

This is the original [founding] document you acquire from the service corporation [Gov] registrar general office
It will be different in other countries and within Canada depending when and where you are born
This is where you get the information for other 2 pages that complete the Correct ID package



Office of the Registrar General
Bureau du registraire général

Certified A True
Photostatic
Print of a Record

Photocopie certifiée
conforme d'un document

on file at the
Office of the Registrar General
Ontario, Canada

se trouvant dans les dossiers du
Bureau du registraire général
(Ontario) Canada

Registration Number:
Numéro d'enregistrement :

Certificate number:
Numéro du certificat :

Date issued:
Date de délivrance :

File number:
Numéro de dossier :

1966
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Nov 23 1911

V.S.A. 1960
Form 2
SEE OTHER
SIDE FOR
INSTRUCTIONS

THIS IS A PERMANENT RECORD

DO NOT USE RED INK OR PENCIL

PLEASE TYPE OR PRINT

PROVINCE OF ONTARIO
THE VITAL STATISTICS ACT
STATEMENT OF BIRTH

(For use of Registrar General only)

CODE
03217
1

1. PLACE OF BIRTH:
City, town, village or township of Burlington
Name and address of hospital or nursing home Joseph Brant Memorial
(If birth occurred at home, give house number and street address)
County or territorial district of Nelson

2. PRINT NAME OF CHILD IN FULL
CHRISTOPHER JAMES
(Given or first names)

3. DATE OF BIRTH [REDACTED] 4. SEX Male
(State male or female)

5. PLEASE STATE IF MOTHER IS: Married, Widowed, Divorced or Single Married
(The term "Common law" or "Separated", not to be used)

6. FATHER (Print full name) [REDACTED] 7. MOTHER (Print full name) [REDACTED]

JAMES WILLIAM MARY LOUISE
(Given or first names)

Age 29 Place of birth Ontario Age 29 Place of birth Ontario
(At time of this birth) (Province, state or country) (At time of this birth) (Province, state or country)

Citizenship Canadian Citizenship Canadian

8. State if birth was single, twin, triplet or other Single 9. Weight of child at birth 5 lbs 15 oz 10. Length of pregnancy in completed weeks 40
(lbs. and oz. or grams)

11. Total number of children born to this mother (a) Number born alive including this birth ONE
(b) Number living at date of this birth including this child ONE
(c) Number born dead after 20 weeks' pregnancy NIL

12. Permanent residence of child's mother at time of this birth
House No. [REDACTED] (Name of street or road)
Burlington Ontario
(Name of city, municipality) (Province)

13. Name of medical practitioner or nurse in attendance at this birth Johnston Mrs. Macgregor
(Surname or last name) (Given or first names or initials)
Post Office Address 472 Brant St. Burlington

I certify that the above stated particulars are true, to the best of my knowledge and belief, this

Date December 18 1966
(month) (day) (year)

Signature [REDACTED] [REDACTED]
(month) (day) (year)

Address Burlington, Ont. [REDACTED]
(Signature of Division Registrar) (Signature of Division Registrar)

1173 210023
(Registration number) (Code number)

(This space for office notation only)

RECEIVED
OFFICE OF REGISTRAR GENERAL

DEC 28 1966

J. D.

9004-2.7: 23-1-64

S. Leonetti

Sandra J. Leonetti
Deputy Registrar General
Registraire générale adjointe
de l'état civil

—CERTIFIED COPY—
NOT VALID WITHOUT ALL PAGES

