

Birth Announcement

Mr. and Mrs. _____

(street, route, city, state)

announce the birth / adoption of their _____ child, a baby _____
(first, second, third, etc.) (sex)

born on _____, at _____ a.m. or p.m.

at _____ Hospital in _____

The baby was named _____; weighed _____ pounds, _____ ounces

Brothers (and ages): _____

Sisters (and ages): _____

Maternal grandparents are (State residence; if local, state street address or route)

Paternal grandparents are (State residence; if local, state street address or route)

Great-Grandparents are (State residence; if local, state street address or route)

Mother's full maiden name _____

Person giving information _____ Phone number during the day _____

Note: 1. Information must be submitted by Noon Monday to be published in Wednesday's edition.

2. If mother and father of child are NOT married, both parents must sign below and give telephone numbers:

Mother _____ Phone # _____ Father _____ Phone # _____