

Dist. No. 280  
 PLACE OF BIRTH (To be inserted by Registrar)

County Montgomery  
 Township Montgomery  
 Village or **FOR GENEOLOGICAL RESEARCH ONLY**

**NEW YORK**  
 DEPARTMENT OF HEALTH  
 DIVISION OF VITAL STATISTICS  
 AMENDMENT  
 FILED JUN 4 1929  
 JVD BY JFD

CERTIFICATE OF BIRTH  
 18598

City Brooklyn No. 41, Milton Ave Registered No. 175

2 Full name of child Robert Adolf, Frederick Bieja Ward 7  
 (If birth occurred in a hospital or institution, give the name of the same)  
 (If child is not yet named, make supplemental report, as directed)

3 Sex of child Male 4 Twin, triplet or other None 6 Legitimate? Yes 7 Date of birth March 7 1929  
 (ONLY in case of plural births) (Month) (Day) (Year)

8 Full name FATHER: RICHARD BIEJA MOTHER ESTHER BIEJA

9 Residence (Usual place of abode) 41, Milton 14 Full maiden name Mary Wagner  
 (If non-resident, give place and State)

10 Color or race White 11 Age at last birthday 48 (Years) 15 Residence (Usual place of abode) 41, Milton  
 (If non-resident, give place and State)

12 Birthplace (city or place) Poland 16 Color or race White 17 Age at last birthday 40 (Years)  
 (State or country) **FOR GENEOLOGICAL RESEARCH ONLY**

13 Occupation Teacher 18 Birthplace (city or place) America 19 Occupation House, Reeper  
 (State or country) Nature of industry

20 Number of children born to this mother, including present birth 7  
 21 Children of this mother born alive 7 Stillborn 0 Total now living 7

What preventive for ophthalmia neonatorum did you use? None  
 If none, state the reason therefor.

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE  
 I hereby certify that I attended the birth of this child, who was born alive at 1140 a. m.,  
 on the date above stated.

(Signature) Anna B. Barlow  
 Dated Mar. 11, 1929 at Milwaukee  
 Address 15 7th St. S. Milwaukee, Wis.  
 Filed Mar. 11, 1929 Julius J. Heller Registrar

When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.  
 Given name added from a supplemental report  
 (Month, day, year)  
 Registrar  
 This certificate must be FILED with the local Registrar within FIVE (5) days after birth (See instructions and additional requirements for STILLBIRTHS on other side)