

RETURN OF A BIRTH.

To the Office of Registrar of Vital Statistics, Board of Health.

BALTIMORE CITY.

No. of Child of Mother (state whether 1st, 2d, 3d, &c.) 1st

Sex (state whether Male or Female) Male

Race or Color (if not of the white race)

Date of Birth 31st of May 76

Place of Birth (Street and Number) 326 W. Bay Street

Full Name of Mother Clara Maria Russell

Mother's Maiden Name Bauer

Mother's Birthplace

Full Name of Father James C. Russell

Father's Occupation Post Lexington Street

Father's Birthplace Howard County Maryland

Name of Medical Attendant, or other Person who makes this Return W. H. H. H. H. H.

Address 120 Pearl St

Remarks

