The Vindicator

OUT-OF-TOWN BIRTHS

Out-of-town births and adoptions of local interest are published Thursday. See page A-2 for a daily listing of local births. Please send your information to the Society Department by 5 p.m. Tuesday. You may drop it off at the front counter of our downtown office at 107 Vindicator Square, Youngstown; mail it to The Vindicator, Society Department, P.O. Box 780, Youngstown, OH 44501; fax it to (330) 747-6712; or e-mail it to society@vindy.com.

For further information, call (330) 747-1471 Ext. 1282.

PLEASE TYPE OR PRINT

Name of parents ____________________________________________________________
Mother’s maiden name ____________________________________________________
Address ______________________________________________________________________
   City __________________________________________ State ________________

Baby’s name and gender ___________________________________________________
Date of birth _____________________________________________________________
Place of birth ____________________________________________________________
   City/State __________________________________________________________________________________________

Name(s) or number of baby’s siblings: _______________________________________
                                                                                   ____________________________________________________________________________________________________

Grandparents’ names:

1. ___________________________ City/State ___________________________
2. ___________________________ City/State ___________________________
3. ___________________________ City/State ___________________________
4. ___________________________ City/State ___________________________

Great-grandparents’ names:

1. ___________________________ City/State ___________________________
2. ___________________________ City/State ___________________________
3. ___________________________ City/State ___________________________
4. ___________________________ City/State ___________________________

NOT FOR PUBLICATION:
Submitted by: ___________________________ Daytime phone: ______________