

RETURN OF A BIRTH.

State of Illinois, }

COOK COUNTY.

The Physician, Accoucheur or person in attendance should immediately return this Certificate, accurately filled out, to the **County Clerk.** Penalty \$10.00, if not so certified and returned within thirty days.

VITAL STATISTICS DEPARTMENT, COUNTY CLERK'S OFFICE.

1. *Full Name of Child (if any) _____

2. Sex Female Race or Color (if not of the white race) _____

3. Number of Child of this Mother 1st

4. Date of this Birth Dec 18th 1890

5. †Place of Birth, No. 1529 Lyngton Ave Street 12th Town Ward.

6. Residence of Mother, " " " " " "

7. Nationality: Place of Birth: Age of:

a. Father	<u>United States</u>	<u>Plattsburg N.Y.</u>	<u>48 years</u>
b. Mother	<u>" "</u>	<u>Sparta Ill</u>	<u>32</u>

8. Full Name of Mother Anna Ayres

9. Maiden Name of Mother Anna Farnam

10. Full Name of Father Nobert Ayres

11. Occupation of Father Manufacturer of ladders

12. Name and Address of other Attendants, if any Bridget Donagan 12th St. Albany

Dated Jan 16 1891 Returned by P. J. Ayres } M. D.
 Residence 1334 W. Van Buren } Midwife.

* The given name of the child should be certified, if possible, when this Certificate is made, and should in any case, be certified and registered within a year.

† City, number, street and ward; same in towns that have them; township or precinct.