

RETURN OF A BIRTH—(To the Board of Health of the City of Cleveland.)

1890

Date of Birth: *Sept 15* 18*90* Sex *F* Color *W*

Nativity of Mother *U.S.* Age *24* Color *W*

Nativity of Father *U.S.* Age *26* Color *W*

Place of Birth (of child) No. *303 Lake* Street.

Full name of Mother *Lilly (Winger) Beckenbach*

Full name of Father *Albert Beckenbach*

Name of Medical Attendant or Midwife *S. W. Kelley*

Residence of same *837 Super St.*

Filed in Order