

1919 ~ Lillian Miga ~ Registered Birth in Medford MA

R-2

1 PLACE OF BIRTH

The Commonwealth of Massachusetts
OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

384

County of Middlesex

CANVASSER'S RETURN OF A BIRTH

(To be used for making returns of births, obtained by canvasser and *not* previously recorded)

City or Town of Medford

Registered No. 672

No. 281 Riverside Avenue St. 7 Ward
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2 FULL NAME OF CHILD LILLIAN MIGA { If child is not yet named, make supplemental report, as directed

3 Sex of Child <u>F.</u>	4 Twin, triplet, or other? (To be answered only in event of plural births)	4a Number in order of birth	5 Born alive or still-born <u>Alive</u>	6 Date of birth <u>July 23, 1918</u> (Month) (Day) (Year)
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7 FULL NAME FATHER
Andrew Miga

8 FULL MAIDEN NAME MOTHER
Anna Krovitsky

9 RESIDENCE No. 281, Riverside Ave. St. 7
(At time the birth occurred)
Medford, Mass.
(City or town)

10 RESIDENCE No. 281 Riverside Ave. St. 7
(At time the birth occurred)
Medford, Mass.
(City or town)

11 COLOR White

12 AGE AT LAST BIRTHDAY 42 YEARS
(At time the birth occurred)

13 COLOR White

14 AGE AT LAST BIRTHDAY 32 YEARS
(At time the birth occurred)

15 BIRTHPLACE Kanisio, Austria
(City or town) (State or country)

16 BIRTHPLACE Dolhunia, Austria
(City or town) (State or country)

17 OCCUPATION (At time the birth occurred) Mill worker

18 OCCUPATION (At time the birth occurred) Housewife

19 Attendant at birth Mrs. Krovitsky
~~Physician or midwife~~ Mother
Address No. _____ St. _____
City or town Medford, Mass.

20 Informant Mrs. Anna Miga
Address No. 281, Riverside Ave. St. _____
City or town of Medford, Mass.
Relationship to child, if any Mother

Did above-named personally attend the birth? yes
(Yes or No)

21 Name of canvasser M. A. Joyce

22 Filed Feb. 10, 1919
(Month) (Day) (Year)

Date return was obtained Feb. 1, 1919
(Month) (Day) (Year)

Charles A. Wislow
REGISTRAR

N.B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each, in order of birth, stated.

10-18, 10,000.