

BIRTHS

County of EssexDivision of Sandwich South 45

No. 7
 County Essex Municipality Sandwich South
 Street and Number —
 or Con. and Lot —
 (If in hospital, give name instead of street)

Surname Lyons **Lyons**
 Given names in full Francis Rita
 Sex Female (M. or F.) — Twin or Triplet — Was child born alive? Yes Legitimate "Yes" Yes or "No" —

Date of Birth Feb. 22. 1920

FATHER
 Full name Frank Lyons
 Usual residence Lat 3. Con 6 Age last birthday —
 Racial origin Irish Birth-place Sand. South

MOTHER
 Trade or Profession —
 Kind of industry or business in which employed Farming
 Full maiden name Cora Lyons
 Usual residence Lat 13. Con 6 Age last birthday —
 Racial origin Irish Birth-place Sand. South

Number of children including this one 4 living — dead — Still-born —
 Occupation, if other than household duties —

Name of Informant Mrs. Frank Lyons
 Address Jacksons. Corners
 Name of Physician in attendance Dr. Austin
 Did physician give notice of this birth? Yes Date of receipt by D. R. March 25th. 1920.

Occupation, if other than household duties —

No. 8
 County Essex Municipality Sandwich South
 Street and Number Lat 1. Con 7
 or Con. and Lot —
 (If in hospital, give name instead of street)

Surname Shuel **Shuel**
 Given names in full Reginald William
 Sex Male (M. or F.) — Twin or Triplet — Was child born alive? Yes Legitimate "Yes" Yes or "No" —

Date of Birth March 24th. 1920

FATHER
 Full name John Roland Shuel
 Usual residence Paquette Sta Age last birthday 28
 Racial origin Irish Birth-place Sand. South

MOTHER
 Trade or Profession Farmer
 Kind of industry or business in which employed —
 Full maiden name Florence Gues. O'Neil
 Usual residence Paquette Sta Age last birthday 30
 Racial origin Irish Birth-place Sand. South

Number of children including this one 1 living — dead — Still-born —
 Occupation, if other than household duties —

Name of Informant John R. Shuel
 Address Paquette Sta
 Name of Physician in attendance Dr. G. W. Rogers
 Did physician give notice of this birth? Yes Date of receipt by D. R. Mar. 25th. 1920.

Occupation, if other than household duties —

No. 9
 County Essex Municipality Sand. South
 Street and Number R. R. No. 1.
 or Con. and Lot —
 (If in hospital, give name instead of street)

Surname Jessop **Jessop**
 Given names in full Dorothy Mary
 Sex F. (M. or F.) — Twin or Triplet — Was child born alive? Yes Legitimate "Yes" Yes or "No" —

Date of Birth March. 1st. 1920

FATHER
 Full name Henry Jessop
 Usual residence Sand. South Age last birthday 29
 Racial origin English Birth-place Sand. South

MOTHER
 Trade or Profession Farmer
 Kind of industry or business in which employed —
 Full maiden name Lily Curtis
 Usual residence Sand. South Age last birthday 27
 Racial origin English Birth-place Sand. South

Number of children including this one 3 living — dead — Still-born —
 Occupation, if other than household duties —

Name of Informant Henry Jessop
 Address Paquette
 Name of Physician in attendance Dr. G. W. Rogers
 Did physician give notice of this birth? Yes Date of receipt by D. R. March. 29th.

Occupation, if other than household duties —

No. 10
 County Essex Municipality Sandwich S.
 Street and Number 6th Con.
 or Con. and Lot —
 (If in hospital, give name instead of street)

Surname Jessop
 Given names in full James Harold
 Sex M. (M. or F.) — Twin or Triplet — Was child born alive? Yes Legitimate "Yes" Yes or "No" —

Date of Birth April 1st. 1920

FATHER
 Full name Charles Jessop
 Usual residence 6th Con. Jacksons Corners Age last birthday 37
 Racial origin English Birth-place Essex County, Ont.

MOTHER
 Trade or Profession Farmer
 Kind of industry or business in which employed Jessop
 Full maiden name Rosie Dufor
 Usual residence 6th Con. Jacksons Corners Age last birthday 36
 Racial origin French Birth-place Essex County

Number of children including this one 5 living — dead 2 Still-born 0
 Occupation, if other than household duties —

Name of Informant Charles Jessop
 Address Jacksons. Corners
 Name of Physician in attendance Dr. Raymond Morand
 Did physician give notice of this birth? Yes Date of receipt by D. R. April 5th. 1920

Occupation, if other than household duties —

No. 11
 County Essex Municipality Sand. South
 Street and Number —
 or Con. and Lot —
 (If in hospital, give name instead of street)

Surname Battersby
 Given names in full Shelma Valleta
 Sex F. (M. or F.) — Twin or Triplet — Was child born alive? Yes Legitimate "Yes" Yes or "No" —

Date of Birth Jan. 27th. 1920

FATHER
 Full name James Battersby
 Usual residence Sandwich S. Age last birthday 33
 Racial origin Caucasian Birth-place Sandwich South

MOTHER
 Trade or Profession Farmer
 Kind of industry or business in which employed Battersby
 Full maiden name Myra Watson
 Usual residence Sandwich South Age last birthday 31
 Racial origin Caucasian Birth-place Sandwich South

Number of children including this one 1 living — dead 0 Still-born 0
 Occupation, if other than household duties —

Name of Informant James Battersby
 Address Mardstone
 Name of Physician in attendance Dr. G. W. Rogers
 Did physician give notice of this birth? Yes Date of receipt by D. R. April 5th. 1920.

Occupation, if other than household duties —

No. 12
 County Essex Municipality Sandwich South
 Street and Number —
 or Con. and Lot —
 (If in hospital, give name instead of street)

Surname Farough
 Given names in full James Ronalds
 Sex M. (M. or F.) — Twin or Triplet — Was child born alive? Yes Legitimate "Yes" Yes or "No" —

Date of Birth March. 9th. 1920

FATHER
 Full name Chas. Joseph Farough
 Usual residence Sandwich South Age last birthday 41
 Racial origin Caucasian Birth-place Sandwich South

MOTHER
 Trade or Profession Farmer
 Kind of industry or business in which employed Farough
 Full maiden name Elizabeth Thomas
 Usual residence Mardstone Age last birthday 34
 Racial origin Caucasian Birth-place Mardstone

Number of children including this one 6 living — dead 4 Still-born 0
 Occupation, if other than household duties —

Name of Informant Chas. J. Farough
 Address Mardstone
 Name of Physician in attendance Dr. G. W. Rogers
 Did physician give notice of this birth? Yes Date of receipt by D. R. April 6th. 1920

Occupation, if other than household duties —

I hereby certify that the above are correct registrations of Births filed with me during the month of _____ 19____.

John M. Auliffe D. R.
 Address Mardstone

BIRTHS

County of EssexDivision of Sandwich South

No. <u>1</u>	No. <u>2</u>	No. <u>3</u>
County <u>Essex</u> Municipality <u>Sandwich S.</u> Street and Number <u>Lot 293 Sandwich South</u> (If in hospital, give name instead of street)	County <u>Essex</u> Municipality <u>Sandwich S.</u> Street and Number <u>Sandwich South</u> (If in hospital, give name instead of street)	County <u>Essex</u> Municipality <u>Sandwich South</u> Street and Number <u>Lot 297 N. 2 R.</u> (If in hospital, give name instead of street)
Surname <u>Collins</u>	Surname <u>O'Neil</u>	Surname <u>Kalar</u>
Given names in full <u>Wilfred John</u>	Given names in full <u>Florence Mildred</u>	Given names in full <u>Harry Gordon</u>
Sex <u>Male</u> (M. or F.)	Sex <u>Female</u> (M. or F.)	Sex <u>Male</u> (M. or F.)
Was child born alive? <u>Yes</u>	Was child born alive? <u>Yes</u>	Was child born alive? <u>Yes</u>
Legitimate "Yes" or "No" <u>Yes</u>	Legitimate "Yes" or "No" <u>Yes</u>	Legitimate "Yes" or "No" <u>Yes</u>
Date of Birth <u>Dec. 9th. 1919</u>	Date of Birth <u>Dec. 30th. 1919</u>	Date of Birth <u>Feb. 8th. 1920</u>
FATHER Full name <u>Jeremiah Collins</u> Usual residence <u>Sandwich South</u> Age last birthday <u>36</u> Racial origin <u>Irish</u> Birth-place <u>Sandwich S.</u>	FATHER Full name <u>Harry O'Neil</u> Usual residence <u>Sandwich South</u> Age last birthday <u>—</u> Racial origin <u>Irish</u> Birth-place <u>Sandwich South</u>	FATHER Full name <u>William Harold Kalar</u> Usual residence <u>Maldstone</u> Age last birthday <u>27</u> Racial origin <u>English</u> Birth-place <u>Waterford</u>
MOTHER Trade or Profession <u>Farmer</u> Kind of industry or business in which employed <u>Agriculture</u> Full maiden name <u>Catherine Kelly</u> Usual residence <u>Sandwich South</u> Age last birthday <u>31</u> Racial origin <u>Irish</u> Birth-place <u>Chicago</u> Number of children including this one living <u>5</u> dead <u>4</u> Still-born <u>none</u> Occupation, if other than household duties <u>Collins</u>	MOTHER Trade or Profession <u>Farmer</u> Kind of industry or business in which employed <u>Agriculture</u> Full maiden name <u>Eunice Emily O'Neil</u> Usual residence <u>Sandwich South</u> Age last birthday <u>—</u> Racial origin <u>English</u> Birth-place <u>Sandwich South</u> Number of children including this one living <u>—</u> dead <u>—</u> Still-born <u>—</u> Occupation, if other than household duties <u>O'Neil</u>	MOTHER Trade or Profession <u>Electrician</u> Kind of industry or business in which employed <u>Electrical</u> Full maiden name <u>Verna Deloria Proker</u> Usual residence <u>Maldstone</u> Age last birthday <u>25</u> Racial origin <u>English</u> Birth-place <u>Waterford</u> Number of children including this one living <u>3</u> dead <u>—</u> Still-born <u>—</u> Occupation, if other than household duties <u>Kalar</u>
Name of Informant <u>Jeremiah Collins</u>	Name of Informant <u>Harry O'Neil</u>	Name of Informant <u>W. H. Kalar</u>
Address <u>Maldstone</u>	Address <u>Paquette</u>	Address <u>Maldstone</u>
Name of Physician in attendance <u>Dr. H. A. Bowie</u>	Name of Physician in attendance <u>Dr. J. Wilbert Brien</u>	Name of Physician in attendance <u>Dr. J. S. McDonald</u>
Did physician give notice of this birth? <u>No</u>	Did physician give notice of this birth? <u>Yes</u>	Did physician give notice of this birth? <u>Yes</u>
Date of receipt by D. R. <u>Jan 3rd. 1920</u>	Date of receipt by D. R. <u>Jan 24th</u>	Date of receipt by D. R. <u>Feb. 11th. 1920</u>
No. <u>4</u>	No. <u>5</u>	No. <u>6</u>
County <u>Essex</u> Municipality <u>Sandwich South</u> Street and Number <u>—</u> (If in hospital, give name instead of street)	County <u>Essex</u> Municipality <u>Sandwich South</u> Street and Number <u>11 Concession</u> (If in hospital, give name instead of street)	County <u>Essex</u> Municipality <u>Sandwich South</u> Street and Number <u>—</u> (If in hospital, give name instead of street)
Surname <u>McKenzie</u>	Surname <u>Baillargeon</u>	Surname <u>Benoit</u>
Given names in full <u>Samuel James</u>	Given names in full <u>—</u>	Given names in full <u>Raymond Richard</u>
Sex <u>M</u> (M. or F.)	Sex <u>Male</u> (M. or F.)	Sex <u>Male</u> (M. or F.)
Was child born alive? <u>Yes</u>	Was child born alive? <u>No</u>	Was child born alive? <u>Yes</u>
Legitimate "Yes" or "No" <u>Yes</u>	Legitimate "Yes" or "No" <u>Yes</u>	Legitimate "Yes" or "No" <u>Yes</u>
Date of Birth <u>Feb. 7th. 1920</u>	Date of Birth <u>March. 7th. 1920</u>	Date of Birth <u>Feb. 24th. 1920</u>
FATHER Full name <u>Fred. P. McKenzie</u> Usual residence <u>Sand. South</u> Age last birthday <u>44</u> Racial origin <u>English</u> Birth-place <u>Maldstone</u>	FATHER Full name <u>Archille Baillargeon</u> Usual residence <u>Maldstone</u> Age last birthday <u>31 yrs.</u> Racial origin <u>French</u> Birth-place <u>Sandwich South</u>	FATHER Full name <u>Elmer Eli Benoit</u> Usual residence <u>Sandwich South</u> Age last birthday <u>37</u> Racial origin <u>French</u> Birth-place <u>Belle River</u>
MOTHER Trade or Profession <u>Farmer</u> Kind of industry or business in which employed <u>—</u> Full maiden name <u>Harriet Gales</u> Usual residence <u>Sand. South</u> Age last birthday <u>41</u> Racial origin <u>English</u> Birth-place <u>Sand. South</u> Number of children including this one living <u>3</u> dead <u>—</u> Still-born <u>—</u> Occupation, if other than household duties <u>—</u>	MOTHER Trade or Profession <u>Farmer</u> Kind of industry or business in which employed <u>—</u> Full maiden name <u>Josephine Maitre</u> Usual residence <u>11. Concession</u> Age last birthday <u>23</u> Racial origin <u>French</u> Birth-place <u>Sandwich South</u> Number of children including this one living <u>—</u> dead <u>—</u> Still-born <u>1</u> Occupation, if other than household duties <u>—</u>	MOTHER Trade or Profession <u>Farmer</u> Kind of industry or business in which employed <u>—</u> Full maiden name <u>Melvinia Beaulieu</u> Usual residence <u>Sandwich South</u> Age last birthday <u>37</u> Racial origin <u>French</u> Birth-place <u>St. Joachim</u> Number of children including this one living <u>8</u> dead <u>0</u> Still-born <u>0</u> Occupation, if other than household duties <u>—</u>
Name of Informant <u>Fred. McKenzie</u>	Name of Informant <u>Archille Baillargeon</u>	Name of Informant <u>E. Elmer Benoit</u>
Address <u>Maldstone</u>	Address <u>Maldstone</u>	Address <u>Maldstone</u>
Name of Physician in attendance <u>Dr. Rogers</u>	Name of Physician in attendance <u>Dr. Gustave Racine</u>	Name of Physician in attendance <u>Dr. A. W. Keener</u>
Did physician give notice of this birth? <u>Yes</u>	Did physician give notice of this birth? <u>Yes</u>	Did physician give notice of this birth? <u>Yes</u>
Date of receipt by D. R. <u>Feb. 27th</u>	Date of receipt by D. R. <u>March 10th 1920</u>	Date of receipt by D. R. <u>Mar. 19th 1920</u>
McKenzie	Baillargeon	Benoit

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

BIRTHS

47

County of EssexDivision of Sandwich South

County <u>Essex</u> No. <u>13</u>	
Municipality <u>Sandwich South</u>	
Street and Number or Con. and Lot _____ (If in hospital, give name instead of street)	
Surname <u>Bondy</u>	
Given names in full <u>Mary Lucille</u>	
Sex (M. or F.) <u>F</u>	Was child born alive? <u>Yes</u> Legitimate "Yes" or "No" <u>Yes</u>
Date of Birth <u>April 3rd 1920</u>	
FATHER	MOTHER
Full name <u>Dolphus Bondy</u>	Full name <u>Laura Renaud</u>
Usual residence <u>Sand. South</u>	Usual residence <u>Sandwich South</u>
Racial origin <u>French</u>	Racial origin <u>French</u>
Trade or Profession <u>Farmer</u>	Trade or Profession <u>Farmer</u>
Kind of industry or business in which employed <u>Bondy</u>	Kind of industry or business in which employed <u>Bondy</u>
Full maiden name <u>Laura Renaud</u>	Full maiden name <u>Laura Renaud</u>
Usual residence <u>Sandwich South</u>	Usual residence <u>Sandwich South</u>
Racial origin <u>French</u>	Racial origin <u>French</u>
Number of children including this one <u>living 7</u>	Number of children including this one <u>living 7</u>
Still-born <u>0</u>	Still-born <u>0</u>
Occupation, if other than household duties <u>Bondy</u>	Occupation, if other than household duties <u>Bondy</u>

Name of Informant Dolphus Bondy

Address Windsor, Ont.

Name of Physician in attendance Dr. MacDonald

Did physician give notice of this birth? Yes Date of receipt by D. R. April 20th 1920

County <u>Essex</u> No. <u>14</u>	
Municipality <u>Sandwich South</u>	
Street and Number or Con. and Lot _____ (If in hospital, give name instead of street)	
Surname <u>Holden</u>	
Given names in full <u>Bertha Rose</u>	
Sex (M. or F.) <u>F</u>	Was child born alive? <u>Yes</u> Legitimate "Yes" or "No" <u>Yes</u>
Date of Birth <u>March 23rd 1920</u>	
FATHER	MOTHER
Full name <u>William Harold Holden</u>	Full name <u>Elizabeth Lillian Little</u>
Usual residence <u>Sandwich South</u>	Usual residence <u>Mandstone</u>
Racial origin <u>English</u>	Racial origin <u>English</u>
Trade or Profession <u>Farmer</u>	Trade or Profession <u>Farmer</u>
Kind of industry or business in which employed <u>Holden</u>	Kind of industry or business in which employed <u>Holden</u>
Full maiden name <u>Elizabeth Lillian Little</u>	Full maiden name <u>Elizabeth Lillian Little</u>
Usual residence <u>Mandstone</u>	Usual residence <u>Mandstone</u>
Racial origin <u>English</u>	Racial origin <u>English</u>
Number of children including this one <u>living 2</u>	Number of children including this one <u>living 2</u>
Still-born <u>0</u>	Still-born <u>0</u>
Occupation, if other than household duties <u>Holden</u>	Occupation, if other than household duties <u>Holden</u>

Name of Informant W. H. Holden

Address Paquette

Name of Physician in attendance Dr. Rogers

Did physician give notice of this birth? Yes Date of receipt by D. R. April 15th 1920

County <u>Essex</u> No. <u>15</u>	
Municipality <u>Sandwich South</u>	
Street and Number or Con. and Lot _____ (If in hospital, give name instead of street)	
Surname <u>Fenn</u>	
Given names in full <u>Gwendolyn</u>	
Sex (M. or F.) <u>F</u>	Was child born alive? <u>Yes</u> Legitimate "Yes" or "No" <u>Yes</u>
Date of Birth <u>April 23rd 1920</u>	
FATHER	MOTHER
Full name <u>Walter Fenn</u>	Full name <u>Grace Edwards</u>
Usual residence <u>Sandwich South</u>	Usual residence <u>Sandwich South</u>
Racial origin <u>English</u>	Racial origin <u>English</u>
Trade or Profession <u>Farmer</u>	Trade or Profession <u>Farmer</u>
Kind of industry or business in which employed <u>Fenn</u>	Kind of industry or business in which employed <u>Fenn</u>
Full maiden name <u>Grace Edwards</u>	Full maiden name <u>Grace Edwards</u>
Usual residence <u>Sandwich South</u>	Usual residence <u>Sandwich South</u>
Racial origin <u>English</u>	Racial origin <u>English</u>
Number of children including this one <u>living 1</u>	Number of children including this one <u>living 1</u>
Still-born <u>0</u>	Still-born <u>0</u>
Occupation, if other than household duties <u>Fenn</u>	Occupation, if other than household duties <u>Fenn</u>

Name of Informant Walter Fenn

Address Paquette

Name of Physician in attendance Dr. Rogers

Did physician give notice of this birth? Yes Date of receipt by D. R. April 27th 1920

County <u>Essex</u> No. <u>16</u>	
Municipality <u>Sandwich S.</u>	
Street and Number or Con. and Lot _____ (If in hospital, give name instead of street)	
Surname <u>Belleau</u>	
Given names in full <u>Donald Florant</u>	
Sex (M. or F.) <u>M</u>	Was child born alive? <u>Yes</u> Legitimate "Yes" or "No" <u>Yes</u>
Date of Birth <u>April 20th 1920</u>	
FATHER	MOTHER
Full name <u>Frank Belleau</u>	Full name <u>Amelia Epraud</u>
Usual residence <u>Sand. South</u>	Usual residence <u>Sandwich South</u>
Racial origin <u>French</u>	Racial origin <u>French</u>
Trade or Profession <u>Farmer</u>	Trade or Profession <u>Farmer</u>
Kind of industry or business in which employed <u>Belleau</u>	Kind of industry or business in which employed <u>Belleau</u>
Full maiden name <u>Amelia Epraud</u>	Full maiden name <u>Amelia Epraud</u>
Usual residence <u>Sandwich South</u>	Usual residence <u>Sandwich South</u>
Racial origin <u>French</u>	Racial origin <u>French</u>
Number of children including this one <u>living 2</u>	Number of children including this one <u>living 2</u>
Still-born <u>0</u>	Still-born <u>0</u>
Occupation, if other than household duties <u>Belleau</u>	Occupation, if other than household duties <u>Belleau</u>

Name of Informant Mrs. Amelia Belleau

Address Mandstone

Name of Physician in attendance Dr. Rogers

Did physician give notice of this birth? No Date of receipt by D. R. —

County <u>Essex</u> No. <u>17</u>	
Municipality <u>Sandwich South</u>	
Street and Number or Con. and Lot _____ (If in hospital, give name instead of street)	
Surname <u>Langlois</u>	
Given names in full <u>Beverley Ellwood</u>	
Sex (M. or F.) <u>M</u>	Was child born alive? <u>Yes</u> Legitimate "Yes" or "No" <u>Yes</u>
Date of Birth <u>May 15th 1920</u>	
FATHER	MOTHER
Full name <u>George Langlois</u>	Full name <u>Pearl Edna King</u>
Usual residence <u>Paquette, Ont.</u>	Usual residence <u>Paquette, Ont.</u>
Racial origin <u>French</u>	Racial origin <u>Scotch</u>
Trade or Profession <u>Moulder</u>	Trade or Profession <u>Moulder</u>
Kind of industry or business in which employed <u>Cornut</u>	Kind of industry or business in which employed <u>Cornut</u>
Full maiden name <u>Pearl Edna King</u>	Full maiden name <u>Pearl Edna King</u>
Usual residence <u>Paquette, Ont.</u>	Usual residence <u>Paquette, Ont.</u>
Racial origin <u>Scotch</u>	Racial origin <u>Scotch</u>
Number of children including this one <u>living 4</u>	Number of children including this one <u>living 4</u>
Still-born <u>0</u>	Still-born <u>0</u>
Occupation, if other than household duties <u>Langlois</u>	Occupation, if other than household duties <u>Langlois</u>

Name of Informant Pearl Langlois (mother)

Address Paquette

Name of Physician in attendance Dr. J. O. McDonald

Did physician give notice of this birth? Yes Date of receipt by D. R. May 18th 1920

County <u>Essex</u> No. <u>18</u>	
Municipality <u>Sandwich South</u>	
Street and Number or Con. and Lot _____ (If in hospital, give name instead of street)	
Surname <u>Nagorsen</u>	
Given names in full <u>William Louis</u>	
Sex (M. or F.) <u>M</u>	Was child born alive? <u>Yes</u> Legitimate "Yes" or "No" <u>Yes</u>
Date of Birth <u>May 25th 1920</u>	
FATHER	MOTHER
Full name <u>William Louis Nagorsen</u>	Full name <u>Margaret Foster</u>
Usual residence <u>Sandwich South</u>	Usual residence <u>Sandwich South</u>
Racial origin <u>German</u>	Racial origin <u>English</u>
Trade or Profession <u>Farmer</u>	Trade or Profession <u>Farmer</u>
Kind of industry or business in which employed <u>Nagorsen</u>	Kind of industry or business in which employed <u>Nagorsen</u>
Full maiden name <u>Margaret Foster</u>	Full maiden name <u>Margaret Foster</u>
Usual residence <u>Sandwich South</u>	Usual residence <u>Sandwich South</u>
Racial origin <u>English</u>	Racial origin <u>English</u>
Number of children including this one <u>living 2</u>	Number of children including this one <u>living 2</u>
Still-born <u>0</u>	Still-born <u>0</u>
Occupation, if other than household duties <u>Nagorsen</u>	Occupation, if other than household duties <u>Nagorsen</u>

Name of Informant Margaret Nagorsen

Address Mandstone, R.R. No. 3

Name of Physician in attendance Dr. Rogers

Did physician give notice of this birth? Yes Date of receipt by D. R. May 25th 1920

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

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D. R.

Address

THIS SPACE TO BE RESERVED FOR BINDING

BIRTHS

County of EssexDivision of Sandwich South

No. 19
 County Essex Municipality Sandwich South
 Street and Number
 or Con. and Lot (If in hospital, give name instead of street)

Surname Mackenzie
 Given names in full Douglas Bryce
 Sex (M. or F.) M. Twin or Triplet - Was child born alive? Yes Legitimate "Yes" or "No" Yes

Date of Birth May 10th 1920

FATHER
 Full name George Robert Mackenzie Age last birthday 34
 Usual residence Sandwich South
 Racial origin Scotch Birth-place Sandwich S.

OCCUPATION
 Trade or Profession Farmer
 Kind of industry or business in which employed Farmer

MOTHER
 Full maiden name Amie Margaret Frith Age last birthday 32
 Usual residence Sandwich South
 Racial origin English Birth-place Sandwich South

Number of children including this one living 2 dead 1 Still-born 1
 Occupation, if other than household duties McKenzie

Name of Informant Geo. R. McKenzieAddress MaidstoneName of Physician in attendance Dr. Currogers

Did physician give notice of this birth? Yes Date of receipt by D. R. June 8th 1920

No. 22
 County Essex Municipality Sand. South
 Street and Number
 or Con. and Lot (If in hospital, give name instead of street)

Surname Little
 Given names in full Margaret Lillian
 Sex (M. or F.) F. Twin or Triplet - Was child born alive? Yes Legitimate "Yes" or "No" Yes

Date of Birth July 19th 1920

FATHER
 Full name John L. Little Age last birthday 36
 Usual residence Sand. South
 Racial origin Irish Birth-place Maidstone Sp.

OCCUPATION
 Trade or Profession Farmer
 Kind of industry or business in which employed Farming

MOTHER
 Full maiden name Margaret C. Leeperance Age last birthday 31
 Usual residence Sandwich S.
 Racial origin French Birth-place Acumuseh

Number of children including this one living 3 dead - Still-born -
 Occupation, if other than household duties None

Name of Informant John L. LittleAddress EssexName of Physician in attendance Dr. Jas. McDonald

Did physician give notice of this birth? Yes Date of receipt by D. R. July 23/20

No. 23
 County Essex Municipality Sandwich South
 Street and Number
 or Con. and Lot (If in hospital, give name instead of street)

Surname Latendresse
 Given names in full Ethel Buella
 Sex (M. or F.) F. Twin or Triplet - Was child born alive? Yes Legitimate "Yes" or "No" Yes

Date of Birth July 28th 1920

FATHER
 Full name Arthur Latendresse Age last birthday 27
 Usual residence Sandwich South
 Racial origin French Birth-place Windsor

OCCUPATION
 Trade or Profession Laborer
 Kind of industry or business in which employed Art. Plant.

MOTHER
 Full maiden name Ruby Fox Age last birthday 26
 Usual residence Sandwich South
 Racial origin English Birth-place Gospier with

Number of children including this one living 2 dead - Still-born -
 Occupation, if other than household duties Latendresse

Name of Informant Arthur LatendresseAddress AcumusehName of Physician in attendance Dr. Poisson

Did physician give notice of this birth? Yes Date of receipt by D. R. Aug. 2nd 1920

No. 24
 County Essex Municipality Sandwich South
 Street and Number
 or Con. and Lot (If in hospital, give name instead of street)

Surname Collins
 Given names in full Charles Matthew
 Sex (M. or F.) M. Twin or Triplet - Was child born alive? Yes Legitimate "Yes" or "No" Yes

Date of Birth Aug. 16th 1920

FATHER
 Full name George Edwin Collins Age last birthday 25
 Usual residence Sandwich South
 Racial origin English Birth-place Canada

OCCUPATION
 Trade or Profession Farmer
 Kind of industry or business in which employed Farmer

MOTHER
 Full maiden name Kathleen Hughes Age last birthday 24
 Usual residence Sandwich South
 Racial origin English Birth-place England

Number of children including this one living 1 dead - Still-born -
 Occupation, if other than household duties Collins

Name of Informant George Edwin CollinsAddress Jacksons Corners Ont.Name of Physician in attendance Dr. W. J. Bursley

Did physician give notice of this birth? Yes Date of receipt by D. R. Aug. 18th 1920

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

19.....

D. R.

Address.....

THIS SPACE TO BE RESERVED FOR BINDING

BIRTHS

50

County of *Essex*.Division of *Sandwich South*.

No. 31		No. 32		No. 33	
County <i>Essex</i> Municipality <i>Sandwich S.</i>		County <i>Essex</i> Municipality <i>Sandwich S.</i>		County <i>Essex</i> Municipality <i>Sandwich S.</i>	
Street and Number or Con. and Lot (If in hospital, give name instead of street)		Street and Number or Con. and Lot (If in hospital, give name instead of street)		Street and Number or Con. and Lot (If in hospital, give name instead of street)	
Surname <i>McCarthy</i>		Surname <i>McAuliffe</i>		Surname <i>Boos</i>	
Given names in full <i>Joseph Francis Albert</i>		Given names in full <i>Mary Catherine</i>		Given names in full <i>Mary Beatrice</i>	
Sex (M. or F.) <i>M.</i> Twin or Triplet <i>No</i> Was child born alive? <i>Yes</i> Legitimate "Yes" or "No" <i>Yes</i>		Sex (M. or F.) <i>F.</i> Twin or Triplet <i>No</i> Was child born alive? <i>Yes</i> Legitimate "Yes" or "No" <i>Yes</i>		Sex (M. or F.) <i>F.</i> Twin or Triplet <i>No</i> Was child born alive? <i>Yes</i> Legitimate "Yes" or "No" <i>Yes</i>	
Date of Birth <i>Sept. 16th. 1920</i>		Date of Birth <i>Nov. 7th 1920</i>		Date of Birth <i>Oct. 20th. 1920</i>	
FATHER		FATHER		FATHER	
Full name <i>Albert J. McCarthy</i>		Full name <i>Albert Joseph McAuliffe</i>		Full name <i>Joseph E. Boos</i>	
Usual residence <i>Sandwich South</i> Age last birthday <i>32</i>		Usual residence <i>Maidstone</i> Age last birthday <i>24</i>		Usual residence <i>Sandwich South</i> Age last birthday <i>33</i>	
Racial origin <i>Irish</i> Birth-place <i>Sandwich S.</i>		Racial origin <i>Irish</i> Birth-place <i>Sandwich S.</i>		Racial origin <i>German</i> Birth-place <i>Essex Co.</i>	
Occupation <i>Farming.</i>		Occupation <i>Farming.</i>		Occupation <i>Farming.</i>	
Full maiden name <i>Mamie McCloskey</i>		Full maiden name <i>Ida Kane</i>		Full maiden name <i>Mamie Richards</i>	
Usual residence <i>Maidstone</i> Age last birthday <i>30</i>		Usual residence <i>Sandwich South</i> Age last birthday <i>22</i>		Usual residence <i>Sandwich South</i> Age last birthday <i>29</i>	
Racial origin <i>Irish</i> Birth-place <i>Maidstone</i>		Racial origin <i>Irish & French</i> Birth-place <i>Maidstone</i>		Racial origin <i>English</i> Birth-place <i>Essex Co.</i>	
Number of children including this one living <i>2</i> dead <i>0</i> Still-born <i>0</i>		Number of children including this one living <i>2</i> dead <i>—</i> Still-born <i>—</i>		Number of children including this one living <i>3</i> dead <i>1</i> Still-born <i>0</i>	
Occupation, if other than household duties <i>McCarthy</i>		Occupation, if other than household duties <i>McAuliffe</i>		Occupation, if other than household duties <i>Boos</i>	
Name of Informant <i>Albert J. McCarthy</i>		Name of Informant <i>Albert J. McAuliffe</i>		Name of Informant <i>Joseph Boos</i>	
Address <i>Maidstone</i>		Address <i>Maidstone</i>		Address <i>Pequette</i>	
Name of Physician in attendance <i>Dr. G. W. Rogers</i>		Name of Physician in attendance <i>Dr. J. W. Brien</i>		Name of Physician in attendance <i>Dr. J. D. McDonald</i>	
Did physician give notice of this birth? <i>Yes</i> Date of receipt by D. R. <i>Oct. 8/20</i>		Did physician give notice of this birth? <i>Yes</i> Date of receipt by D. R. <i>Nov. 10th/20</i>		Did physician give notice of this birth? <i>Yes</i> Date of receipt by D. R. <i>Oct. 24/20</i>	
No. 34		No. 35		No. 36	
County <i>Essex</i> Municipality <i>Sandwich S.</i>		County <i>Essex</i> Municipality <i>Sandwich S.</i>		County <i>Essex</i> Municipality <i>Sandwich S.</i>	
Street and Number or Con. and Lot (If in hospital, give name instead of street)		Street and Number or Con. and Lot (If in hospital, give name instead of street)		Street and Number or Con. and Lot (If in hospital, give name instead of street)	
Surname <i>Lafond</i>		Surname <i>Burke</i>		Surname <i>Dunn</i>	
Given names in full <i>Donald Octave</i>		Given names in full <i>Edward Francis</i>		Given names in full <i>Vincent Julian</i>	
Sex (M. or F.) <i>M.</i> Twin or Triplet <i>No</i> Was child born alive? <i>Yes</i> Legitimate "Yes" or "No" <i>Yes</i>		Sex (M. or F.) <i>M.</i> Twin or Triplet <i>No</i> Was child born alive? <i>Yes</i> Legitimate "Yes" or "No" <i>Yes</i>		Sex (M. or F.) <i>M.</i> Twin or Triplet <i>No</i> Was child born alive? <i>Yes</i> Legitimate "Yes" or "No" <i>Yes</i>	
Date of Birth <i>Dec. 19th. 1920</i>		Date of Birth <i>Jan. 8th 1921</i>		Date of Birth <i>Jan. 9th. 1921</i>	
FATHER		FATHER		FATHER	
Full name <i>David E. Lafond</i>		Full name <i>William Ralph Burke</i>		Full name <i>Thomas Dunn</i>	
Usual residence <i>Sandwich S.</i> Age last birthday <i>37</i>		Usual residence <i>Sandwich South</i> Age last birthday <i>32</i>		Usual residence <i>Sandwich South</i> Age last birthday <i>32</i>	
Racial origin <i>French</i> Birth-place <i>Essex</i>		Racial origin <i>Irish</i> Birth-place <i>Essex County</i>		Racial origin <i>Irish</i> Birth-place <i>Maidstone</i>	
Occupation <i>Farmer</i>		Occupation <i>Farming</i>		Occupation <i>Farming</i>	
Full maiden name <i>Marie E. Ashby</i>		Full maiden name <i>Bernadette Mero</i>		Full maiden name <i>Margaret May Cole</i>	
Usual residence <i>Sandwich S.</i> Age last birthday <i>34</i>		Usual residence <i>Essex County</i> Age last birthday <i>30</i>		Usual residence <i>Maidstone</i> Age last birthday <i>30</i>	
Racial origin <i>English</i> Birth-place <i>Essex</i>		Racial origin <i>French</i> Birth-place <i>Essex County</i>		Racial origin <i>Irish</i> Birth-place <i>Maidstone</i>	
Number of children including this one living <i>7</i> dead <i>1</i> Still-born <i>—</i>		Number of children including this one living <i>1</i> dead <i>—</i> Still-born <i>—</i>		Number of children including this one living <i>4</i> dead <i>1</i> Still-born <i>0</i>	
Occupation, if other than household duties <i>Lafond</i>		Occupation, if other than household duties <i>Burke</i>		Occupation, if other than household duties <i>Dunn</i>	
Name of Informant <i>David LaFond</i>		Name of Informant <i>William R. Burke</i>		Name of Informant <i>Mrs. Thos. Dunn</i>	
Address <i>Jacksons. Corners</i>		Address <i>Jacksons. Corners</i>		Address <i>Maidstone</i>	
Name of Physician in attendance <i>Dr. D. McLaughlin</i>		Name of Physician in attendance <i>Dr. C. C. Richardson</i>		Name of Physician in attendance <i>Dr. J. D. McDonald</i>	
Did physician give notice of this birth? <i>Yes</i> Date of receipt by D. R. <i>Jan. 7/21</i>		Did physician give notice of this birth? <i>No</i> Date of receipt by D. R. <i>—</i>		Did physician give notice of this birth? <i>Yes</i> Date of receipt by D. R. <i>Jan. 28/21</i>	

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

November 19*20**John McAuliffe* D. R.Address *Maidstone*

THIS SPACE TO BE RESERVED FOR BINDING

BIRTHS

Division of

Sandwich South

County of

Essex

No. 25

Municipality

Sand South

Street and Number
or Con. and Lot
(If in hospital, give name instead of street)

Surname Dumouchelle

Given names in full Pauline Evelyn

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

Date of Birth August 27th 1920

Full name Edward Dumouchelle

Usual residence Jackson Corners Age last birthday 29

Racial origin French Birth-place Windsor

Trade or Profession Farmer

Kind of industry or business in which employed

Full maiden name Lillian Lafoire

Usual residence Jackson Corners Age last birthday 30

Racial origin French Birth-place Secumseh

Number of children including this one living 2 dead 0 Still-born 0

Occupation, if other than household duties Dumouchelle

Name of Informant Ed. Dumouchelle

Address Jackson Corners

Name of Physician in attendance Dr. Morand

Did physician give notice of this birth? Yes Date of receipt by D. R. Sept. 4th 1920

No. 28

County Essex Municipality Sand South

Street and Number or Con. and Lot (If in hospital, give name instead of street)

Surname Libby

Given names in full Norman Robert

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

Date of Birth March 3rd 1920

Full name Benjamin Robert Libby

Usual residence Paquette Age last birthday 41

Racial origin English Birth-place Paquette

Trade or Profession Farmer

Kind of industry or business in which employed Farming

Full maiden name Mabel Beatrice O'Neil

Usual residence Paquette Age last birthday 37

Racial origin Irish Birth-place Paquette

Number of children including this one living 6 dead 1 Still-born 0

Occupation, if other than household duties Libby

Name of Informant Mrs. Mabel B. Libby

Address Paquette

Name of Physician in attendance Dr. Geo. Rogers

Did physician give notice of this birth? No Date of receipt by D. R.

No. 26

County Essex Municipality Sand South

Street and Number or Con. and Lot (If in hospital, give name instead of street)

Surname Lounsborough

Given names in full Jessie Reuben

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

Date of Birth Aug. 10th 1920

Full name Edward Lounsborough

Usual residence Sandwich South Age last birthday 35

Racial origin English Birth-place Andover

Trade or Profession Farmer

Kind of industry or business in which employed Farming

Full maiden name Leta Fern Plumb

Usual residence Sandwich South Age last birthday 28

Racial origin English Birth-place Wheatley

Number of children including this one living 3 dead 0 Still-born 0

Occupation, if other than household duties Lounsborough

Name of Informant Edw. Lounsborough

Address Paquette Sta.

Name of Physician in attendance Dr. Rogers

Did physician give notice of this birth? Yes Date of receipt by D. R. Sept. 10th 1920

No. 29

County Essex Municipality Sand South

Street and Number or Con. and Lot (If in hospital, give name instead of street)

Surname O'Neil

Given names in full Wilfred Joseph

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

Date of Birth Sept. 17th 1920

Full name Gordon F. O'Neil

Usual residence Sandwich South Age last birthday 24

Racial origin Irish Birth-place Sand South

Trade or Profession Farmer

Kind of industry or business in which employed Farming

Full maiden name Sylvia A. Deslippe

Usual residence Sandwich South Age last birthday 21

Racial origin French & English Birth-place Colchester North Sp.

Number of children including this one living 2 dead 0 Still-born 0

Occupation, if other than household duties O'Neil

Name of Informant Mrs. Louis Deslippe

Address Maidstone

Name of Physician in attendance T. A. McCormick

Did physician give notice of this birth? Yes Date of receipt by D. R. Sept. 19th

No. 27

County Essex Municipality Sand South

Street and Number or Con. and Lot (If in hospital, give name instead of street)

Surname Benoit

Given names in full Mary

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

Date of Birth Sept. 4th 1920

Full name

Usual residence

Racial origin

Trade or Profession

Kind of industry or business in which employed

Full maiden name Leah Benoit

Usual residence Sandwich South Age last birthday 19

Racial origin French Birth-place Delbury Wash.

Number of children including this one living 1 dead 0 Still-born 0

Occupation, if other than household duties Benoit

Name of Informant Elmer Benoit (father of girl)

Address Maidstone R.R. No. 3

Name of Physician in attendance Dr. MacDonald

Did physician give notice of this birth? Yes Date of receipt by D. R. Sept. 6th 1920

No. 30

County Essex Municipality Sandwich S.

Street and Number or Con. and Lot (If in hospital, give name instead of street)

Surname Shepley

Given names in full Mabel Francis

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

Date of Birth Sept. 1st 1920

Full name William Arthur Shepley

Usual residence Sand. South Age last birthday 38

Racial origin German & Scotch Birth-place Colchester North Sp.

Trade or Profession

Kind of industry or business in which employed Farming

Full maiden name Wilfred Stevenson

Usual residence Sand. South Age last birthday 35

Racial origin Irish Birth-place Maidstone

Number of children including this one living 6 dead 2 Still-born 0

Occupation, if other than household duties Shepley

Name of Informant William A. Shepley

Address Paquette R.R. No. 1

Name of Physician in attendance Dr. Geo. Rogers

Did physician give notice of this birth? No Date of receipt by D. R.

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

19

D. R.

THIS SPACE TO BE RESERVED FOR BINDING