

USE INK AND WRITE PLAINLY

Certificate and Record of Birth.

1107

will be received.

Name of child Irish Goodchild (In full if possible.)
 Sex female Color White Date of birth February 26 1915
 Place of birth 119 Monroe St Hoboken (If in city, give name, street and number; if not, give township and county.)
 Name of father Edward Goodchild (If out of wedlock, write O. W.) Father's birthplace New York
 Maiden name of mother Josephine Walsh Mother's birthplace New York
 Age of mother 20 Occupation of mother Housewife What preventive (or ophthalmia neonatorum) did you use? If none state the reason therefor not used
 Age of father 28 Occupation of father same
 Number of children in all by this marriage one Number of children now living one
 Name and P. O. address of professional attendant in own handwriting:
G. W. Kiesel
 (Signature of professional attendant.)
 Date of this report Feb 28/15 P. O. address: Hoboken

STATE REGISTRAR OF VITAL STATISTICS, TRENTON 25, N. J.
 REQUEST FOR CORRECTION OR ADDITION TO ORIGINAL RECORD OF BIRTH, MARRIAGE OR DEATH

Name/s on Original Record ----- Goodchild

Date of Birth <input checked="" type="checkbox"/>	Marriage <input type="checkbox"/>	Death <input type="checkbox"/>	(month) <u>Feb.</u> (day) <u>26</u> (year) <u>1915</u>	Place of Birth <input checked="" type="checkbox"/>	Marriage <input type="checkbox"/>	Death <input type="checkbox"/>	(city or township) <u>Hoboken, Hudson</u> (county)
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ITEMS TO BE AMENDED

Item Omitted or in Error	As Item Now Appears	As Item Should Appear
FIRST NAME	Not Stated	Florence

How do you know such information is correct?
 Your relationship to person whose certificate is incorrect? _____ Your age _____
 Your Address _____ Your Signature _____
 Witness' Address _____ Witness' Signature _____
 Date _____

Florence Goodchild being duly sworn, says that (s)he has knowledge of the facts concerning this event, and that all information shown in Section 1 is true and correct.
 Signature of Affiant Florence Goodchild Age 18 Relationship Per Se.
 Address 86 Wildcat Road Franklin N.J.
 Subscribed and sworn to before me at Hoboken, N.J. this 27 day of July 1915
 Signed Lucille B. Thompson Notary Public
 NOTARY PUBLIC OF NEW JERSEY
 My commission expires APRIL 29, 1920

Notation of Documentary Evidence: Certificate of Baptism St. Joseph's Church Hoboken dated 9/6/1921 showing name as Florence Goodchild, 2/26/15
 Examined by Registrar baptized 3/21/15

App. on Form 4-1-15. Use only with Unaffiliated Ink. This is a Permanent Record.