

CITY OF NEW YORK.

STATE OF NEW YORK.

No. of Certificate,

## CERTIFICATE AND RECORD OF BIRTH

4148

Name of Child, ..... *Margaret E. Donnelly*

Name and address of person making this report } Signature, ..... *A. A. Bliss, M.D.*

Residence, ..... *350 Eleventh St*

DATE OF REPORT, ..... 189

Name.	Sex.	Color.	Date of Birth.	Place of Birth.	Residence.	Birthplace.	Age.	Occupation.	Mother's Name.	Mother's Name before Marriage.	Residence.	Birthplace.	Age.	How many now living (in all).	Date of Record.
<i>Margaret E. Donnelly</i>	<i>Female</i>	<i>White</i>	<i>March, 18<sup>th</sup> 1902</i>	<i>310 a 22nd St.</i>	<i>John Donnelly</i>	<i>Broadway</i>	<i>30 yrs</i>	<i>Bar tender</i>	<i>Maggie Donnelly</i>	<i>Maggie Pelerson</i>	<i>310 a 22nd St -</i>	<i>New York City</i>	<i>18 yrs</i>	<i>None</i>	