
Christian name.	Hugh Herbert	Ermine Michael	Charles Frederick
Date of Birth.	July 1st 1919	July 22nd 1919	July 14th 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Male	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingersoll Oct 23rd 1917	Weslabeen June 15th 1906	Ingersoll June 20th 1906
Full name of Father.	Alfred Charles Smith	Charles Eranzie Siles	Charles William Elford
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Carpenter	Labourer	Baker
Maiden name of Mother.	Jean May Keys	Mary Jane Kennedy	Charlotte D. Garlick
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Carleton	Dr. Carleton	Dr. Carleton
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Infantant.	Jean May Smith	E. W. Siles	E. W. Elford
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	March 1st 1919	Mar 4th 1919	Mar 4th 1919

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1919
 Given under my hand this 5th day of April A.D. 1919
 Registrar of Ingersoll W. Smith

BIRTHS

Geraldine jessie guthrie, james murray guthrie, marian edith folder, daniel pellow, charles joseph pellow, margaret jane stadelbauer, brock laverne horace roy owen, lillian margaret turner, kathleen may hopes, william george hapt, florence maria barrett, muriel jean piper, wray gregg piper, vera may brooks.

County of Offard Division of Suzersale

	SURNAME FIRST	SURNAME FIRST	SURNAME FIRST
Surname of child	<u>Guthrie</u>	<u>Owen</u>	<u>Piper</u>
Christian name	<u>Elizabeth Jane</u>	<u>Brook Laverne</u>	<u>Muriel Jean</u>
Date of Birth	<u>July 25th 1919</u>	<u>July 27th 1919</u>	<u>Mar 14th 1919</u>
Where born? Street number or Con- cession and Loc.	<u>In a hospital give its name</u>	<u>In a hospital give its name</u>	<u>In a hospital give its name</u>
Sex	<u>Female</u>	<u>Male</u>	<u>Female</u>
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Where and when married	<u>Suzersale Dec 31st 1914</u>	<u>Suzersale Dec 7th 1912</u>	<u>Suzersale May 2nd 1918</u>
Full name of Father	<u>James Murray Guthrie</u>	<u>Horace Roy Owen</u>	<u>Wray Gregg Piper</u>
Address	<u>Suzersale</u>	<u>Suzersale</u>	<u>Suzersale</u>
Occupation	<u>Farmer</u>	<u>Farmer</u>	<u>Farmer</u>
Maiden name of Mother	<u>Marian Edith Folder</u>	<u>Lillian Margaret Turner</u>	<u>Vera May Brooks</u>
Is she single or a widow?	<u>-</u>	<u>-</u>	<u>-</u>
Name of Physician in at- tendance	<u>Dr. McDevauld</u>	<u>Dr. Cantler</u>	<u>Dr. Carnish</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Twin, Triple, Illegitimate or Still born	<u>-</u>	<u>-</u>	<u>-</u>
Name of Informant	<u>Mrs J M Guthrie</u>	<u>Mrs H R Owen</u>	<u>Mrs A Keisel</u>
Address	<u>Suzersale</u>	<u>Suzersale</u>	<u>Suzersale</u>
Date of Return	<u>Mar 24th 1919</u>	<u>Mar 25th 1919</u>	<u>Mar 26th 1919</u>
	SURNAME FIRST	SURNAME FIRST	SURNAME FIRST
Surname of child	<u>Pellow</u>	<u>Keapel</u>	
Christian name	<u>William Daniel</u>	<u>Kathleen May</u>	
Date of Birth	<u>May 4th 1919</u>	<u>May 2th 1919</u>	
Where born? Street number or Con- cession and Loc.	<u>In a hospital give its name</u>	<u>In a hospital give its name</u>	<u>In a hospital give its name</u>
Sex	<u>Male</u>	<u>Female</u>	
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	
Where and when married	<u>Suzersale June 4th 1909</u>	<u>England, Aug 27th 1906</u>	
Full name of Father	<u>Charles Joseph Pellow</u>	<u>William George Keapel</u>	
Address	<u>Suzersale</u>	<u>Suzersale</u>	
Occupation	<u>Operator</u>	<u>Blacksmith</u>	
Maiden name of Mother	<u>Margaret Josephine Lehouer</u>	<u>Florence Maria Barrett</u>	
Is she single or a widow?	<u>-</u>	<u>-</u>	
Name of Physician in at- tendance	<u>Dr. Rogers</u>	<u>Dr. Williams</u>	
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	
Twin, Triple, Illegitimate or Still born	<u>-</u>	<u>-</u>	
Name of Informant	<u>C. J. Pellow</u>	<u>W. G. Keapel</u>	
Address	<u>Suzersale</u>	<u>Suzersale</u>	
Date of Return	<u>June 17th 1919</u>	<u>June 17th 1919</u>	

DO NOT WRITE IN THIS SPACE—RESERVED FOR BINDING

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Mar 31st 1919
 Given under my hand this 5th day of April A.D. 1919
 Division Registrar of Suzersale W R Smith P.O.

BIRTHS

william daniel dellow, charles joseph dellow, margaret jane stadelbauer, kate
may hopes, william george hopes, florence maria barrett, margaret lillian stan-
william stanley, minnie reid, eleanor alice elizabeth cornish, charles cornish,
pearl eglestone, gordon haynes, walter haynes, roach, lily jean healy, lawrence
vernet healy, isabella munro

County of Jefferson

Division of Ingersoll

	Surname first.	Surname first.	Surname first.
Surname of child.	Bellaw	Hopes	Haynes
Christian name.	William Daniel	Kathleen May	Lily Jean
Date of Birth	May 17th 1919	May 24th 1919	May 30th 1919
Where born? Street number or Con- cession and Loc.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Male	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Louise June 4th 1909	England. Aug 27th 1906	England Dec 20th 1916
Full name of Father.	Charles Joseph Bellaw	William George Hopes	Walter Haynes
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Operator	Blacksmith	Automobile Driver
Maiden name of Mother.	Margaret Stadelbauer	Jane Maria Barrett	Roach
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Rogers	Dr. Williams	Dr. Carnish
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	C. J. Bellaw	W. G. Hopes	Walter Haynes
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	June 11th 1919	June 11th 1919	June 17th 1919
	Surname first.	Surname first.	Surname first.
Surname of child.	Stanley	Cornish	Lily Healy
Christian name.	Margaret Rebecca	Eleanor Alice Elizabeth	Lily Jean
Date of Birth	June 5th 1919	June 2nd 1919	June 20th 1919
Where born? Street number or Con- cession and Loc.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Female	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Anti Jan 1st 1916	London Jan 5th 1916	London Sept 14th 1915
Full name of Father.	William B. Stanley	Charles C. Cornish	Lawrence Vernet Healy
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Jeweler	Physician	Broker
Maiden name of Mother.	Minnie Reid	Eleanor Pearl Eggleston	Isabella Munro
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Carnish	Dr. Carnish
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	W. B. Stanley	C. C. Cornish	L. V. Healy
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	June 17th 1919	June 19th 1919	June 22nd 1919

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th

Given under my hand this 7th day of July 1919
Divided Registrar of Ingersoll

W. Carnish

BIRTHS

Charles hamilton windsor, alfred lee windsor, cora may wheeler, margaret evelyn chapman, charles tandy chapman, edith winifred culbert, robert leonard johnston, george johnston, edith henderson, reginald lewis butler, irvin butler, edna may harris, henrietta mark, Percy mark, florence hill, margaret Helen hargan, john edgar hargan, annie jones

County of Jefferson

Division of Surgeons

	Surname first.	Surname first.	Surname first.
Surname of child.	Windsor	Johnston	Mark
Christian name.	Charles Arnold Hamilton	Robert Leonard	Henrietta
Date of Birth.	Apr 26th 1919	May 5th 1919	May 10th 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name <u>Engersall</u>	If in a hospital give its name <u>Engersall</u>	If in a hospital give its name <u>Engersall</u>
Sex.	Male	Male	Female
Are the Parents married?	Yes	Yes	No
Where and when married.	Montreal Apr 26th 1912	Engersall 1915	-
Full name of Father.	Alfred Lee Windsor	George Johnston	Percy Mark
Address.	Engersall	Engersall	Engersall
Occupation.	Bank Manager	Seaman	Machinist
Maiden name of Mother.	Cora May Wheeler	Edith Henderson	Florence Hill
Is she single or a widow?	-	-	Single
Name of Physician in at- tendance.	Dr. Carleton	Dr. Carleton	Dr. Carleton
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	Illegitimate
Name of Informant.	John Windsor	Mrs. B. Martin	P. Mark
Address.	Engersall	Engersall	Engersall
Date of Return.	May 29th 1919	May 30th 1919	May 10th 1919
Surname first.	Chapman	Butler	Hargan
Christian name.	Margaret Evelyn	Reginald Lewis	Margaret Helen
Date of Birth.	June 2nd 1919	May 6th 1919	May 15th 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name <u>Engersall</u>	If in a hospital give its name <u>Engersall</u>	If in a hospital give its name <u>Engersall</u>
Sex.	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Sarasota Apr 11th 1906	Engersall June 1st 1915	Engersall Sept 17th 1907
Full name of Father.	Charles Danby Chapman	Irvin Butler	John Edgar Hargan
Address.	Engersall	Engersall	Engersall
Occupation.	Clothes Maker	Winery	Superintendent
Maiden name of Mother.	Edith Winifred Culbert	Cora May Harris	Annie Jones
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Rogers	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	C. S. Chapman	Irvin Butler	John Hargan
Address.	Engersall	Engersall	Engersall
Date of Return.	June 6th 1919	June 6th 1919	June 10th 1919

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending July 30th 1919

Given under my hand this 7th day of July
Division Registrar of Engersall

W. P. Smith

P.O.

BIRTHS

Robert John Calder, Robert James Calder, Nellie Robinson, Robert
Thomas, Roderick McInnann, Elizabeth Kate Wilkinson, Findlay Sinclair,
Ellis McDougall, Marian Sinclair, Thomas Frederick Brooks, Albert W.
Chapman, Charles Alfred Lambert, William Frank Lambert, Rachel Ber
Alice Jones, James Jones, Evelyn Cade

County of Offord

Division of Ingersoll

	Informant's Name	Informant's Name	Informant's Name
Surname of child.	Leader	McDauger	Kamber
Christian name.	Robert John	Findlay Sinclair	Charles Alfred
Date of Birth.	Mar 31st 1919	Mar 24th 1919	Mar 29th 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital, give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Male	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingersoll, Apr 7th 1916	Ingersoll, July 2nd 1917	England, June 25th 1908
Full name of Father.	Robert James Leader	Robert Ellis McDauger	William Frank Kamber
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Labourer	Driver	Farm hand
Maiden name of Mother.	Nellie Robinson	Marian Sinclair	Rachel E. Boone
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Williams	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Mrs. Belam	Ada E. Haldges	Ada E. Haldges
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Apr 10th 1919	Apr 5th 1919	Apr 5th 1919
Surname of child.	McKernan	Brooks	Jones
Christian name.	Robert Wilkinson	Thomas Frederick	Margaret Alice
Date of Birth.	Mar 9th 1919	Mar 31st 1919	Mar 11th 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	London 1908	England 1904	England, Sept 1911
Full name of Father.	Thomas Robert McKernan	Albert William Brooks	James Jones
Address.	Burford	Ingersoll	Ingersoll
Occupation.	Bank Manager	Section Man	Labourer
Maiden name of Mother.	Elizabeth Kate Wilkinson	May Chapman	Evelyn Cade
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Macdonald	Dr. Cairns	Dr. Cairns
Were you in house at time of Birth?	No	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Ed. McKernan	B. Brooks	James Jones
Address.	Burford	Ingersoll	Ingersoll
Date of Return.	Apr 7th 1919	Apr 7th 1919	Apr 14th 1919

DO NOT WRITE IN THIS SPACE

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending
Given under my hand this _____ day of _____ A.D. 19 _____
Division Registrar of

Article B,
All births as births,
and all deaths.

BIRTHS

Dorothy May Jewhurst, David John Jewhurst, Daisy May Todd, Ellis, Amy Hawes, Maxwell David Jewhurst, Ralph Monn Haycock, Charles Howland, Ada Louise Bears, William Thomas Little, Dora Morrow, Maud Catharine Johnson, Edward Johnson, Rose Minard

County of Jefferson

Division of Jagerssee

	Surname first	Surname first	Surname first
Surname of child	Jewhurst	Jewhurst	Little
Christian name	David Barclay May	Maxwell David	William Thomas
Date of Birth	Apr 7th 1919	Apr 7th 1919	Apr 6th 1919
Where born? Street number or Concession and Lot.	Metzger If in a hospital give its name <u>Jagerssee</u>	Metzger If in a hospital give its name <u>Jagerssee</u>	If in a hospital give its name <u>Jagerssee</u>
Sex	Female	Male	Male
Are the Parents married?	Yes	Yes	Yes
When and where married	Jagerssee Dec 6th 1917	Jagerssee Dec 6th 1917	Jagerssee Aug 1st 1917
Full name of Father	David John Jewhurst Jagerssee	David John Jewhurst Jagerssee	William Thomas Little Deceased Jagerssee
Occupation	Bookkeeper	Bookkeeper	Physician
Maiden name of Mother	Daisy May Raddy	Daisy May Raddy	Dora Morrow
Is the single or a widow?	-	-	Widow
Name of Physician in attendance	Dr. Larnick Coultter	Dr. Larnick Coultter	Dr. Zurlong
Were you in house at time of Birth?	No yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born	Single	Single	-
Name of Informant	D. Jewhurst	D. Jewhurst	Ed. Zurlong
Address	Jagerssee	Jagerssee	Jagerssee
Date of Return	Apr 14th 1919	Apr 14th 1919	Apr 21st 1919
	Surname first	Surname first	Surname first
Surname of child	Ellis	Haycock	Johnson
Christian name	Ada Olive	Ralph Marvin	Maud Catharine
Date of Birth	Apr 9th 1919	Apr 10th 1919	Apr 7th 1919
Where born? Street number or Concession and Lot.	Metzger If in a hospital give its name <u>Jagerssee</u>	If in a hospital give its name <u>Jagerssee</u>	If in a hospital give its name <u>Jagerssee</u>
Sex	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
When and where married	England June 26th 1906	Jagerssee Dec 14th 1910	Jagerssee June 22nd 1914
Full name of Father	William Ellis Jagerssee	Charles Edward Haycock	Edward Johnson
Address	Jagerssee	Jagerssee	Jagerssee
Occupation	Teacher	Teacher	Teacher
Maiden name of Mother	Amy Keaves	Ada Louise Bears	Rose Minard
Is the single or a widow?	-	-	-
Name of Physician in attendance	Dr. Larnick	Dr. Williams	Dr. Coultter
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born	-	-	-
Name of Informant	Wm Ellis	C. E. Haycock	Edward Johnson
Address	Jagerssee	Jagerssee	Jagerssee
Date of Return	Apr 21st 1919	Apr 22nd 1919	Apr 23rd 1919

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending
 Given under my hand this _____ day of _____ A. D. 1919
 Division Registrar of _____

DO NOT WRITE IN THIS SPACE—RESERVED FOR BINDING

BIRTHS

Dennis William read, james read, laura tifford, george featherdown smith, id... smith, mabel archer, lelah blakeman, george blakeman, emily gaynor, james h... watkins, murray chariton olmsted, elkaneh lafayette olmsted, marguerite ogier pug... dorothy margaret chadwick, charles chester chadwick, elsie maud millett

Schedule B.
N.B.—Record all still-births as births,
as well as deaths.

County of Offard

Division of Dunstable

	Surname first	Surname first	Surname first
Surname of child.	Read	Blakeman	Olmsted
Christian name.	Dennis William	Leelah	Murray Chariton
Date of Birth.	Apr 19th 1919	Apr 20th 1919	Apr 26th 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name <u>Ingersall</u>	If in a hospital give its name <u>Ingersall</u>	If in a hospital give its name <u>Ingersall</u>
Sex.	Male	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Beachville Apr 12th 1914	Beach Dec 12th 1910	Ingersall Nov 7th 1917
Full name of Father.	James Read	George Blakeman	Elkaneh Lafayette Olmsted
Address.	Beachville	Ingersall	Ingersall
Occupation.	farmer	laborer	Machinist
Maiden name of Mother.	Laura Silford	Emily Gaynor	Marguerite Ogier Dupley
Is the single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Cornish	Dr. Furlong	Dr. Macdonald
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant	Mrs J. Read	Lee Blakeman	E. L. Olmsted
Address.	Beachville	Ingersall	Ingersall
Date of Return.	Apr 29th 1919	May 2nd 1919	May 2nd 1919
	Surname first	Surname first	Surname first
Surname of child.	Smith	Hudson	Charleston
Christian name.	George Featherdown	Baby	Dorothy Margaret
Date of Birth.	Apr 2nd 1919	May 4th 1919	May 6th 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name <u>Ingersall</u>	If in a hospital give its name <u>Ingersall</u>	If in a hospital give its name <u>Ingersall</u>
Sex.	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Belham July 9th 1914	England May 3rd 1903	London Jan 2nd 1910
Full name of Father.	Lloyd Featherdown Smith	James Hudson	Charles Chester Charleston
Address.	Ingersall	Ingersall	Ingersall
Occupation.	Machinist	laborer	laborer
Maiden name of Mother.	Mabel Archer	Laura Watkins	Elsie Maud Millett
Is the single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Cornish	Dr. Cornish	Dr. Cornish
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant	Mrs L. J. Smith	J. Hudson	E. L. Charleston
Address.	Ingersall	Ingersall	Ingersall
Date of Return.	May 2nd 1919	May 5th 1919	May 9th 1919

DO NOT WRITE IN THIS SPACE—RESERVED FOR BINDING

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending
Given under my hand this _____ day of _____
Division Registrar

A.D. 19

19

P.O.

George franklin hall, frank hall, sarah hall, sarah lloyd nancekivell, william nancekivell, irene jenvey, marjory irene crane, william crane, olive irene hudson aline douglas haig hammond, george harrison hammond, nellie hoy, charles william nash, newton nash, maggie mae cowell, ewart marley wilson, william ewart gladstone-wilson, ada irene morley.

Schedule B.
M.B. - Record all births as births,
as well as deaths.

BIRTHS

County of

Division of

	Surname first.	Surname first.	Surname first.
Surname of child.	Hall	Crane	Nash
Christian name.	George Franklin	Marjory Irene	Charles William
Date of Birth.	Mar 27th 1919	Apr 24th 1919	Apr 27th 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name	If in a hospital give its name	If in a hospital give its name
Sex.	Male	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Bungesslee Sept 1915	Bungesslee July 2nd 1916	London July 2nd
Full name of Father.	Frank Hall	William Crane	Newton Nash
Address.	Bungesslee	Bungesslee	Salford R.R. 1
Occupation.	Labourer	Labourer	Maggie Mac Cowell +
Maiden name of Mother.	Sarah Judd	Olive Irene Hudson	Farmer +
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Carrish	Dr. Carrish	Dr. Carrish
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Miss G. G. Haldy	Wm Crane	Newton Nash
Address.	Bungesslee	Bungesslee	Salford R.R. 1
Date of Return.	May 9th 1919	May 12th 1919	May 12th 1919
Surname of child.	Nancekivell	Hammond	Wilson
Christian name.	Charles Lloyd	Douglas Haig	Ewart Marley
Date of Birth.	Apr 2nd 1919	May 11th 1919	May 8th 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name	If in a hospital give its name	If in a hospital give its name
Sex.	Male	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	West April Mar 15th 1903	England Aug 1903	Bungesslee Sept 2nd 1914
Full name of Father.	William W Nancekivell	George Harrison Hammond	William Ewart Gladstone Wilson
Address.	Bungesslee	Bungesslee	Bungesslee
Occupation.	Farmer	Fireman	Electrician
Maiden name of Mother.	Irene Jenvey	Nellie Haig	Olive Irene Marley
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr Macdonald	Dr Macdonald	Dr. Carrish
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Ada G. Haldy	W. S. Hammond	W. S. Wilson
Address.	Bungesslee	Bungesslee	Bungesslee
Date of Return.	May 13th 1919	May 16th 1919	May 17th 1919

DO NOT WRITE IN THIS SPACE - RESERVED FOR BINDING

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending
Given under my hand this _____ day of _____ A.D. 19__

BIRTHS

Ina gwendolen pyatt, samuel adolphus pyatt, mary jane hill, isabella hill,
john james brown, margaret fair seviney swiney

County of Offawa

Division of Ingersoll

	Surname first	Surname first	Surname first
Surname of child.	<u>Byatt</u>	<u>Brown</u>	
Christian name.	<u>Ina Gwendolen</u>	<u>Isabella</u>	
Date of Birth.	<u>May 24th 1919</u>	<u>May 27th 1919</u>	
Where born? Street number or Con- cession and Lot.	<u>If in a hospital give its name Ingersoll</u>	<u>If in a hospital give its name Ingersoll</u>	<u>If in a hospital give its name.</u>
Sex.	<u>female</u>	<u>female</u>	
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	
Where and when married.	<u>Ingersoll, Nov 24th 1911</u>	<u>Leicester, 1909</u>	
Full name of Father.	<u>Samuel Adolphus Byatt</u>	<u>John James Brown</u>	
Address.	<u>Ingersoll</u>	<u>Ingersoll</u>	
Occupation.	<u>Machinist</u>	<u>Machinist</u>	
Maiden name of Mother.	<u>Mary Jane Hill</u>	<u>Margaret Fair Swiney</u>	
Is she single or a widow?	<u>-</u>	<u>-</u>	
Name of Physician in at- tendance.	<u>Dr. Williams</u>	<u>Dr. Furlong</u>	
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	
Twin, Triplet, Illegitimate or Still-born.	<u>-</u>	<u>-</u>	
Name of Informant.	<u>S. Byatt</u>	<u>Margaret Brown</u>	
Address.	<u>Ingersoll</u>	<u>Ingersoll</u>	
Date of Return.	<u>June 24th 1919</u>	<u>June 25th 1919</u>	
Surname of child.			
Christian name.			
Date of Birth.			
Where born? Street number or Con- cession and Lot.	<u>If in a hospital give its name.</u>	<u>If in a hospital give its name.</u>	<u>If in a hospital give its name.</u>
Sex.			
Are the Parents married?			
Where and when married.			
Full name of Father.			
Address.			
Occupation.			
Maiden name of Mother.			
Is she single or a widow?			
Name of Physician in at- tendance.			
Were you in house at time of Birth?			
Twin, Triplet, Illegitimate or Still-born.			
Name of Informant.			
Address.			
Date of Return.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending June 30th 1919

Given under my hand this 7th day of July

Division Registrar of Ingersoll

P.O.

DO NOT WRITE IN THIS SPACE—RESERVED FOR OTHER USES

BIRTHS

George fred mclelland, william mclelland, maude helen crane, herbert crane, florence truman, leo benedict mcmillan, benjamin alexander mcmillan, mary h. william burke turner, william turner, jessie mckenzie, howard rayner camm, george camm, minnie postlethwaite, leota margaret adam, edgar ivan adam, martha freelane humtrey

County of Offard Division of Ingersoll

	Surname first.	Surname first.	Surname first.
Surname of child.	McMelland	McMillan	Camm
Christian name.	George Fred	Leo Benedict	Howard Rayner
Date of Birth.	July 30th 1919	July 11th 1919	July 25th 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Male	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	East Offard June 24th 1912	Ingersoll Oct 19th 1899	Saranta July 12th 1913
Full name of Father.	William H McMelland	Benjamin Alexander McMillan	George Camm
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	farmer	Butcher	farmer
Maiden name of Mother.	Maudie Rule	Mary Baird	Minnie Postlethwaite
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Macdonald	Dr. Furlong	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	W H McMelland	B A McMillan	George Camm
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Aug 11th 1919	Aug 12th 1919	Aug 15th 1919
	Surname first.	Surname first.	Surname first.
Surname of child.	Crane	Turner	Adam
Christian name.	Margaret Helen	William Burke	Leola Margaret
Date of Birth.	July 29th 1919	Aug 5th 1919	July 23rd 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Colladen Jan 25th 1900	Ingersoll, Feb 24th 1917	Ingersoll, Mar 20th 1916
Full name of Father.	Herbert Crane	William Turner	Edgar Ivan Adam
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	farmer	farmer	farmer
Maiden name of Mother.	Florence M Turner	Jessie McKenzie	Martha Frelane Humtrey
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Macdonald	Dr. Cameron	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	E. Forbes, Nurse	W Turner	Mrs E S Adam
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Aug 19th 1919	Aug 19th 1919	Aug 21st 1919

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1919
 Given under my hand this 10th day of October A.D. 1919
 Division Registrar Ingersoll

Jean isabell ranger, leo john ranger, merian pearl wilshire, william smith clark, josephine victoria smith, john gordon mckay, james robert mckay, marion mckay, mildred irene mcgibbon, bernard mcgibbon, lilly thomas, laura elizabeth smith, william arthur smith, elizabeth jeffrey, catharine harriet powell, joseph edward powell, alice cooper

BIRTHS

Schedule B.
 - Record all still-births as births, as well as deaths.

County of _____

Division of _____

	Surname First.	Surname First.	Surname First.
Surname of child.	Ranger	Mckay	Smith
Christian name.	Jean Isabell	John Gordon	Laura Elizabeth
Date of Birth.	Aug 1st 1919	July 31st 1919	July 30th 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Orinceton Apr 2nd 1915	Ingersoll, June 1st 1913	Ingersoll, Dec 2nd 1917
Full name of Father.	Leo John Ranger	James Robert Mckay	William Arthur Smith
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Expressman	Box Maker	Bicycle Repairer
Maiden name of Mother.	Merian Beardsley Wilshire	Marion Mckay	Elizabeth Jeffrey
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Carnish	Dr. Coulter	Dr. Coulter
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	L. J. Ranger	Mrs John Bruce	W. A. Smith
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Aug 2nd 1919	Aug 25th 1919	Aug 26th 1919
	Surname First.	Surname First.	Surname First.
Surname of child.	Clark	McGibbon	Causee
Christian name.	William Smith	Mildred Irene	Catharine Harriet
Date of Birth.	July 2nd 1919	Aug 22nd 1919	Aug 21st 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Male	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	W. Belgin May 1st 1917	Ingersoll Sept 21st 1915	England Aug 7th 1908
Full name of Father.	Hezekiah H. Clark	Bernard J. McGibbon	Joseph Edward Causee
Address.	W. Belgin	Ingersoll	Ingersoll
Occupation.	Farmer	Labourer	Mechanic
Maiden name of Mother.	Joséphine Victoria Smith	Lilly Thomas	Alice Casper
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Rogers	Dr. Coulter	Dr. Coulter
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Hezekiah H. Clark	B. J. McGibbon	J. E. Causee
Address.	W. Belgin	Ingersoll	Ingersoll
Date of Return.	Aug 29th 1919	Sept 2nd 1919	Sept 2nd 1919

I hereby certify the foregoing to be the true and correct entries of all Births and to me for the quarter year ending Sept 30th 1919
 Given under my hand this 10th day of October A.D. 1919
 Division Registrar of Ingersoll

BIRTHS

Lillian elizabeth beene, william beene, william jones, marquette m...
 william bolton douglas, mary kathleen renning, john william scott, william...
 jane cavy cany cavy, max edward jenvey hale, edward leslie hale, ...
 helen louise memmet, lawrence andrew memmet, mabel agnes gra...
 harry kenneth lake, eva english

County of Alford

Division of Ingersoll

	Surname first	Surname first	Surname first
Surname of child.	Beene	Scott	Memmet
Christian name.	Lillian Elizabeth	John William	Helen Louise
Date of Birth.	July 19th 1919	July 11th 1919	July 7th 1919
Where born / Street number or Concession and Lot.	Ingersoll If in a hospital give its name	Ingersoll If in a hospital give its name	Ingersoll If in a hospital give its name
Sex.	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Sarant's July 30th 1918	Ingersoll July 9th 1917	Detroit Aug 21st 1914
Full name of Father.	William Beene	William James Scott	Lawrence Andrew Memmet
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Mechanic	Mechanic	Mechanic
Maiden name of Mother.	Alice Jones	Edith Jane Cady	Mabel Agnes Kraiser
Is she single or a widow?	-	-	-
Name of Physician in attendance.	Dr. Canine	Dr. Furlong	Dr. Macdonald
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Wm Beene	W J Scott	Mrs L. A. Memmet
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	July 24th 1919	July 28th 1919	July 26th 1919
Surname of child.	Douglas	Haley	Lake
Christian name.	Marguerite May	Max Edward Jenvey	Divian Lois
Date of Birth.	July 21st 1919	July 7th 1919	July 12th 1919
Where born / Street number or Concession and Lot.	Ingersoll If in a hospital give its name	Ingersoll If in a hospital give its name	Ingersoll If in a hospital give its name
Sex.	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Woodlawn Aug 11th 1915	Edward Leslie Haley & ...	Detroit Sept 26th 1918
Full name of Father.	William Allen Douglas	Ingersoll Sept 29th 1917	Harry Bennett Lake
Address.	Ingersoll	Ingersoll	Detroit, Mich
Occupation.	Salesman	Business College Teacher	Baker
Maiden name of Mother.	Mary Kathleen Renning	Myrtle Viola Jenvey	Eva English
Is she single or a widow?	-	-	-
Name of Physician in attendance.	Dr. Canine	Dr. Rogers	Dr. Canine
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	Wm B Douglas	E. H. Haley	Mrs H K Lake
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Aug 1st 1919	Aug 7th 1919	Aug 11th 1919

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1919

Given under my hand this 10th day of October A. D. 1919

Division Registrar of Ingersoll

W. A. Smith

P.O.

BIRTHS

Francis Joseph Tickner, Walter Thomas Tickner, harriet agnes johnson, Hugh van der young, James young, Elizabeth mcgregor, dorothy maie naylor, George naylor, Mary nettie olmstead, marion glady's may cox, William emuel cox, marian emily wilbur, Margaret ella beatty, William walter beatty, Margaret jane cross, Ross frederick craig, Frederick George craig, Tena Dennis

County of Jefferson

Division of Singeress

	SURNAME FIRST	SURNAME FIRST	SURNAME FIRST
Name of child.	Tickner	Naylor	Beatty
Christian name.	Francis Joseph	Dorothy Maie	Margaret Ella
Date of Birth.	June 29th 1919	June 10th 1919	June 17th 1919
Where born? Street number or Cor. section and Lot.	<u>Singeress</u> If in a hospital give its name.	<u>Singeress</u> If in a hospital give its name.	<u>Singeress</u> If in a hospital give its name.
Sex.	Male	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	<u>Singeress</u> June 28th 1916	At Shannon, Del. 16th 1907	<u>Singeress</u> . Dec 12th 1912
Full name of Father.	Walter Thomas Tickner	George Naylor	William Walter Beatty
Address.	<u>Singeress</u>	<u>Singeress</u>	<u>Singeress</u>
Occupation.	laborer	Merchant	Mechanic
Maiden name of Mother.	Marion Agnes Johnson	Mary Nettie Olmstead	Margaret Jane Cross
Is she single or a widow?	-	-	-
Name of Physician in attendance.	Dr. Macdonald	Dr. Carnish	Dr. Gurlong
Were you in house at time of Birth?	No	Yes	Yes
Twin, Triplet, Illegitimate or Still born.	-	-	-
Name of Informant.	W. J. Tickner	Geo. Naylor	W. W. Beatty
Address.	<u>Singeress</u>	<u>Singeress</u>	<u>Singeress</u>
Date of Return.	July 10th 1919	July 16th 1919	July 12th 1919
	SURNAME FIRST	SURNAME FIRST	SURNAME FIRST
Surname of child.	Young	Cox	Craig
Christian name.	Hugh Wallace	Marion Gladys May	Ross Frederick
Date of Birth.	July 2nd 1919	June 20th 1919	June 22nd 1919
Where born? Street number or Cor. section and Lot.	<u>Singeress</u> If in a hospital give its name.	<u>Singeress</u> If in a hospital give its name.	<u>Singeress</u> If in a hospital give its name.
Sex.	Male	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	<u>Singeress</u> . Jan 1st 1914	Beamanville July 10th 1915	<u>Singeress</u> 1905.
Full name of Father.	James B. Young	William Russell Cox	Frederick George Craig
Address.	Thomasford	<u>Singeress</u>	<u>Singeress</u>
Occupation.	Farmer	Carpenter	Engineer
Maiden name of Mother.	Elizabeth Breger	Marion Emily Wilbur	Tena Dennis
Is she single or a widow?	-	-	-
Name of Physician in attendance.	Dr. Klein	Dr. Carnish	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still born.	-	-	-
Name of Informant.	Edw. B. Bridges	W. B. Cox	Mrs. J. S. Craig
Address.	<u>Singeress</u>	<u>Singeress</u>	<u>Singeress</u>
Date of Return.	July 11th 1919	July 17th 1919	July 21st 1919

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Sept 30th 1919
 Given under my hand this 10th day of October A.D. 1919
 District Registrar of Singeress

Kenneth raymond hewitt, robert henry hewitt, jessie mabel young, eva margaret johnston, gilbert barry johnston, jean mcleod, mary margaret little, john little, marion kirkpatrick

BIRTHS

Schedule B.
N.B.—Record all stillbirths as births,
as well as deaths.

County of Jefferson Division of Engersall

	Surname First	Surname First	Surname First
Surname of child.	Hewitt	Johnston	Little
Christian name.	Kenneth Raymond	Eva Margaret	Mary Margaret Little
Date of Birth.	Aug 21st 1919	May 25th 1919	Sept 11th 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name. Engersall	If in a hospital give its name. Engersall	If in a hospital give its name. Engersall
Sex.	Male	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Celina Feb 22nd 1914	Sakville July 2nd 1913	Saranta Apr 20th 1913
Full name of Father.	Robert Henry Hewitt	Gilbert Barry Johnston	John J. Little
Address.	Engersall	Engersall	Engersall
Occupation.	Blacksmith	Bookkeeper	Woodworker
Maiden name of Mother.	Jessie Mabel Young	Jean Mcleod	Marion Kirkpatrick
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr Rogers	Dr Rogers	Dr Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	-	-
Name of Informant.	R H Hewitt	G B Johnston	J J Little
Address.	Engersall	Engersall	Engersall
Date of Return.	Sept 15th 1919	Sept 15th 1919	Sept 29th 1919
Surname of child.			
Christian name.			
Date of Birth.			
Where born? Street number or Con- cession and Lot.	If in a hospital give its name.	If in a hospital give its name.	If in a hospital give its name.
Sex.			
Are the Parents married?			
Where and when married.			
Full name of Father.			
Address.			
Occupation.			
Maiden name of Mother.			
Is she single or a widow?			
Name of Physician in at- tendance.			
Were you in house at time of Birth?			
Twin, Triplet, Illegitimate or Still-born.			
Name of Informant.			
Address.			
Date of Return.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending
 Given under my hand this 10th day of October A.D. 1919
 Division Registrar of Engersall Sept 30th 1919

BIRTHS

Clara isabell oliari, benjamin joseph oliari, stella munro, john henry aldridge,
 peter oldridge, emily richens, florence irene uncer, frank uncer, beatrice kellowan,
 aldridge, norma margaret macbeth, thomas albert macbeth, maggie corless, jean
 danford, charles danford, annie ireland.

County of Offenau Division of Ingersoll

	Surname first	Surname first	Surname first
Surname of child.	Oliari	Unce	McBert
Christian name.	Clara Isabell	Florence Irene	Norma Margaret
Date of Birth.	Oct 5th 1919	Oct 11th 1919	Oct 11th 1919
Where born? Street number or Con- cession and Lot.	Kerrin If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Female	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Wheatlan Aug 7th 1918	Ingersoll 1916	Springfield Dec 20th 1911
Full name of Father.	Benjamin Joseph Oliari	Frank Unce	Thomas Albert McBert
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Labourer	Steamer	Mill Driver
Maiden name of Mother.	Stella Maude Munro	Beatrice Kellaway	Maggie Corless
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Dunlop	Dr. Coulter	Dr. Carrish
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still born.	-	-	-
Name of Informant.	Mrs Geo. Sanderson	Mrs J. Unce	Mrs J. L. McBert
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Nov 3rd 1919	Nov 3rd 1919	Nov 5th 1919
Surname of child	Oldridge	Oldridge	Danford
Christian name.	John Henry	Clara	Jean Elizabeth
Date of Birth.	Nov 9th 1919	Nov 9th 1919	Oct 26th 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll	If in a hospital give its name Ingersoll
Sex.	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingersoll, July 24th 1918	Ingersoll, July 24th 1918	Ingersoll 1911
Full name of Father.	Charles Peter Oldridge	Charles Peter Oldridge	Charles S. Danford
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Farmer	Farmer	Carpenter
Maiden name of Mother.	Emily Richens Oldridge	Emily Richens	Annie Ireland
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Coulter	Dr. Coulter	Dr. Macdonald
Were you in house at time of Birth?	No	No	Yes
Twin, Triplet, Illegitimate or Still born.	Swim, Still Born	Swim, Still Born	-
Name of Informant.	John W. Keeler	John W. Keeler	C. S. Danford
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Nov 10th 1919	Nov 10th 1919	Nov 10th 1919

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1919
 Given under my hand this 7th day of Jan'y A.D. 1920

Division Registrar of Ingersoll

Georgina gertrude fisher, george wellington fisher, annie elizabeth morley manley, william melville roche, melville john roche, elsie alice foyle, ulah jean lampkin, walker amos lampkin, ethel maude russell, olive mary cook, william cook, olive dark aine, earnest stacey, frank stacey, elizabeth snipes, blanche shirley brown, james mery brown, blanche dundas fraser

BIRTHS

Schedule B.
N. B.—Record all still-births or births, as well as deaths.

County of Windsor Division of Ingersoll

	Surname first	Surname first	Surname first
Surname of child	Fisher	Lampkin	Stacey
Christian name	Beatrice Gertrude	Ulah Jean	Earnest
Date of Birth	Oct 16th 1919	Oct 14th 1919	Nov 5th 1919
Where born? Street number or Concession and Lot	In a hospital give its name Ingersoll	In a hospital give its name Ingersoll	In a hospital give its name Ingersoll
Sex	Female	Female	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married	Ingersoll May 16th 1906	Windsor 1904	Brantford 1903
Full name of Father	George Wellington Fisher	Walker Amos Lampkin	Frank Stacey
Address	Ingersoll	Ingersoll	Ingersoll
Occupation	Machinist	Machinist	Labourer
Maiden name of Mother	Annie Elizabeth Morley	Ethel Maude Roscoe	Elizabeth Snipes
Is she single or a widow?	-	-	-
Name of Physician in attendance	Dr. Williams	Dr. Rogers	Dr. Furlong
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still born	-	-	-
Name of Informant	Mrs. G. B. Fisher	Mrs. W. A. Lampkin	Frank Stanley
Address	Ingersoll	Ingersoll	Ingersoll
Date of Return	Nov 10th 1919	Nov 10th 1919	Nov 13th 1919
	Surname first	Surname first	Surname first
Surname of child	Roehe	Cook	Brown
Christian name	William Melville	Olive Mary	Blanche Shirley
Date of Birth	Oct 28th 1919	Nov 21st 1919	Dec 4th 1919
Where born? Street number or Concession and Lot	In a hospital give its name	In a hospital give its name Ingersoll	In a hospital give its name Ingersoll
Sex	Male	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married	Colburg Dec 25th 1915	Windsor July 12th 1916	Windsor Dec 11th 1908
Full name of Father	Melville John Roehe	William Cook	James McKay Brown
Address	Ingersoll	Beechville	Ingersoll
Occupation	Farmer	Labourer	Machinist
Maiden name of Mother	Elsie Alice Foyle	Olive Dark	Blanche Dundas Fraser
Is she single or a widow?	-	-	-
Name of Physician in attendance	Dr. Carrish	Dr. Steiner	Dr. Carrish
Were you in house at time of Birth?	Yes	No	Yes
Twin, Triplet, Illegitimate or Still born	-	-	-
Name of Informant	M. J. Roehe	Wm Cook	Fred W. Keeler
Address	Ingersoll	Ingersoll	Ingersoll
Date of Return	Nov 17th 1919	Dec 4th 1919	Dec 4th 1919

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending
 Given under my hand this 7th day of July
 Division Registrar of Ingersoll

Dec 31st 1919
 A. D. 1920

Walter ralph webb, walter robert webb, charlotte frence rouse, grace cecil siver, vera gernardt, henry george smith, samuel james smith, eliza william james kerr, eleanor marshall, charles edward wheeler, harry cecil bowman, florence lorane eidt, charles adam eidt, almina maffler maffler

BIRTHS

Schedule B.
H. B. - Record all still-births as births, as well as deaths.

County of Jefferson Division of Ingersoll

	Surname first.	Surname first.	Surname first.
Surname of child.	Webb	Smith	Wheeler
Christian name	Walter Ralph	Henry George	Charles Edward
Date of Birth.	Sept 17th 1919	Oct 1st 1919	Oct 11th 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name	If in a hospital give its name	If in a hospital give its name
Sex.	Male	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingersoll Dec 5th 1903	England 1908	Berchempt. Mar 10th 1918
Full name of Father.	Walter Ralph Webb	Samuel James Smith	Henry Carl Wheeler
Address.	Ingersoll	Ingersoll	7th Elgin
Occupation.	Farmer	Farmer	Farmer
Maiden name of Mother.	Charlotte Florence Rouse	Elizabeth Stephens	Ruby Bauerman
Is she single or a widow?	-	-	-
Name of Physician in at- tendance	Dr. Williams	Dr. Williams	Dr. Corbett
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still born	-	-	-
Name of Informant.	W. Webb	S. J. Smith	G. Fisher, Nurse
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Oct 11th 1919	Oct 21st 1919	Oct 22nd 1919
	SURNAME FIRST.	SURNAME FIRST.	SURNAME FIRST.
Surname of child.	Sivyer	Kerr	Eidt
Christian name.	Grace Bernice	Baby	James Bernice
Date of Birth.	Oct 11th 1919	Oct 26th 1919	Oct 24th 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name	If in a hospital give its name	If in a hospital give its name
Sex.	Female	Male	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Ingersoll Oct 1st 1918	Wheatland, Mar 11th 1914	Wheatland, Apr 24th 1908
Full name of Father.	Harold Carl Sivyer	William James Kerr	Charles Adam Eidt
Address.	Ingersoll	Ingersoll	Ingersoll
Occupation.	Machinist	Merchant	Miller
Maiden name of Mother.	Mrs. S. B. Berhardt	Eleanor Marshale	Almina Maffler
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Macdonald	Dr. Rogers
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still-born.	-	Still Born	-
Name of Informant.	Harold C. Sivyer	Ada S. Kealy, Nurse	C. A. Eidt
Address.	Ingersoll	Ingersoll	Ingersoll
Date of Return.	Oct 27/19	Oct 28th 1919	Oct 30th 1919

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1919
 Given under my hand this 7th day of January A. D. 1920
 Division Registrar of Ingersoll P.O.

BIRTHS

Thomas lero mayberry, charles lero mayberry, cora ethel kerr, Percy allen deatman,
ettie marie timpany, roy stewart newell, george leslie newell, flossie may johnson,
ronald boyd mckay, herbert boyd mckay, valeria maude uren, mary frances mckin,
allen emerson mckin, elizabeth margaret reid, robert philpot swallow, herbert swahow,
mary suttcliffe

County of Jefferson Division of Singersville

	Surname first	Surname first	Surname first
Surname of child.	Mayberry	Newell	Mckin
Christian name.	Thomas Herby	Roy Stewart	Mary Frances
Date of Birth.	Sept 2nd 1919	Sept 4th 1919	Sept 27th 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Singersville	If in a hospital give its name Singersville	If in a hospital give its name Singersville
Sex.	Male	Male	Female
Are the Parents married?	Yes	Yes	Yes
When and when married.	Singersville Oct 20th 1911	Cheney June 20th 1911	Singersville June 9th 1918
Full name of Father.	Charles Herby Mayberry	Henry Leslie Newell	Allen Emerson McKin
Address.	Singersville	Singersville	Walla Walla
Occupation.	Telephone Mag	Ry Employee	Druggist
Maiden name of Mother.	Ethel Kerr	Gessie May Johnson	Elizabeth Margaret Reid
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Macdonald	Dr. Williams
Were you in house at time of Birth?	No	Yes	Yes
Twin, Triplet, Illegitimate or Still born.	-	-	-
Name of Informant	L. H. Mayberry	H. H. Newell	L. J. Farber, Nurse
Address.	Singersville	Singersville	Singersville
Date of Return.	Oct 1st 1919	Oct 2nd 1919	Oct 1st 1919
	Surname first	Surname first	Surname first
Surname of child.	Deamude	Mckay	Swallow
Christian name.	Baby	Ronald Royal	Robert Philpot
Date of Birth.	Oct 8th 1919	Sept 14th 1919	Oct 8th 1919
Where born? Street number or Con- cession and Lot.	If in a hospital give its name Singersville	If in a hospital give its name Singersville	If in a hospital give its name Singersville
Sex.	Female	Male	Male
Are the Parents married?	Yes	Yes	Yes
When and when married.	Cheney Dec 14th 1918	West Oxford June 19th 1918	United States Oct 14th 1907
Full name of Father.	Bery Allen Deamude	Herbert Royal McKay	Herbert Swallow
Address.	Singersville	Singersville	Singersville
Occupation.	Chauffeur	Dentist	Manager of Life Works
Maiden name of Mother.	Ettie Marie Simpang	Valeria Maude Uren	Mary A. Suttcliffe
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Crompton	Dr. Stevens	Dr. Crompton
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still born.	Still Born	-	-
Name of Informant.	B. A. Deamude	H. B. McKay	Herbert Swallow
Address.	Singersville	Singersville	Singersville
Date of Return.	Oct 9th 1919	Oct 14th 1919	Oct 15th 1919

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1919
Given under my hand this 7th day of January A.D. 1920
Division Registrar of Singersville

BIRTHS

Mary barbara hogan, thomas joseph hogan, barbara ernest, ruth ada burrough, burrough, mabel tomalin, john william peach, george thomas peach, della titus, blanch ilene crank, earl emmerson crank, ester annie edwards, peter james mfred mcsherry, mary jane burns, mary bryant, james bryant, alma garlick

County of Jefferson Division of Superior

	Surname Best	Surname Best	Surname Best
Surname of child.	Hogan	Beach	McSherry
Christian name	Mary Barbara	John William	Peter James
Date of Birth	Nov 25th 1919	Nov 23rd 1919	Nov 19th 1919
Where born? Street number or Con- cession and Lot.	Superior If in a hospital give its name	Superior If in a hospital give its name	Superior If in a hospital give its name
Sex	Female	Male	Male
Are the Parents married?	Yes	Yes	Yes
Where and when married.	Woodstock August 1910	Woodstock, July 1st 1913	Superior Sept 4th 1904
Full name of Father.	Thomas Joseph Hogan	George Thomas Beach	Waino Fred McSherry
Address.	Superior	Superior	Superior
Occupation	Mechanic	Painter	Driver
Maiden name of Mother	Barbara Ernest	Della F. Litina	Mary Jane Burns
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Furlong	Dr. Macdonald	Dr. Williams
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still born	-	-	-
Name of Informant.	J. J. Hogan	Mrs. S. J. Beach	J. J. McSherry
Address.	Superior	Superior	Superior
Date of Return.	Dec 13th 1919	Dec 15th 1919	Dec 16th 1919
	Surname Best	Surname Best	Surname Best
Surname of child	Burrough	Crank	Bryant
Christian name	Ruth Ada	Aline Blanch Seane	Mary
Date of Birth	Dec 9th 1919	Dec 7th 1919	Dec 26th 1919
Where born? Street number or Con- cession and Lot.	Superior If in a hospital give its name	Superior If in a hospital give its name	Superior If in a hospital give its name
Sex	Female	Female	Female
Are the Parents married?	Yes	Yes	Yes
Where and when married.	England, June 23rd 1919	Earl Emmerson Crank & Superior Oct 7th 1917	Superior
Full name of Father.	Cory Burrough	Superior & James Bryant	Superior
Address.	Superior	Superior	Superior
Occupation	Driver	Carpenter	laborer
Maiden name of Mother.	Mabel Tomalin	Ester Annie Edwards	Alma Garlick
Is she single or a widow?	-	-	-
Name of Physician in at- tendance.	Dr. Williams	Dr. Carver	Dr. Carrick
Were you in house at time of Birth?	Yes	Yes	Yes
Twin, Triplet, Illegitimate or Still born	-	-	-
Name of Informant	Cory Burrough	E. E. Crank	James Bryant
Address.	Superior	Superior	Superior
Date of Return.	Dec 22nd 1919	Dec 26th 1919	Dec 27th 1919

I hereby certify the foregoing to be the true and correct entries of all births returned to me for the quarter year ending Dec 31st 1919
 Given under my hand this 7th day of Jan'y A.D. 1920
 Division Registrar of Superior P.O.

John burton gayfer, john ernest bayfer, eva mildred sudworth, marjorie leona moore, frederick james moore, effie pernellia carnevale, raymond arthur gardner, francis gardner, mabel harriet harlow, lily irene fordham, george thomas fordham, elizabeth mary springall, malcolm hetherington, william john hetherington, laura baird

Schedule B.
Record all still-births as births, as well as deaths.

BIRTHS

County of Jefferson Division of Ingersoll

	Surname first	Surname first	Surname first
Name of child.	<u>John Burton</u>	<u>Gardner</u>	<u>Hetherington</u>
Christian name.	<u>John</u>	<u>Raymond Arthur</u>	<u>Malcolm</u>
Date of Birth.	<u>Dec 9th 1919</u>	<u>Dec 14th 1919</u>	<u>Nov 24th 1919</u>
Where born? Street number or Concession and Lot.	<u>540rd St Ingusoll</u> <small>If in a hospital give its name.</small>	<u>Ingersoll</u> <small>If in a hospital give its name.</small>	<u>Ingersoll</u> <small>If in a hospital give its name.</small>
Sex.	<u>Male</u>	<u>Male</u>	<u>Male</u>
Are the Parents married?	<u>Married</u>	<u>Yes</u>	<u>Yes</u>
Where and when married.	<u>Ingusoll June 22/1900</u>	<u>Strathroy July 4th 1919</u>	<u>Not given</u>
Full name of Father.	<u>John Ernest Gayfer</u>	<u>Francis Gardner</u>	<u>William John Hetherington</u>
Address.	<u>Ingusoll</u>	<u>Ingersoll</u>	<u>Embers</u>
Occupation.	<u>Druggist</u>	<u>Labourer</u>	<u>Banker</u>
Maiden name of Mother.	<u>Eva Mildred ^{Ingersoll} Gayfer</u>	<u>Mabel Harriet Harlow</u>	<u>Laura Baird</u>
Is she single or a widow?	<u>-</u>	<u>-</u>	<u>-</u>
Name of Physician in attendance.	<u>D J M Rogers</u>	<u>Dr Coulter</u>	<u>Dr Green</u>
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Twin, Triplet, Illegitimate or Still-born.	<u>-</u>	<u>-</u>	<u>-</u>
Name of Informant.	<u>J E Gayfer</u>	<u>Dr. Fisher (Nurse)</u>	<u>Mrs W J Hetherington</u>
Address.	<u>Ingusoll</u>	<u>Ingersoll</u>	<u>Embers</u>
Date of Return.	<u>Dec 30/19</u>	<u>Dec 30th 1919</u>	<u>Dec 30th 1919</u>
	Surname first	Surname first	Surname first
Surname of child.	<u>Maare</u>	<u>Fordham</u>	
Christian name.	<u>Margaret Leana</u>	<u>Lily Irene</u>	
Date of Birth.	<u>Dec 1st 1919</u>	<u>Dec 2nd 1919</u>	
Where born? Street number or Concession and Lot.	<u>Ingersoll</u> <small>If in a hospital give its name.</small>	<u>Ingersoll</u> <small>If in a hospital give its name.</small>	<u>Ingersoll</u> <small>If in a hospital give its name.</small>
Sex.	<u>Female</u>	<u>Female</u>	
Are the Parents married?	<u>Yes</u>	<u>Yes</u>	
Where and when married.	<u>Ingersoll July 25th 1901</u>	<u>Ingersoll Mar 12th 1919</u>	
Full name of Father.	<u>Julien James Maare</u>	<u>Henry Thomas Fordham</u>	
Address.	<u>Ingersoll</u>	<u>Ingersoll</u>	
Occupation.	<u>Mechanic</u>	<u>Farmer</u>	
Maiden name of Mother.	<u>Effie Pernellia Carnevale</u>	<u>Elizabeth Mary Springale</u>	
Is she single or a widow?	<u>-</u>	<u>-</u>	
Name of Physician in attendance.	<u>Dr Durland</u>	<u>Dr Macdonald</u>	
Were you in house at time of Birth?	<u>Yes</u>	<u>Yes</u>	
Twin, Triplet, Illegitimate or Still-born.	<u>-</u>	<u>-</u>	
Name of Informant.	<u>Mrs J J Maare</u>	<u>Henry T Fordham</u>	
Address.	<u>Ingersoll</u>	<u>Ingersoll</u>	
Date of Return.	<u>Dec 31st 1919</u>	<u>Dec 31st 1919</u>	

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Dec 31st 1919
 Given under my hand this 7th day of Jan A.D. 1920
 Division Registrar of Ingersoll

BIRTHS

James garton, william henry garton, edith garton, wilfred henry crown, ben crown, augusta bleaken bleaker, hugh ross bowman, harry st. bowman, louise ross, kathleen marguerite eckhardt, lanson harvey eckh, hazel lyons, gilbert wesley thornthorn, wallace tripp thornthorn, ida annie ste. charles, william fagan, george henry fagan, annie jean rierning

County of Offord

Division of Ingersoll

No. 13		No. 14		No. 15	
County <u>Offord</u> Municipality <u>Ingersoll</u>		County <u>Offord</u> Municipality <u>Ingersoll</u>		County <u>Offord</u> Municipality <u>Ingersoll</u>	
Street and Number or Con. and Lot <u>Alexandra Hospital</u> <small>(If in hospital, give name instead of street)</small>		Street and Number or Con. and Lot <u>Beauchamp St.</u> <small>(If in hospital, give name instead of street)</small>		Street and Number or Con. and Lot <u>Alexandra Hospital</u> <small>(If in hospital, give name instead of street)</small>	
Surname <u>Barlow</u>		Surname <u>Bauman</u>		Surname <u>Shanton</u>	
Given names in full <u>James</u>		Given names in full <u>Bugh Ross</u>		Given names in full <u>Wallace Tripp Shanton</u>	
Sex (M. or F.) <u>M</u> Twin or Triplet <u>-</u> Was child born alive? <u>Yes</u> Legitimate "Yes" or "No" <u>Yes</u>		Sex (M. or F.) <u>M</u> Twin or Triplet <u>-</u> Was child born alive? <u>Yes</u> Legitimate "Yes" or "No" <u>Yes</u>		Sex (M. or F.) <u>M</u> Twin or Triplet <u>-</u> Was child born alive? <u>Yes</u> Legitimate "Yes" or "No" <u>Yes</u>	
Date of Birth <u>Jan 20th 1920</u>		Date of Birth <u>Dec 27th 1919</u>		Date of Birth <u>Dec 23rd 1919</u>	
FATHER	Full name <u>William Henry Barlow</u>	FATHER	Full name <u>Henry Stanley Bauman</u>	FATHER	Full name <u>Wallace Tripp Shanton</u>
	Usual residence <u>West Offord</u>		Usual residence <u>Ingersoll</u>		Usual residence <u>West Offord</u>
	Racial origin <u>English</u> Birth place <u>England</u>		Racial origin <u>Canadian</u> Birth place <u>Canada</u>		Racial origin <u>Canadian</u> Birth place <u>Canada</u>
MOTHER	Trade or Profession <u>Labourer</u>	MOTHER	Trade or Profession <u>Labourer</u>	MOTHER	Trade or Profession <u>Farmer</u>
	Kind of industry or business in which employed <u>General</u>		Kind of industry or business in which employed <u>Hardware</u>		Kind of industry or business in which employed <u>Farming</u>
	Full maiden name <u>Elizabeth Day</u>		Full maiden name <u>Louise M. Ross</u>		Full maiden name <u>Ada Annie Stevens</u>
Usual residence <u>West Offord</u>	Usual residence <u>Ingersoll</u>	Usual residence <u>West Offord</u>	Usual residence <u>West Offord</u>	Usual residence <u>West Offord</u>	Usual residence <u>West Offord</u>
Racial origin <u>English</u> Birth place <u>England</u>	Racial origin <u>English</u> Birth place <u>Canada</u>	Racial origin <u>English</u> Birth place <u>England</u>	Racial origin <u>English</u> Birth place <u>England</u>	Racial origin <u>English</u> Birth place <u>England</u>	Racial origin <u>English</u> Birth place <u>England</u>
Number of children including this one <u>living 9</u> <u>dead 2</u> <u>still-born 1</u>	Number of children including this one <u>living 3</u> <u>dead -</u> <u>still-born -</u>	Number of children including this one <u>living 1</u> <u>dead -</u> <u>still-born -</u>	Number of children including this one <u>living 2</u> <u>dead -</u> <u>still-born -</u>	Number of children including this one <u>living 3</u> <u>dead -</u> <u>still-born -</u>	Number of children including this one <u>living 3</u> <u>dead -</u> <u>still-born -</u>
Occupation, if other than household duties <u>-</u>	Occupation, if other than household duties <u>-</u>	Occupation, if other than household duties <u>-</u>	Occupation, if other than household duties <u>-</u>	Occupation, if other than household duties <u>-</u>	Occupation, if other than household duties <u>-</u>
Name of Informant <u>W. H. Barlow</u>	Name of Informant <u>H. Bauman</u>	Name of Informant <u>W. H. Shanton</u>			
Address <u>Ingersoll</u>	Address <u>Ingersoll</u>	Address <u>Beachville Rd. 1</u>			
Name of Physician in attendance <u>Dr. Macdonald</u>	Name of Physician in attendance <u>Dr. Durling</u>	Name of Physician in attendance <u>Dr. Rogers</u>			
Did physician give notice of this birth? <u>Yes</u> Date of receipt by D. R. <u>Jan 20/20</u>	Did physician give notice of this birth? <u>Yes</u> Date of receipt by D. R. <u>Jan 20/20</u>	Did physician give notice of this birth? <u>No</u> Date of receipt by D. R. <u>-</u>			

No. 16		No. 17		No. 18	
County <u>Offord</u> Municipality <u>Ingersoll</u>		County <u>Offord</u> Municipality <u>Ingersoll</u>		County <u>Offord</u> Municipality <u>Ingersoll</u>	
Street and Number or Con. and Lot <u>Alexandra Hospital</u> <small>(If in hospital, give name instead of street)</small>		Street and Number or Con. and Lot <u>Shorne Street</u> <small>(If in hospital, give name instead of street)</small>		Street and Number or Con. and Lot <u>George Street</u> <small>(If in hospital, give name instead of street)</small>	
Surname <u>Crown</u>		Surname <u>Eckhardt</u>		Surname <u>Fagan</u>	
Given names in full <u>Wilfred Henry</u>		Given names in full <u>Rachel Marguerite</u>		Given names in full <u>Charles William</u>	
Sex (M. or F.) <u>M</u> Twin or Triplet <u>-</u> Was child born alive? <u>Yes</u> Legitimate "Yes" or "No" <u>Yes</u>		Sex (M. or F.) <u>F</u> Twin or Triplet <u>-</u> Was child born alive? <u>Yes</u> Legitimate "Yes" or "No" <u>Yes</u>		Sex (M. or F.) <u>M</u> Twin or Triplet <u>-</u> Was child born alive? <u>Yes</u> Legitimate "Yes" or "No" <u>Yes</u>	
Date of Birth <u>Jan 10th 1920</u>		Date of Birth <u>Dec 27th 1919</u>		Date of Birth <u>Jan 12th 1920</u>	
FATHER	Full name <u>Bernjamin Crown</u>	FATHER	Full name <u>Lanson Harvey Eckhardt</u>	FATHER	Full name <u>Georg Henry Fagan</u>
	Usual residence <u>Ingersoll</u>		Usual residence <u>Ingersoll</u>		Usual residence <u>Ingersoll</u>
	Racial origin <u>Canadian</u> Birth place <u>Canada</u>		Racial origin <u>-</u> Birth place <u>-</u>		Racial origin <u>English</u> Birth place <u>England</u>
MOTHER	Trade or Profession <u>Labourer</u>	MOTHER	Trade or Profession <u>Blind</u>	MOTHER	Trade or Profession <u>Station Wagon D. R. Y.</u>
	Kind of industry or business in which employed <u>General</u>		Kind of industry or business in which employed <u>Manufacturing</u>		Kind of industry or business in which employed <u>Railroading</u>
	Full maiden name <u>Augusta Rebecca Crown</u>		Full maiden name <u>Agnes M. Fagan</u>		Full maiden name <u>Annie Jean Fleming</u>
Usual residence <u>Ingersoll</u>	Usual residence <u>Ingersoll</u>	Usual residence <u>Ingersoll</u>	Usual residence <u>Ingersoll</u>	Usual residence <u>Ingersoll</u>	Usual residence <u>Ingersoll</u>
Racial origin <u>English</u> Birth place <u>England</u>	Racial origin <u>-</u> Birth place <u>-</u>	Racial origin <u>English</u> Birth place <u>Wiltshire</u>	Racial origin <u>English</u> Birth place <u>Wiltshire</u>	Racial origin <u>English</u> Birth place <u>Wiltshire</u>	Racial origin <u>English</u> Birth place <u>Wiltshire</u>
Number of children including this one <u>living 2</u> <u>dead 1</u> <u>still-born -</u>	Number of children including this one <u>living -</u> <u>dead -</u> <u>still-born -</u>	Number of children including this one <u>living 3</u> <u>dead -</u> <u>still-born -</u>	Number of children including this one <u>living 2</u> <u>dead -</u> <u>still-born -</u>	Number of children including this one <u>living 3</u> <u>dead -</u> <u>still-born -</u>	Number of children including this one <u>living 3</u> <u>dead -</u> <u>still-born -</u>
Occupation, if other than household duties <u>-</u>	Occupation, if other than household duties <u>-</u>	Occupation, if other than household duties <u>-</u>	Occupation, if other than household duties <u>-</u>	Occupation, if other than household duties <u>-</u>	Occupation, if other than household duties <u>-</u>
Name of Informant <u>Augusta R. Crown</u>	Name of Informant <u>H. W. Eckhardt</u>	Name of Informant <u>Georg H. Fagan</u>			
Address <u>Ingersoll</u>	Address <u>Ingersoll</u>	Address <u>Ingersoll</u>			
Name of Physician in attendance <u>Dr. Durling</u>	Name of Physician in attendance <u>Dr. Carnish</u>	Name of Physician in attendance <u>Dr. Durling</u>			
Did physician give notice of this birth? <u>Yes</u> Date of receipt by D. R. <u>Jan 20/20</u>	Did physician give notice of this birth? <u>Yes</u> Date of receipt by D. R. <u>Jan 20/20</u>	Did physician give notice of this birth? <u>Yes</u> Date of receipt by D. R. <u>Jan 18/20</u>			

THIS SPACE TO BE RESERVED FOR BINDING

I hereby certify that the above are correct registrations of Births filed with me during the month of January 1920

W. H. Barlow
Address Ingersoll D. R.

BIRTHS

Margaret alma dodd, Alfred thomas dodd, orpha tracey dickson, Aubry John Thompson Aubrey, William John Thompson, Ruby Myrtle Smith, Guy Winter Sawtell, Lilian McKee Sawtell, Elsie Clara Forde, Emily Irene Long, Edwin Joseph Lang, Ellen Matilda Lang, Margaret Louise Waterhouse, Egerton Waterhouse, Viola Margaret Lynch.

County of Alford

Division of Sugars

No. 19

County Alford Municipality Sugars

Street and Number King Street 212
(If in hospital, give name instead of street)

Surname Dodd

Given names in full Margaret Alma

Sex (M. or F.) M F Twin or Triplet Was child born alive? Yes No Legitimate "Yes" or "No" Yes No

Date of Birth Dec 31st 1919

FATHER: Full name Alfred Thomas Dodd Usual residence Sugars Age last birthday 26 Racial origin English Birth-place Sugars Trade or Profession Machinist Kind of industry or business in which employed Ball Works

MOTHER: Full maiden name Alpha Tracy Dickson Usual residence St Marys Age last birthday 34 Racial origin English Birth-place St Marys Number of children including this one living 3 dead - Still-born - Occupation, if other than household duties None

No. 20

County Alford Municipality Sugars

Street and Number Alexandra Road 12
(If in hospital, give name instead of street)

Surname Walter

Given names in full William Myrtle

Sex (M. or F.) M F Twin or Triplet Was child born alive? Yes No Legitimate "Yes" or "No" Yes No

Date of Birth Jan 14th 1920

FATHER: Full name Walter Walter Usual residence Sugars Age last birthday - Racial origin - Birth-place - Trade or Profession Insurance Agent Kind of industry or business in which employed Insurance

MOTHER: Full maiden name Elsie Clara Forde Usual residence Sugars Age last birthday - Racial origin Canadian Birth-place Ontario Number of children including this one living - dead - Still-born - Occupation, if other than household duties -

No. 21

County Alford Municipality Sugars

Street and Number Alford Street
(If in hospital, give name instead of street)

Surname Waterhouse

Given names in full Margaret Louise

Sex (M. or F.) M F Twin or Triplet Was child born alive? Yes No Legitimate "Yes" or "No" Yes No

Date of Birth Jan 23rd 1920

FATHER: Full name Egerton Waterhouse Usual residence Sugars Age last birthday 56 Racial origin English Birth-place Saddlebank Trade or Profession Accountant Kind of industry or business in which employed Deepham

MOTHER: Full maiden name Viola Margaret Lynch Usual residence Sugars Age last birthday 27 Racial origin Scottish Birth-place Sugars Number of children including this one living 1 dead - Still-born - Occupation, if other than household duties None

Name of Informant Mrs Alfred Dodd

Address Sugars

Name of Physician in attendance Dr. Carrick

Did physician give notice of this birth? Yes No Date of receipt by D. R. Jan 7/20

Name of Informant W. Walter

Address Sugars

Name of Physician in attendance Dr. Ross

Did physician give notice of this birth? Yes No Date of receipt by D. R. Jan 13/20

Name of Informant E. J. Waterhouse

Address Sugars

Name of Physician in attendance Dr. Carrick

Did physician give notice of this birth? Yes No Date of receipt by D. R. Jan 23/20

No. 22

County Alford Municipality Sugars

Street and Number Alford Street
(If in hospital, give name instead of street)

Surname Hampson

Given names in full Aubrey John

Sex (M. or F.) M F Twin or Triplet Was child born alive? Yes No Legitimate "Yes" or "No" Yes No

Date of Birth Jan 7th 1920

FATHER: Full name William John Hampson Usual residence Sugars Age last birthday 32 Racial origin English Birth-place Alford Trade or Profession Finisher Kind of industry or business in which employed Furniture

MOTHER: Full maiden name Ruby Myrtle Smith Usual residence Sugars Age last birthday 26 Racial origin English Birth-place Alford Number of children including this one living 1 dead 0 Still-born 0 Occupation, if other than household duties -

No. 23

County Alford Municipality Sugars

Street and Number Alford Street
(If in hospital, give name instead of street)

Surname Lang

Given names in full Emily Irene

Sex (M. or F.) M F Twin or Triplet Was child born alive? Yes No Legitimate "Yes" or "No" Yes No

Date of Birth Jan 18th 1920

FATHER: Full name Edwin Joseph Lang Usual residence Sugars Age last birthday 24 Racial origin English Birth-place Alford Trade or Profession Machinist Kind of industry or business in which employed Sevic's Store

MOTHER: Full maiden name Elen Matilda Lang Usual residence Sugars Age last birthday 23 Racial origin English Birth-place Alford Number of children including this one living 2 dead 0 Still-born 0 Occupation, if other than household duties -

No. 24

County Alford Municipality Sugars

Street and Number Alford Street
(If in hospital, give name instead of street)

Surname Lang

Given names in full Emily Irene

Sex (M. or F.) M F Twin or Triplet Was child born alive? Yes No Legitimate "Yes" or "No" Yes No

Date of Birth Jan 18th 1920

FATHER: Full name Edwin Joseph Lang Usual residence Sugars Age last birthday 24 Racial origin English Birth-place Alford Trade or Profession Machinist Kind of industry or business in which employed Sevic's Store

MOTHER: Full maiden name Elen Matilda Lang Usual residence Sugars Age last birthday 23 Racial origin English Birth-place Alford Number of children including this one living 2 dead 0 Still-born 0 Occupation, if other than household duties -

Name of Informant Mrs John Hampson

Address Sugars

Name of Physician in attendance Dr. Carrick

Did physician give notice of this birth? Yes No Date of receipt by D. R. Jan 7/20

Name of Informant Mrs W. Walter

Address Sugars

Name of Physician in attendance Dr. Williams

Did physician give notice of this birth? Yes No Date of receipt by D. R. Jan 18/20

Name of Informant E. J. Waterhouse

Address Sugars

Name of Physician in attendance Dr. Carrick

Did physician give notice of this birth? Yes No Date of receipt by D. R. Jan 23/20

I hereby certify that the above are correct registrations of Births filed with me during the month of January 1920

Signature W. Carrick D. R.
Address Sugars

THIS SPACE TO BE RESERVED FOR BINDING

BIRTHS

County of Offord

Division of Kingston

James james kneal, william emigh kneal, myrtle olive smiley, joyce edwards, george daves, julia elizabeth wheeler, ada florence moffatt, william moffatt, annie porterfield, brenda margaret strowbridge, stanley herbert strowbridge, alice may burnett, donald coleman turk, albert coleman turk, marjampson, wellington stirling hadcock, wellington roy hadcock, susan

THIS SPACE TO BE RESERVED FOR BINDING

No. 1

County Offord Municipality Sugersville

Street and Number King St (If in hospital, give name instead of street)

Street and Number King St (If in hospital, give name instead of street)

Surname Kneal

Given names in full Federick James

Sex male (M. or F.) Twin or Triplet - Was child born alive? Yes Legitimate "Yes" or "No" Yes

Date of Birth July 5th 1920

FATHER
Full name Willard Emigh Kneal Age last birthday 26
Usual residence Sugersville
Racial origin White Man Birth-place Canada
Occupation Salesman
Trade or Profession Salesman
Kind of industry or business in which employed Hardware

MOTHER
Full maiden name Myrtle Olive Smiley Age last birthday 24
Usual residence Sugersville
Racial origin Irish Birth-place Canada
Number of children including this one living 3 dead - Still-born -
Occupation, if other than household duties -

Name of Informant Dr. Williams
Address Sugersville
Name of Physician in attendance Dr. Williams
Did physician give notice of this birth? Yes Date of receipt by D. R. July 8/20

No. 2

County Offord Municipality Sugersville

Street and Number King St (If in hospital, give name instead of street)

Street and Number King St (If in hospital, give name instead of street)

Surname Moffatt

Given names in full William Moffatt

Sex male (M. or F.) Twin or Triplet - Was child born alive? Yes Legitimate "Yes" or "No" Yes

Date of Birth Dec 13th 1919

FATHER
Full name William Moffatt Age last birthday 42
Usual residence Sugersville
Racial origin English Canadian Birth-place Canada
Occupation Electrician
Trade or Profession Electrician
Kind of industry or business in which employed Jobbing

MOTHER
Full maiden name Ann M. Carterfield Age last birthday 41
Usual residence Sugersville
Racial origin English Canadian Birth-place Canada
Number of children including this one living 9 dead 3 Still-born None
Occupation, if other than household duties -

Name of Informant Wm. Moffatt
Address Sugersville
Name of Physician in attendance Dr. Cornish
Did physician give notice of this birth? Yes Date of receipt by D. R. Dec 16/19

No. 3

County Offord Municipality Sugersville

Street and Number Merit St (If in hospital, give name instead of street)

Street and Number Merit St (If in hospital, give name instead of street)

Surname Turk

Given names in full Donald Coleman Turk

Sex male (M. or F.) Twin or Triplet - Was child born alive? Yes Legitimate "Yes" or "No" Yes

Date of Birth Dec 17th 1919

FATHER
Full name Albert Coleman Turk Age last birthday 43
Usual residence Sugersville
Racial origin English Birth-place England
Occupation Pipe Fitter
Trade or Profession Pipe Fitter
Kind of industry or business in which employed Machine Shop

MOTHER
Full maiden name Mary Simpson Age last birthday 39
Usual residence Sugersville
Racial origin English Birth-place England
Number of children including this one living 7 dead 1 Still-born no
Occupation, if other than household duties -

Name of Informant A. L. Turk
Address Sugersville
Name of Physician in attendance Dr. Cornish
Did physician give notice of this birth? Yes Date of receipt by D. R. Dec 20/19

No. 4

County Offord Municipality Sugersville

Street and Number Alexandra Hospital (If in hospital, give name instead of street)

Street and Number Alexandra Hospital (If in hospital, give name instead of street)

Surname Davis

Given names in full Joyce Evelyn

Sex female (M. or F.) Twin or Triplet - Was child born alive? Yes Legitimate "Yes" or "No" Yes

Date of Birth Dec 27th 1919

FATHER
Full name George Davis Age last birthday -
Usual residence Sugersville
Racial origin - Birth-place -
Occupation Machinist
Trade or Profession Machinist
Kind of industry or business in which employed Machine Shop

MOTHER
Full maiden name Julia Elizabeth Wheeler Age last birthday -
Usual residence Sugersville
Racial origin - Birth-place -
Number of children including this one living - dead - Still-born no
Occupation, if other than household duties -

Name of Informant Julia E. Davis
Address Sugersville
Name of Physician in attendance Dr. Cornish
Did physician give notice of this birth? Yes Date of receipt by D. R. Dec 27/19

No. 5

County Offord Municipality Sugersville

Street and Number Alexandra Hospital (If in hospital, give name instead of street)

Street and Number Alexandra Hospital (If in hospital, give name instead of street)

Surname Strowbridge

Given names in full Brenda Margaret

Sex female (M. or F.) Twin or Triplet - Was child born alive? Yes Legitimate "Yes" or "No" Yes

Date of Birth Dec 28th 1919

FATHER
Full name Stanley Herbert Strowbridge Age last birthday -
Usual residence Sugersville
Racial origin English Canadian Birth-place Canada
Occupation File Cutter
Trade or Profession File Cutter
Kind of industry or business in which employed File Works

MOTHER
Full maiden name Alice Mary Burnett Age last birthday -
Usual residence Sugersville
Racial origin English Birth-place England
Number of children including this one living 1 dead 1 Still-born -
Occupation, if other than household duties -

Name of Informant S. H. Strowbridge
Address Sugersville
Name of Physician in attendance Dr. Cornish
Did physician give notice of this birth? Yes Date of receipt by D. R. Dec 28/19

No. 6

County Offord Municipality Sugersville

Street and Number Merit St (If in hospital, give name instead of street)

Street and Number Merit St (If in hospital, give name instead of street)

Surname Hadcock

Given names in full Wellington Roy Hadcock

Sex male (M. or F.) Twin or Triplet - Was child born alive? Yes Legitimate "Yes" or "No" Yes

Date of Birth Dec 14th 1919

FATHER
Full name Wellington Roy Hadcock Age last birthday -
Usual residence Sugersville
Racial origin - Birth-place -
Occupation Travelling Salesman
Trade or Profession Travelling Salesman
Kind of industry or business in which employed -

MOTHER
Full maiden name Susana Stirling Age last birthday -
Usual residence Sugersville
Racial origin - Birth-place -
Number of children including this one living - dead - Still-born -
Occupation, if other than household duties -

Name of Informant W. R. Hadcock
Address Sugersville
Name of Physician in attendance Dr. Williams
Did physician give notice of this birth? Yes Date of receipt by D. R. Dec 14/19

I hereby certify that the above are correct registrations of Births filed with me during the month of January 1920

D. R.

Address Sugersville

BIRTHS

Ellis James Wilson, John Charles Wilson, Annie May Ellis, Margaret Alice Willoughby, Nicholas Arthur Willoughby, Ada Marshall, Pearl Clayton, James Henry Clayton, Clara Jessie Bell, Keith Compton Falconer, Ernest Keith Falconer, Alma Gertrude Compton, Edith Jean Pittock, James Pittock, Edith French, Ethel Jean Calder, John Knight Calder, Ethel Marie Meek

County of Alford

Division of Ingersoll

No. 7			No. 8			No. 9		
County <u>Alford</u> Municipality <u>Ingersoll</u>			County <u>Alford</u> Municipality <u>Ingersoll</u>			County <u>Alford</u> Municipality <u>Ingersoll</u>		
Street and Number or Cor. and Lot <u>Conroy St</u>			Street and Number or Cor. and Lot <u>Conroy St</u>			Street and Number or Cor. and Lot <u>Conroy St</u>		
Surname <u>Wilson</u>			Surname <u>Clayton</u>			Surname <u>Calder</u>		
Given names in full <u>Ellis James</u>			Given names in full <u>James Henry Clayton</u>			Given names in full <u>James Calder</u>		
Sex (M. or F.)	Twin or Triplet	Was child born alive?	Sex (M. or F.)	Twin or Triplet	Was child born alive?	Sex (M. or F.)	Twin or Triplet	Was child born alive?
<u>M</u>	<u>-</u>	<u>Yes</u>	<u>M</u>	<u>-</u>	<u>Yes</u>	<u>M</u>	<u>-</u>	<u>Yes</u>
Date of Birth <u>Dec 17th 1919</u>			Date of Birth <u>Dec 26th 1919</u>			Date of Birth <u>Dec 26th 1919</u>		
Full name <u>John Charles Wilson</u>			Full name <u>James Henry Clayton</u>			Full name <u>James Calder</u>		
Usual residence <u>Ingersoll</u>		Age last birthday	Usual residence <u>Ingersoll</u>		Age last birthday	Usual residence <u>Ingersoll</u>		Age last birthday
Racial origin		Birth-place	Racial origin <u>English</u>		Birth-place <u>England</u>	Racial origin		Birth-place
Trade or Profession <u>Farmer</u>			Trade or Profession <u>Machinist</u>			Trade or Profession <u>Machinist</u>		
Kind of industry or business in which employed			Kind of industry or business in which employed			Kind of industry or business in which employed		
Full maiden name <u>Annie May Ellis</u>			Full maiden name <u>Clara Jessie Bell</u>			Full maiden name <u>Ethel Jean</u>		
Usual residence <u>Ingersoll</u>		Age last birthday	Usual residence <u>Ingersoll</u>		Age last birthday	Usual residence <u>Ingersoll</u>		Age last birthday
Racial origin		Birth-place	Racial origin <u>English</u>		Birth-place <u>England</u>	Racial origin		Birth-place
Number of children including this one Living <u>-</u> dead <u>-</u> Still-born <u>-</u>			Number of children including this one Living <u>2</u> dead <u>-</u> Still-born <u>-</u>			Number of children including this one Living <u>-</u> dead <u>-</u> Still-born <u>-</u>		
Occupation, if other than household duties			Occupation, if other than household duties			Occupation, if other than household duties		
Name of Informant <u>John Charles Wilson</u>			Name of Informant <u>J H Clayton</u>			Name of Informant <u>Joe Calder</u>		
Address <u>Ingersoll</u>			Address <u>Ingersoll</u>			Address <u>Ingersoll</u>		
Name of Physician in attendance <u>Dr. Williams</u>			Name of Physician in attendance <u>Dr. Rogers</u>			Name of Physician in attendance <u>Dr. Carrish</u>		
Did physician give notice of this birth?		Date of receipt by D. R.	Did physician give notice of this birth?		Date of receipt by D. R.	Did physician give notice of this birth?		Date of receipt by D. R.
<u>Yes</u>		<u>Dec 17/19</u>	<u>Yes</u>		<u>Jan 12/20</u>	<u>Yes</u>		<u>Dec 26/19</u>
No. 10			No. 11			No. 12		
County <u>Alford</u> Municipality <u>Ingersoll</u>			County <u>Alford</u> Municipality <u>Ingersoll</u>			County <u>Alford</u> Municipality <u>Ingersoll</u>		
Street and Number or Cor. and Lot <u>Conroy St</u>			Street and Number or Cor. and Lot <u>Conroy St</u>			Street and Number or Cor. and Lot <u>Conroy St</u>		
Surname <u>Willoughby</u>			Surname <u>Falconer</u>			Surname <u>Calder</u>		
Given names in full <u>Margaret Alice</u>			Given names in full <u>Keith Compton Falconer</u>			Given names in full <u>Ethel Jean</u>		
Sex (M. or F.)	Twin or Triplet	Was child born alive?	Sex (M. or F.)	Twin or Triplet	Was child born alive?	Sex (M. or F.)	Twin or Triplet	Was child born alive?
<u>M</u>	<u>-</u>	<u>Yes</u>	<u>M</u>	<u>-</u>	<u>Yes</u>	<u>M</u>	<u>-</u>	<u>Yes</u>
Date of Birth <u>Jan 5th 1920</u>			Date of Birth <u>Jan 2nd 1920</u>			Date of Birth <u>Dec 14th 1919</u>		
Full name <u>Margaret Alice Willoughby</u>			Full name <u>Keith Compton Falconer</u>			Full name <u>John Knight Calder</u>		
Usual residence <u>Ingersoll</u>		Age last birthday	Usual residence <u>Ingersoll</u>		Age last birthday	Usual residence <u>Ingersoll</u>		Age last birthday
Racial origin <u>English</u>		Birth-place <u>Ont</u>	Racial origin <u>Scottish</u>		Birth-place <u>Scotland</u>	Racial origin <u>Scottish</u>		Birth-place <u>Ontario</u>
Trade or Profession <u>Author</u>			Trade or Profession <u>Farmer</u>			Trade or Profession <u>Businessman</u>		
Kind of industry or business in which employed <u>Newspaper</u>			Kind of industry or business in which employed <u>Farmer</u>			Kind of industry or business in which employed		
Full maiden name <u>Ada Marshall</u>			Full maiden name <u>Alma Gertrude Compton</u>			Full maiden name <u>Ethel Marie Meek</u>		
Usual residence <u>Ingersoll</u>		Age last birthday	Usual residence <u>Ingersoll</u>		Age last birthday	Usual residence <u>Ingersoll</u>		Age last birthday
Racial origin <u>English</u>		Birth-place <u>Ont</u>	Racial origin <u>English</u>		Birth-place <u>England</u>	Racial origin <u>Scottish</u>		Birth-place <u>Ontario</u>
Number of children including this one Living <u>1</u> dead <u>-</u> Still-born <u>-</u>			Number of children including this one Living <u>2</u> dead <u>-</u> Still-born <u>-</u>			Number of children including this one Living <u>3</u> dead <u>-</u> Still-born <u>-</u>		
Occupation, if other than household duties			Occupation, if other than household duties			Occupation, if other than household duties		
Name of Informant <u>M. Willoughby</u>			Name of Informant <u>Keith Falconer</u>			Name of Informant <u>John Knight Calder</u>		
Address <u>Ingersoll</u>			Address <u>Ingersoll</u>			Address <u>Ingersoll</u>		
Name of Physician in attendance <u>Dr. Carrish</u>			Name of Physician in attendance <u>Dr. Carrish</u>			Name of Physician in attendance <u>Dr. Williams</u>		
Did physician give notice of this birth?		Date of receipt by D. R.	Did physician give notice of this birth?		Date of receipt by D. R.	Did physician give notice of this birth?		Date of receipt by D. R.
<u>Yes</u>		<u>Jan 5/20</u>	<u>Yes</u>		<u>Jan 2/20</u>	<u>Yes</u>		<u>Jan 20/20</u>

I hereby certify that the above are correct registrations of Births filed with me during the month of January 1920

D. R.

THIS SPACE TO BE RESERVED FOR BINDING