BIRTHS

N. B.—Record all still-births as births, as well as deaths,			
Country of Esses Division of Sandwich South			
What is the full name of child?	1* Shehler Hilder May	1 Browne Vencent Joseph	Surname first  1 Holden James albert
When was the child born? Where was the child born? Street number or Con-	2 July 1st 1911	2 July 22 nd 1911	2 Oct /3 1 1911
Male or Female.	3 If the a hospital give it with 3. 0 2 S. Y. K	3 If in a hospital give Mand 94 X1.111	3 If in a hospital give the factor of Male
Are the parents married?	5 Mes-	5 Mes.	5 Okes
Full name of Father.	· William Shepley	6 Thomas Hilliam Browne	6 Edward Page Holder
Occupation of Father? Full Maiden Name of	1 Laborer	1 Laborer	7 Harmer
Mother.  If she has been more than once married give names of former husband, or husbands.	8 Minifred Skrenson.	8 Margaret McRae	8 Mary Curhis
	10 Foron of Essex	10 Maidstone -	10 Sandwich South
When were they married?  If not married give full	11 Mal 18 th 1903	11 (not quien)	11 Sept 13 th 1905
Name of Mother.  Is she single, or a Widow?  If a widow state name.	12 Hilda Shepley	Vincent Brown	James Holden
occupation, and date of husband's death.	018853	018854	018855
What is her occupation?  Name of Physician attending.	15 Dr Rodgers	15 Ary Senton	15 Au M. 1 Breeze
our relation to child.	16 Hather	16 Hather	16 It Sher
Were you in house at time of Birth?	17 Mo-	17 Yes	17 Ges-
Certified by	18 (William Shepley	18 Thomas William Browne	18 Edward P. Holden
Address	Oldcastle.	Maidstone	fachson's Corners.
Date Remarks	Oct 2 nd 1911	Oct 10 th 1911	Nov 1st 1910
	W/X		
What is the full name of	Surname first	Surname first  Out of 1 111	Surname first  MC 111 May 1
when was the child born?	2 April 5 sh 1911	2 Mov 25 th 1911	2 Male 25 Mb 1911
Where was the child born? Street number or Concession and Lot.	3 If in a hospital give its set 3 Cow 12	3 If in a hospital give its Land 294 H. Y.R.	3 If in a hospital give its name 94 M. Y.R
Male or Female.	4 Male	4 Male	4 Hemale
Tre the parents married?	5 yes a	5 111 John 11	5 Jes me 101
Full name of Father.	6 Heram Dunn	6 Thomas J. It Colosky	1 James Hyller Wallege
Occupation of Father?  Full Maiden Name of Mother.	8 Mary Eyraud	8 Mary Mc Hugh.	& Gerhude adelade Halford
If she has been more than once married give names of former husband, or		018857	
husbands.  Where were the parents married?	9 018856 10 Maidstone Ceross	10 Mondelee	o 018858
When were they married?	11.1.11.00	11 Sept 23 rd 1903	11 July 4th 1908
If not married give full Name of Mother. Is she single, or a Widow?	12	12	12
If a widow state name, occupation, and date of husband's death.	Alvin Dunn	13 Thomas McCloskey	Mary Gertrude McAuliffe
What is her occupation?  Name of Physician attend-	14	14 In maple	14 15 Du L. M. Brien
ing.	15 Dr Doyle.	16 Hather	16 Hallier
Were you in house at time of Birth?	16 Hamer 17 Yes	17 Ges.	16 Hamer 17 Hes
Certified by	18 Helam Dunn	18 Thomas P.McChakey	18 James Mcauliffe
Address	Hauplay, out	Maidslow Orth.	Muidstone, ont
Date	Nov 21 st 1911	Mov. 27 Hb 1911	Mor 24h 1911
Remarks	SAKDWICH SO	DUTH HISTORIC & L. SOCIA	
I hereby certify the foregoing to be the true and correct englies of all Births returned to major the quarter year ending Dec 3/11/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2			
Given under ney hand this Morphan day of January A.D. 1962  Division Registrar of Sandwick South			
*N.B.—The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the quarter year ending Light 3 of the Given under my hand this 15 th day of October Jandwich South.

Division Registrar of Sandwich South.

Remarks

BIRTHS

County of Cases Karanagh Margaret Elizabeth What is the full name of child? lan. 15 1/ 1911 When was the child born? Where was the child born? Street number or Concession and Lot. Male or Female. Are the parents married? arles albert allen armagh. Full name of Father. Harmer Occupation of Father? Margaret Hulds Full Maiden Name of Mother. If she has been more than once married give names of former husband, or husbands. Hundson Where were the parents married? Mov. 25/1903. Jan. 22 nd 1881 When were they married? If not married give full 12 Name of Mother. Is she single or a Widow? 018864 018865 If a widow state name, occupation, and date of husband's death. House wis 14 What is her occupation? Name of Physician attend-16 Your relation to child. Were you in house at time 17 17 of Birth? Certified by Address Mar 20 K 1911 Date Remarks Margaret Kavanagh **Grace Fairbairn** Albert Allen What is the full name of child? When was the child born? Where was the child born? 3 If in a hospital give its name. Lot 6 - low 7 Street number or Concession and Lot. Male or Female. Are the parents married? Full name of Father. Occupation of Father? 8 Hedurdge Monforbow Blanche Renaud 8 Eunice Emily Use Full Maiden Name of If she has been more than once married give names of former husband, or husbands. 018867 River Cansed Rever Canard. Where were the parents married? June 14 th 1909 Sept 10th 1909 When were they married? 11 If not married give full 12 12 Name of Mother. 018868 018869 Is she single or a Widow? **Bruce O'Neil Lucien Cloutier** If a widow state name, **Edmond Cloutier** occupation, and date of 13 husband's death. House wife House wife What is her occupation? De Skuart Name of Physician attend-15 16 Your relation to child. Were you in house at time of Birth? 17 Harry O Hel When Clouker amond Clouker Certified by Oldcaske Address Mar 23/1911 Upv 17th 1911 Date apr 17/ 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

Given under my hand this 30 the day of June And 19 19 19 19 18 N.B.—The reference numbers relate to those found in Form 2 or 3, as an aid to transcribing.

Division Registrar of Sandwich Louth.

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

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

WICH SOUTH HISTOR

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

Address

Remarks

Date