

Smearred Ink

SCHEDULE A.-BIRTHS.

County of Dubuq & Hay Run

Division of Nat. Policy

No. 31 001162	No. 32 001163	No. 33 001164
When Born. 16 th March 1896	19 th Dec 1895	10 th Dec 1895
Name. Eva Rosetta Martinson	Florence Mayant Cochran	Georgie William Tennant
Sex-Male or Female. Female	Female	Male
Name and Surname of Father. Olin Martinson	John Cochran	Georg M. Tennant
Name and Maiden Surname of Mother. Anna Martin	Bathia Mayant Cochran	Kate Tennant
Rank or Profession of Father. Laborer	Laborer	Miner
Signature, Description and Residence of Informant. Olin Martinson	John Cochran	Georg M. Tennant
When Registered. 28 th March 1896	1 st April 1896	2 April 1896
Name of Accoucher. S. Edmondson	S. Edmondson	S. Edmondson
Signature of Registrar. M. Kent Ryle & Co.	M. Kent Ryle & Co.	M. Kent Ryle & Co.
REMARKS.		

No. 34 001165	No. 35 001166	No. 36 001167
When Born. 11 March 1896	21 March 1896	28 th July 1896
Name. John Baptist Belanger	Angie Graham	Anna Horvath
Sex-Male or Female. Male	Female	Male
Name and Surname of Father. Joseph Belanger	John Graham	Georg Horvath
Name and Maiden Surname of Mother. Adelaide Belanger	Emma Agnes Graham	Emma Horvath
Rank or Profession of Father. Laborer	Carpenter	Lumberman
Signature, Description and Residence of Informant. Mr. Kellen	John Graham	Anna Horvath
When Registered. 4 April 1896	4 April 1896	4 th April 1896
Name of Accoucher. S. Edmondson	S. Edmondson	S. Edmondson
Signature of Registrar. M. Kent Ryle & Co.	M. Kent Ryle & Co.	M. Kent Ryle & Co.
REMARKS.		

SCHEDULE A.-BIRTHS.

County of Dubuq & Hay Run

Division of Nat. Policy

No. 37 001168	No. 38 001169	No. 39 001170
When Born. 4 th January 1896	25 March 1896	3 rd Dec 1895
Name. Amy Abnera Horvath	Thyia Abu Graham	Georgie Cantan
Sex-Male or Female. Female	Female	Female
Name and Surname of Father. Eastes Horvath	Thomas Graham	John Cantan
Name and Maiden Surname of Mother. Emma Horvath	Abu Jan Graham	Maya Cantan
Rank or Profession of Father. Lumberman	Laborer	Barber
Signature, Description and Residence of Informant. Anna Horvath	Thomas Graham	John Cantan
When Registered. 4 April 1896	6 April 1896	6 April 1896
Name of Accoucher. S. Edmondson	S. Edmondson	S. Edmondson
Signature of Registrar. M. Kent Ryle & Co.	M. Kent Ryle & Co.	M. Kent Ryle & Co.
REMARKS.		

No. 40 001171	No. 41 001172	No. 42 001173
When Born. 13 th January 1896	28 th July 1896	11 March 1896
Name. Laura Cantan	William Park	Kath. Verby Constante Keltan
Sex-Male or Female. Female	Male	Female
Name and Surname of Father. John Cantan	John Robert Park	Ab. H. Keltan
Name and Maiden Surname of Mother. Maya Cantan	Keriah Park	Kelma Rebecca Keltan
Rank or Profession of Father. Barber	Laborer	Clergyman
Signature, Description and Residence of Informant. John Cantan	Mr. Georg Bremer Murray, Oregon.	Ab. H. Keltan
When Registered. 6 April 1896	8 th April 1896	10 th April 1896
Name of Accoucher. S. Edmondson	S. Edmondson	S. Edmondson
Signature of Registrar. M. Kent Ryle & Co.	M. Kent Ryle & Co.	M. Kent Ryle & Co.
REMARKS.		

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the half-year ending 30 Dec 1896
 Given under my hand, this 1st day of Jan A.D. 1896
 M. Kent Ryle
 Division Registrar of Nat. Policy.

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the half-year ending 30 Dec 1896
 Given under my hand, this 1st day of Jan A.D. 1896
 M. Kent Ryle
 Division Registrar of Nat. Policy.

SCHEDULE A.

District Count of Rainy River

No.	NAME	Sex M. or F.	DATE OF BIRTH.		NAME OF FATHER.	MAIDEN NAME OF MOTHER.
			Month.	Year.		
	Surname First:					
X	Mary Madeline	F	Nov 30 th	1899	Calder Robert	Jourdain Mary
X	Marie Valanda	F	Oct 8 th	1899	Villeneuve Louis	Cyr Alphonse
X	Joseph Norbert Phoebe Isabel Name (Not Given)	M	Jan 21 st	1900	Godin Joseph Norbert	Morrison Mary
X	Joseph Edward Miles	M	" 28 th	1900	Barr Jas C	Wilson Ann G.
X	Joseph Patrick Roydgen	M	March 10 th	1900	Lyons, John Henry	Jourdain Rosella
X	Joseph Patrick Roydgen	M	" 3 rd	1900	O'Connell Patrick	Kerr Mary Jane
X	Maggi (Illegitimate)	F	May 21 st	1900	Unknown	- - -
X	Joseph Victor Duncan	M	" 23 rd	1900	Gendreau Gustavus	Maggi
X	Grace Scabella	F	June 10 th	1900	Harris Duncan	Grant Helen
		F	" 25 th	1900	Pearce Geo H	Troks Rose Elizabeth

I hereby certify the foregoing to be the true and correct
 Given under my hand this 30th day of

Rainy River

Count

SCHEDULE A.

of

No.	NAME	SEX M. or F.	DATE OF BIRTH		NAME OF FATHER	MAIDEN NAME OF MOTHER
			Month.	Year.		
1	Bartley Velma Jeanne	F.	June	1903	Albert Bartley	Anna Burke
2	McPherson Jane Mary	F.	July	5 1903	Roderick M. Pherson	Mary Jane Jordan
3	Blanchard Louis Mildred	F.	July	19 1903	Fred. Blanchard	Emily Knox
4	Johnson Walla Hubert	M.	July	13 1903	W. G. Johnson	Alice Land
5	Walker Ruth Elizabeth	F.	June	7 1903	W. H. Walker	Elizabeth St. Pierre
6	Mosher Grace ELWIN	F.	Aug	25 1903	Rufus Mosher	Maria McDonald
7	Williams Edwin Peacock	M.	Sept	16 1903	Hubert Williams	Agnus Sara Lucas
8	Tobey Vera Mildred	F.	Sept	14 1903	Simon Tobey	Emma Manary
9	Harley Wm John	M.	Sept	11 1903	Thomas Harley	Emma M. Tapan
10	Breckon Gordon Albert	M.	Aug	13 1903	W. G. Breckon	Lille Traut
11	Fremette Marie Philomine	F.	Nov	12 1903	Hilouin Fremette	Josephine Aubi
12	O'Keefe Markell Margaret	F.	Nov	19 1903	C. J. O'Keefe	Mary Kelly
13	Pierson Joseph Eustache	M.	Nov	21 1903	J. J. Pierson	Maria Asselin
14	Stewart Archie	M.	Dec	19 1903	F. J. Stewart	Laura Clifford
15	Carrison Susan Henry Wilson	F.	Dec	25 1903	Wm B Carrison	Mary Wilson Atkin

I hereby certify the foregoing to be the true and correct
 Given under my hand this First day of

502567

(For use of Registrar-General only)

PROVINCE OF ONTARIO
REGISTRATION OF BIRTHS NOT RECORDED WITHIN ONE YEAR
THE VITAL STATISTICS ACT

DELAYED STATEMENT OF BIRTH

Full Name of Child **BRUYERE LOUIS LEOPOLD**
Last Name First Name
Date of Birth **JULY 26 1893** Sex **MALE**
Month Day Year
Place of Birth **FORT FRANCES M'IRVINE RAINY RIVER**
City, Town, Village or Township County DIST

If in hospital or institution, give name

FATHER: **BRUYERE** (Last Name), **ALEX** (First Name), Birthplace **MANITOBA**
MOTHER: **CALDER** (Last Name), **MARY ANNE** (First Name), Birthplace **FORT FRANCES, ONT**

I certify the foregoing to be true and correct to the best of my knowledge and belief.

Given under my hand at **FORT FRANCES**, this **28** day of **MARCH 1960**

Louis Leopold Bruyere
Signature of Informant

This space for use of Registrar-General only

I REGISTER THE BIRTH BY SIGNING THIS STATEMENT

this **6th** day of **April** 19**60** at **Toronto, Ontario**

D.R.B. AUTHORITY R.S.O. 1959
CHAPT. 412 & 9
DATE **APR - 6 1960** CLERK

J. Males
Deputy Registrar-General
SUPERVISOR OF DELAYED REGISTRATIONS

000713

EVIDENCE NO.

D.R.B. File #

NOTE: Form 5 on reverse side must be completed.

PROVINCE OF ONTARIO
THE VITAL STATISTICS ACT
STATEMENT OF BIRTH

501673
(For use of Registrar-General only)

1. PLACE OF BIRTH:
City, Town or Village of FORT FRANCES Street Address _____
(If birth took place in a hospital or other institution, state the name thereof)

Township of ALBERTON County or Territorial District of RAINY RIVER

2. PRINT NAME OF CHILD IN FULL
BRUYERE (Surname)
MAURICE NOAMAN (Given names)

3. SEX MALE
(Write male or female)
4. (1) Single Twin Triplet Other (2) If "OTHER" state the number _____
(Place X in the proper square)
(3) If a twin, triplet or other, state whether the child was born first, second, third, et cetera

5. DATE OF BIRTH JULY 5 1971
(Month by name) (Day) (Year)

6. THE MOTHER OF THE CHILD IS :
Single Married Widowed Divorced
(Place X in the proper square)
7. WAS THE BIRTH PREMATURE? _____
8. IF PREMATURE STATE LENGTH OF PREGNANCY IN WEEKS _____

(Before completing items 9 to 15, both inclusive, read note 1.)
9. PRINT NAME IN FULL
BRUYERE (Surname)
ALEXANDRE (Given names)

10. PERMANENT ADDRESS _____
(Street address if any)
FORT FRANCES
(Township or Municipality)

11. CITIZENSHIP TREATY INDIAN
(See note 2)

12. RACIAL ORIGIN N.A. INDIAN
(See note 2)

13. AGE _____
(At time of this birth)

14. PLACE OF BIRTH MANITOBA
(Province, State or Country)

15. OCCUPATION (1) TRADE, PROFESSION OR KIND OF WORK DECEASED
(See note 4)
(2) TYPE OF INDUSTRY OR BUSINESS _____
(See note 5)

MOTHER
16. PRINT MAIDEN NAME IN FULL
CALDERA (Surname)
MARIA (Given names)

17. PERMANENT ADDRESS _____
(Street address if any)
FORT FRANCES
(Township or Municipality)

18. CITIZENSHIP TREATY INDIAN
(See note 2)

19. RACIAL ORIGIN N.A. INDIAN
(See note 2)

20. AGE 35
(At time of this birth)

21. PLACE OF BIRTH MANITOBA
(Province, State or Country)

22. OCCUPATION (1) TRADE, PROFESSION OR KIND OF WORK DECEASED
(See note 6)
(2) TYPE OF INDUSTRY OR BUSINESS _____
(See note 7)

23. HOW MANY CHILDREN BORN TO THIS MOTHER BEFORE THIS BIRTH:
(a) were born alive? 7 (b) are now living? 3
(c) were born dead after the mother was pregnant at least 28 weeks? _____

24. MEDICAL PRACTITIONER OR NURSE IN ATTENDANCE AT THIS BIRTH
NONE IN ATTENDANCE
(Surname) (Given name or initials)

(Post-office address)

(See note 8)

I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF ITEMS 1 TO 24, BOTH INCLUSIVE, ARE TRUE AND CORRECT.

RAINY LAKE (Post-office address) JUNE 11 1953
(Month by name) (Day) (Year)
Gabriel Bruyere (Signature)

(This space for use of division registrar only)

REGISTRATION NUMBER 170 002040

I am satisfied as to the correctness and sufficiency of this statement and register the birth by signing the statement this JUN 25 1953 11 1953
(Month by name) (Day) (Year)

D. R. S. NO. _____
AUTHORITY V.S.A. 1948 S. 2
DATE JUN 25 1953

[Signature]
(Signature of division registrar)
456021
(Code number)
H. J. C. Thompson
DEPUTY REGISTRAR-GENERAL

SPECIAL NOTICE: This Statement of Birth is not registration for Family Allowances. If you wish Family Allowances they must be applied for on a Family Allowances Form obtainable at any Post Office.

Schedule A.

Record all still-births as births, as well as deaths.

BIRTHS

County of Ross Division of Fort Frances

	No. 7	No. 8	No. 9
Name	1 Koweler Madeline Cecilia	Thompson Edith Reid	Caughy Albert (R) Victor ^{Russell}
Sex	2 Female	Female	male ✓
Date of Birth	3 June 17 07	July 11 07	June 17 07
Name of Father	4 Edward P. Koweler	Wm. B. Thompson	Wm. Caughy
Maiden Name of Mother	5 Mary A. Driscoll	Jean Reid	Lillian C. Detall
Residence of Father	6 Fort Frances	Fort Frances	Fort Frances
Occupation of Father	7 Cook	Carpenter	Farmer
Name of Physician in attendance	8 Dr. McKenzie	Dr. Moore	Dr. Moore
Name of Person making Return	9 E. P. Koweler	Wm. B. Thompson	Mrs. Wm. Caughy
Address of Person making Return	10 Fort Frances	Fort Frances	Fort Frances
Date of Registration	11 July 11	July 25	Aug. 24. 1907
REMARKS	Under remarks state whether Birth is Twin, Triplet, Illegitimate or Still-Birth. Levin ✓ other on Page 4224 040233	040234	040235
	No. 10	No. 11	No. 12
Name	1 MCGREGOR BERTHA MAY (Martin) (Annie)	Lucas George Wallis	Nolan Mary Ellen
Sex	2 Female	male	Female ✓
Date of Birth	3 Aug 12 07	Aug 28 07	Sept. 28. 07
Name of Father	4 Albert Martin	George Lucas	Charles H. Nolan
Maiden Name of Mother	5 Gusta Pederson	Jennie Hatch	Ellen Dewlin
Residence of Father	6 Fort Frances	Fort Frances	Fort Frances
Occupation of Father	7 Foreman	Carpenter	Engineer
Name of Physician in attendance	8 Dr. Moore	Dr. Moore	Dr. McKenzie
Name of Person making Return	9 Albert Martin	George Lucas	Charles Nolan
Address of Person making Return	10 Fort Frances	Fort Frances	Fort Frances
Date of Registration	11 Aug 28	Sept. 16.	Oct 21.
REMARKS	Under remarks state whether Birth is Twin, Triplet, Illegitimate or Still-Birth. changed to Martin Annie Bertha May as per declaration of Robert H. Fryer adopted father, dated Nov 1907. Dec 7 1907. <i>Chas. H. Fryer</i> 040236	040237	040238

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the half year ending Given under my hand this day of A.D. 190

Division Registrar of

SCHEDULE A - BIRTHS.

County of

Division of

When Born.	MARCH 22 nd 1887 (March 2 nd 1887)	26 th Dec 1886	Jan'y 22 1887
Name.	Alexander	Nancy Stewart	Richard
Sex - Male or Female.	Male	Female	Male
Name and Surname of Father.	Hugh Montgomery	Robert Fraser	James Kenney
Name and Maiden Surname of Mother.	Margaret Blair	Ann Cochran	Christina Horne
Rank or Profession of Father.	Farmer	Farmer	Farmer
Signature, Description and Residence of Informant.	the assessor Sp of Alice	the assessor Sp of Alice	the assessor Sp of Alice
When Registered.	May 1st 1887	May 1st 1887	May 1st 1887
Name of Accoucher.	Mrs Blair	Mrs B. Martin	Mrs Ann Cairns
Signature of Registrar.	J M Kennedy	J M Kennedy	J M Kennedy
REMARKS.	DEATH BY CELL, FAMILY BILL RECORDED IN RECORD ENTERED BY J. M. KENNEDY CORR. FILE NO. 23556		

When Born.	March 14 th 1887	19 th Dec 1886	July 4 th 1887
Name.	Mary Leison	Annie	Julia
Sex - Male or Female.	Female	Female	Female
Name and Surname of Father.	Charles Gars	Duncan Mc Gregor	James Dunlop
Name and Maiden Surname of Mother.	Alvena Cutler	Annie Mc Kullin	Margaret Ann Gars
Rank or Profession of Father.	Farmer	Farmer	Farmer
Signature, Description and Residence of Informant.	the assessor Sp of Alice	the assessor Sp of Alice	the assessor Sp of Alice
When Registered.	May 1st 1887	May 1st 1887	May 1st 1887
Name of Accoucher.	Mrs Lindeman	Mrs Hayworth	Mrs Brown
Signature of Registrar.	J M Kennedy	J M Kennedy	J M Kennedy
REMARKS.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the half-year ending
 Given under my hand, this _____ day of _____ A.D. 1887
 Division Registrar of _____

SCHEDULE A - BIRTHS.

County of

Division of

When Born.	May 22 nd 1887	July 20 th 1887	June 13 1887
Name.	Albert Richard	Samuel	Agnes Elizabeth
Sex - Male or Female.	Male	Male	Female
Name and Surname of Father.	Richard McConell	Frederick Schoutz	Robert Laylor
Name and Maiden Surname of Mother.	Elizabeth Poff	Emilia Kerler	Elizabeth Swelwell
Rank or Profession of Father.	Farmer	Farmer	Farmer
Signature, Description and Residence of Informant.	by letter from R McConell Sp of Alice	Fred Schoutz Sp of Alice	Robt Laylor Sp of Alice
When Registered.	June 1st 1887	June 11 th 1887	July 15 th 1887
Name of Accoucher.	Mrs J Swigger		Mrs Blair
Signature of Registrar.	J M Kennedy	J M Kennedy	J M Kennedy
REMARKS.			

When Born.	Dec 14 th 1886	May 15 th 1887	19 th May 1887
Name.	Mary	Albert Arthur	Jules Albert
Sex - Male or Female.	Female	Male	Male
Name and Surname of Father.	Ernest Schoutz	Charles Broom	Joseph Weinholtz
Name and Maiden Surname of Mother.	Sophia Kerler	Menie Wagner	Birthing Hass
Rank or Profession of Father.	Farmer	Farmer	Farmer
Signature, Description and Residence of Informant.	Ernest Schoutz Sp of Alice	Chas Broom Sp of Alice	Jus Weinholtz Sp of Alice
When Registered.	June 11 th 1887	July 9 th 1887	May 23 rd 1887
Name of Accoucher.		Mrs Broom	Mrs Keintshell
Signature of Registrar.	J M Kennedy	J M Kennedy	J M Kennedy
REMARKS.			

I hereby certify the foregoing to be the true and correct entries of all Births returned to me for the half-year ending
 Given under my hand, this _____ day of _____ A.D. 1887
 Division Registrar of _____

SCHEDULE A.

District Court of Ramsey County

No.	NAME	SEX M. or F.	DATE OF BIRTH.		NAME OF FATHER.	MAIDEN NAME OF MOTHER.
			Month.	Year.		
83	Abbott	F.	27 Aug	1898	S. G. Abbott	Abbott
84	Sunder Norman Wray	M	30 July	1	John H. Sunder	May Sunder
85	Santer (Anna La - Holt) ELVERA GRACE	F.	16 July	-	Edward Santer	Christina Santer
86	Shaw Isabelle	F.	21 Aug	-	William A. Shaw	Amanda Nelson
87	Patterson (Isabella) Chomus	F.	2 Aug	-	John (Patterson)	Ellen Clark
88	Elliott Marguerite	F.	27 July	-	Thomas Elliott	McKitchie Margaret J. Elliott
89	Bartin Marjory Cecilia	F.	30 Aug	-	Clifford Martin	May Martin
90	Engelst Fay	F.	27 Aug	-	Robert Engelst	Lois Engelst
91	Mallink Katina Emma	F.	27	-	S. J. Mallink	K. Mallink
92	Martin Carl Kerul	M	29	-	Thomas Martin	Alie Martin
93	Archibald P. Clark	M	22 April	-	John L. Archibald	Isobel Archibald
94	Johnson Augusta Selma	F.	30 Aug	-	Andrew Johnson	Alvada Johnson
95	Kelly Florence Gertrude	F.	14 July	-	Derry Kelly	May Kelly
96	May J. Joseph Albert	M	16 Sep	-	John J. May	Francis Jane May
97	Kop Ernest Clifford	M	30 May	1898	F. W. Kop.	Emily Kop
98	McLain Matilda	F.	17 April	-	George McLain	Jean McLain
99	Mitt Annie	F.	18 April	-	Joseph Mitt	Margaret McLain
100	Hawthorn Alexander	M	10 Sep	-	Alexander Wade Hawthorn	Jane Hawthorn
101	Ap John Edmund	F.	10 July	-	Frank J. Ap John	Agnes Ap John
102	Buck Earl Mademo	M	26 Sep	-	Robert Mademo Buck	Agnes Jane Buck
103	Allanson Ethel Ellen JANE	F.	25	-	James Allanson	Alie Bennett
104	Swanson James Charles Albin	M	30 Sep	-	Peter Swanson	Jane Swanson
105	Robertson Augustina	F.	29 Sep	-	August Robertson	Christina Robertson
106	Smith	M.	18 May	-	William John Smith	Agnes Bee May Smith
107	Bunay Leshu Ann	M	4 Sep	-	William H. Bunay	Gertrude Bunay
108	Lay	F.	21 Oct	-	John Lay	Lay
109	Day Thomas European	M	10 Oct	-	Frank Day	Annie May Day

I hereby certify the foregoing to be the true and correct
 Given under my hand this second day of

502303

(For use of Registrar-General only)

IMPORTANT
PLEASE ATTACH THIS LABEL TO CORRESPONDENCE WHEN
WRITING TO THE REGISTRAR GENERAL.
File reference 56147

AJW

PROVINCE OF ONTARIO
THE VITAL STATISTICS ACT

DELAYED STATEMENT OF BIRTH

Full Name of Child SWANSON JOHN HENRY
Last Name First Name

Date of Birth SEPTEMBER 3 1898 Sex MALE
Month Day Year

Place of Birth PINEWOOD RAINY RIVER
City, Town, Village or Township County District

If in hospital or institution, give name AT HOME

PRINT NAME IN FULL

FATHER

MOTHER

SWANSON
Last Name

TATIANA COMEGE COOK
Last Name

GEORGE
First Name

ANNIE
First Name

Birthplace YORK FACTORY (MANITOBA) Birthplace UNKNOWN

I certify the foregoing to be true and correct to the best of my knowledge and belief.

Given under my hand at PORT ARTHUR this 31st day of OCT 1963.

[Signature]
Signature of Informant

This space for use of Registrar-General only

I REGISTER THE BIRTH BY SIGNING THIS STATEMENT

this day of DEC 16 1963 19 at Toronto, Ontario.

AUTHORITY O.C. 1960
DATE DEC 16 1963 CLERK [Signature]

[Signature]
Deputy Registrar-General
SUPERVISOR OF DELAYED REGISTRATIONS

002262

EVIDENCE NO.

D.R.B. File #

NOTE: Form 5 on reverse side must be completed.