

CERTIFIED COPY OF A BIRTH RECORD

0.402237

VS & R 141
L. 1947 P. 1385

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH

DELAYED RECORD OF BIRTH

County File No. State File No.

201248

1. PLACE OF BIRTH: Chicago of Cook COUNTY, ILLINOIS.
 2. FULL NAME AT BIRTH: Bessie Loeb. 3. DATE OF BIRTH: December 17 1894
 4. COLOR OR RACE: White Female Betty If your name has been changed (except by marriage) enter the name you are now known by in this space.
 6. FATHER'S FULL NAME: David Loeb 7. FATHER'S BIRTHPLACE: Chicago Illinois
 8. MOTHER'S MAIDEN NAME: Armina Walter 9. MOTHER'S BIRTHPLACE: Madison County, Kansas

AFFIDAVIT: I hereby declare upon oath that the above statements are true to the best of my knowledge and belief.

Signed Bessie (Betty) Robinson Address 537 1-31
 (SEAL) Subscribed and sworn to before me this 25th day of June 1957
 at Isabella California Phoebe M. Link (Notary Public)

APPLICANT! DO NOT WRITE BELOW THIS LINE

ABSTRACT OF SUPPORTING EVIDENCE		KIND OF DOCUMENT AND DATE MADE	INFORMATION GIVEN IN DOCUMENT AS TO BIRTH DATE, BIRTHPLACE, AND PARENTS
DOCUMENT No. 1		Birth Record of Child, Dorothy Robinson, Born 6/27/15, Los Angeles, California #4056 - Date Filed 7/1/15	Age or birth date: <u>20 years</u> Birthplace: <u>Illinois</u> Father: Mother:
DOCUMENT No. 2		Voter's Registration Record, County of Kern, State of California. Dated June 29, 1938	Age or birth date: <u>Not Stated</u> Birthplace: <u>Illinois</u> Father: Mother:
DOCUMENT No. 3		Affidavit of Sister-in-law, Marie Bixler, Box 23, Bodfish, California. Dated June 25, 1957	Age or birth date: <u>December 17, 1894</u> Birthplace: <u>Chicago, Illinois</u> Father: <u>David Loeb</u> Mother: <u>Armina Walter</u>
DOCUMENT No. 4		Affidavit of Mother, Armina Harrison, Isabella, California. Dated June 25, 1957	Age or birth date: <u>December 17, 1894</u> Birthplace: <u>Chicago, Illinois</u> Father: <u>David Loeb</u> Mother: <u>Armina Walter</u>

I certify that a diligent search of the official birth records was made and that no prior certificate was found for this registrant.

Date June 25, 1957 Signed Edward J. Barry
 Title Deputy State Registrar
 FOR THE DIRECTOR OF PUBLIC HEALTH: Leo A. Ozer Deputy State Registrar
 Accepted and filed at Springfield by August 8, 1957

BUREAU OF STATISTICS - ILLINOIS DEPARTMENT OF PUBLIC HEALTH

USE TYPEWRITER WITH BLACK RIBBON OR PRINT WITH PEN USING BLACK OR BLUE-BLACK INK. ALL SIGNATURES MUST BE HAND WRITTEN IN PEN AND INK.

This delayed birth record must be executed in accordance with the provisions of Public Act No. 141 in relation to births, stillbirths, and deaths. Approved June 22, 1915, as amended July 21, 1947 (L. 1947 p. 1385) and with the instructions of the Illinois Department of Public Health. The original of this record shall be filed with and accepted by the Illinois Department of Public Health at Springfield. An exact copy of this original will be on file with the clerk of the county of birth.

(20273-7-55)

I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the record of birth as made from the original certificate of birth for the child named therein and that this certificate was established and filed with the Department of Public Health in accordance with the statutes of Illinois governing the registration of and the establishment of records of births, stillbirths, and deaths.

AUGUST 9, 1957

SPRINGFIELD

Roland A. Gross, M.D.
 Director of Public Health
 STATE OF ILLINOIS

Address correspondence on birth and death records to Bureau of Statistics

with Donna & Sue

Bluff
May 1980

LDS Library

LOUISA Co.

1790 Aug 5, Geo Mallory - Ely Bourne
Stephen Bourne father
Dana Bourne father
Thomas Burr

Carroll Co Va 1850

July 40	Wm Taylor	29
	Thursey	23
	Peggy Ann	1
	Thomas Vaylar	30
	Maria	33
	Hennette Bell	12
	Oscar "	9
	Spencer "	6
	Christopher C. Ketchum	6/12
	Wm R. Vaylar	69
	Elizabeth	60

1790 Beale Library Vermont
Hds of Families - VT Windsor County p 65

DIX, Benjamin	1 - 2 - 3	^{Windsor Co}	Weatherfield
Beckley, Zebedee	1 - 0 - 2		TN
Bigelow, Silas	1 - 0 - 1	p. 66	Weatherfield
ORVIS, DAVID	1 - 4 - 3	p. 66	Windsor TN.

CONNECTICUT

ORVIS, Eleazer Litchfield TN 3-1-7 P. 67

FAMILY GROUP RECORD

No. 4

C
G

HUSBAND'S NAME DAVID FRANK ROBINSON
 Born 28 SEPT. 1861 Place INDEPENDENCE, VA.
 Married 2 JAN. 1889 Place KANSAS
 Died 07 MARCH 1943 Place STONDO, CALIF.
 Buried at SIERRA MOBILE Church Aff. _____
 Other wives ESTELLA WEBER 3-JANE A.
 FATHER DANIEL PRESTON ROBINSON
 Born 29 AUG. 1836 Place PITTSBURGH CO., VA.
 Married 31 DEC. 1858 Place GRAYSON CO., VA.
 Died 2 JUNE 1915 Place SANTA MONICA, CA.
 Buried at TOPERA, KANSAS Church aff. _____
 MOTHER JULIA BOURNE
 Born 3 AUG. 1840 Place GRAYSON CO., VA.
 Died 12 JAN 1911 Place TOPERA KANSAS
 Buried at TOPERA CEM. Church aff. _____
 WIFE'S MAIDEN NAME MARY WALTER
 Born 25 FEB. 1865 Place HAMPTON TP., PA.
 Died 1 OCT. 1947 Place SAN DIEGO, CAL.
 Buried at SAN DIEGO, CAL. Church Aff. PREBYTERIAN
 Other husbands JOHN CUSACK
 FATHER GEORGE WALTER
 Born 25 JAN. 1834 Place PINE TP. ALLEGHENY CO
 Married 1 OCT. 1861 Place HAMPTON TP., PA.
 Died 1907 Place KANSAS
 Buried at KANSAS Church Aff. _____
 MOTHER HARRIET SHIRLEY
 Born 16 JUNE 1843 Place PINE TP. ALLEGHENY CO, PA
 Died 17 AUG. 1911 Place KANSAS
 Buried at KANSAS Church Aff. _____

HUSBAND'S FULL NAME _____
 WIFE'S MAIDEN NAME _____
 Sheet submitted by: Discovered March 1947
Topera, Pa
 Date _____
 AUTHORITIES:
 (List volume and page)
MOTHER
AUNT MARIE
DEATH CERTIFICATE
L.A. Co.

F-Fem. or M-Male	CHILDREN (Give names in full in order of birth whether living or dead)	BORN		DIED		MARRIED		
		When	Where	When	Where	To whom	When	Where
	1. <u>ELVESSA</u>	<u>23 JAN 1890</u>	<u>COUNCIL GROVE KANSAS</u>	<u>DISAPPEARED</u>	<u>C. 1904</u>			
	2. <u>VERNON LEROY</u>	<u>9 OCT 1892</u>	<u>COUNCIL GROVE KANSAS</u>	<u>15 MAR. 1951</u>	<u>LAKE ISABELLA CALIF.</u>	<u>BESSIE LOGG</u>	<u>5 MAY 1913</u>	<u>LOS ANGELES CA.</u>
	3. <u>PERCIVAL DANIBUD</u>	<u>19 MAY 1894</u>	<u>COUNCIL GROVE KANSAS</u>	<u>SAN DIEGO CALIF.</u>	<u>UNMARRIED</u>			
	4. <u>ORVILLE RAYMOND</u>	<u>14 MAY 1897</u>	<u>TOPERA, KS</u>	<u>28 NOV 1958</u>	<u>WOODY, CAL.</u>	<u>RACHEL RUTLEDGE</u>	<u>16 OCT. 1922</u>	<u>LOS ANGELES, CA.</u>
	5.							
	6.							
	7.							
	8.							
	9.							
	10.							

Use reverse side for additional information.

GENERAL SERVICES ADMINISTRATION

DATE RECEIVED
22 AUG 1975

Clarke

ORDER FOR COPIES-VETERANS RECORDS
(See reverse for explanation)

R7476

REQUIRED MINIMUM IDENTIFICATION OF VETERAN

1. NAME OF VETERAN (Last name, first, middle) Clark, Stephen	2. WAR IN WHICH OR DATES BETWEEN WHICH HE SERVED Revolutionary	3. IF SERVICE WAS CIVIL WAR <input type="checkbox"/> UNION <input type="checkbox"/> CONFEDERATE
4. CHECK RECORD DESIRED <input checked="" type="checkbox"/> PENSION <input type="checkbox"/> BOUNTY LAND WARRANT APPLICATION (Service before 1856 only) <input type="checkbox"/> MILITARY		5. STATE FROM WHICH HE SERVED Virginia

PLEASE PROVIDE THE FOLLOWING INFORMATION IF KNOWN

6. UNIT IN WHICH HE SERVED (Name of regiment or number, company, etc., or name of ship) under Capt. Edward Cuid	7. BRANCH IN WHICH HE SERVED <input type="checkbox"/> INFANTRY <input type="checkbox"/> CAVALRY <input type="checkbox"/> ARTILLERY <input type="checkbox"/> NAVY <input type="checkbox"/> OTHER (Specify)	
8. KIND OF SERVICE <input type="checkbox"/> VOLUNTEERS <input type="checkbox"/> REGULARS	9. PENSION OR BOUNTY LAND FILE NUMBER	
10. DATE OF BIRTH 1762	11. PLACE OF BIRTH Goochland County, Virginia	12. NAME OF WIDOW OR OTHER CLAIMANT Sarah (Sally)
13. DATE OF DEATH Jan. 1838	14. PLACE OF DEATH Grayson County, Virginia	15. IF VETERAN LIVED IN A HOME FOR SOLDIERS, ENTER LOCATION (City and State)
16. PLACE(S) WHERE VETERAN LIVED AFTER SERVICE Goochland and Grayson Counties, Virginia		17. INDICATE HERE THE NUMBER OF ADDITIONAL COPIES OF THIS FORM (GSA FORM 6751) DESIRED two

INSTRUCTIONS

Submit a separate form for each veteran. Do not send payment with your order. You will be billed \$2.00 for each file reproduced. Mail your order to:

Military Service Records (NNCC)
National Archives (GSA)
Washington, DC 20408

59180

DO NOT WRITE IN THIS AREA

REPLY

RECORD(S) ENCLOSED	<input type="checkbox"/> PENSION	<input type="checkbox"/> BOUNTY LAND	<input type="checkbox"/> MILITARY
RECORD(S) NOT FOUND	<input type="checkbox"/> PENSION	<input type="checkbox"/> BOUNTY LAND	<input type="checkbox"/> MILITARY
<input type="checkbox"/> ENCLOSED ARE COPIES FROM _____ FILES. YOU ARE BEING BILLED \$2.00 FOR EACH FILE REPRODUCED.		<input type="checkbox"/> SEE ATTACHED BILL.	
<input type="checkbox"/> WE FOUND _____ PENSION OR BOUNTY LAND FILES AND _____ MILITARY SERVICE FILES THAT MAY RELATE TO THE ABOVE VETERAN. YOU MAY ORDER COPIES BY RETURNING THE ENCLOSED MARKED FORMS.			
<input type="checkbox"/> WHEN WE ARE UNABLE TO FIND A RECORD FOR A VETERAN, THIS DOES NOT NECESSARILY MEAN THAT HE DID NOT SERVE. YOU MAY BE ABLE TO OBTAIN MORE INFORMATION ABOUT HIM FROM THE STATE ARCHIVES.			
<input type="checkbox"/> SEE ATTACHED FORMS/LEAFLETS.		<input type="checkbox"/> SEE REVERSE.	
<input type="checkbox"/> PLEASE COMPLETE BLOCKS 1 (give full name), 2, AND 5 AND RESUBMIT.			
<input type="checkbox"/> A REFUND OF \$ _____		<input type="checkbox"/> WILL BE SENT BY THE TREASURY DEPARTMENT.	
<input type="checkbox"/> IS ENCLOSED.		REFUND AUTHORIZATION	

PRINT OR TYPE YOUR NAME AND ADDRESS (including ZIP Code) WITHIN THE DOTS BELOW

Mrs. Dorothy M. Kirkwood
3030 Daisy Avenue
Long Beach, CA. 90806

SEARCHER	FILE DESIGNATION
DATE	
CASHIER	

EXPLANATION OF ORDER FOR PHOTOCOPIES

Use this form to order photocopies of records of veterans who served in the United States or Confederate armed forces. These records include:

PENSION APPLICATION FILES based on United States (not State) service before World War I.

NOTE: Pensions based on military service for the Confederate States of America were authorized by some Southern States but not by the Federal Government until 1959. Inquiries about State pensions should be addressed to the State archives or equivalent agency at the capital of the veteran's State of residence after the war.

BOUNTY-LAND WARRANT APPLICATION FILES based on United States (not State) service before 1856.

NOTE: Pension or bounty-land warrant application files usually include an official statement of the veteran's military or naval service, as well as information of a personal or genealogical nature. If we find such a file, we send copies of the documents we feel will be most useful to you.

MILITARY SERVICE RECORDS based on service in the United States Army (officers who served before June 30, 1917, enlisted men before October 31, 1912), Navy (officers and enlisted men who served before 1886), Marine Corps (officers and enlisted men who served before 1896), and Confederate armed forces (1861-65). (We cannot provide photocopies of files for veterans whose service terminated less than 75 years ago, however we are usually able to provide certain information from the files).

NOTE: Military service records rarely contain family information. The record of a man's service in any one organization is entirely separate from the record of his service in any other organization. We are ordinarily unable to accurately establish the identity of men of the same name who served in different organizations. If you know that a man served in more than one organization and you desire copies of his military service record, submit a separate form for the service record in each organization.

DO NOT USE THIS FORM TO REQUEST PHOTOCOPIES OF RECORDS RELATING TO SERVICE IN WORLD WARS I OR II OR SUBSEQUENT SERVICE. WRITE TO: NATIONAL PERSONNEL RECORDS CENTER, GSA, (MILITARY PERSONNEL RECORDS), 9700 PAGE BOULEVARD, ST. LOUIS, MO 63132.

More information about armed service records may be found in our free Genealogical Information Kit.

Send the completed form to the address on the front of the form. When you send more than one form at a time, each order will be handled separately; you may not receive all your replies at the same time.

When we find numerous files that may relate to a veteran, we suggest that you visit the National Archives and examine the various files, or hire a professional researcher to examine the files for you. The Board for Certification of Genealogists, 1307 New Hampshire Avenue NW., Washington, DC 20036, can provide you with the names of persons in the Washington area willing to do research for a fee.

When, because of the size of a file, we are unable to provide copies of all documents, we send copies of the documents we feel will be most useful to you. You may order copies of all documents in a file by making such a specific request and authorizing us to bill you at \$2.00 per file, plus 10¢ per page for each page in excess of 10 per file.

Veterans Farm & Home
Purchase Act.

223 Bailey St. Los Angeles
Los Angeles. California

1A) Vernon Robinson

b) 35 years

c) City fireman

d) Employer, City of Los Angeles

e) am Los Angeles California

2

a) Topeka, Shawnee

Kansas 19th October 1889

4 am a citizen of U.S.

3

Father. David. F. Robinson

401 Albion St. Sierra Madre

Los Angeles. California

Yes Sierra Madre

California

4

married 2 Wholley

Bessie L. Robinson 30 Wife 223 Bailey L.A.

Dorothy M. " 9 Daughter " " "

5

Enlisted - Navy - Los Angeles

L.A. - Cal. Dec, 3 - 1917

28 years 4 1 month

6

Los Angeles - 5 years 5 months

2 - 13 yrs - 4 months

8 years 4 months

8

1 year 4 2 months

released from active duty

Navy Yard - Mare Island

California. 18th Feb. 1919

Los An. Los A. Calif.

9

a' Seaman Aug 1908 July 1912 U.S. Navy
Trammor Jan. 1913 - July 1916 ^{La. Navy} Los Angeles
City Fireman July 1916 - Dec. 1917 City L. A.

'B' Navy

Seaman Dec. 1917 to Jan 1918 ^{more islands} Navy yard
" Jan 1918 " April " U.S. Oriskany
" April " " July " ^{Palmer C. Dist.} 15 Naval Dist.
" July " " Dec. " U.S. sub-chaser ²⁸³
" Dec. " " Jan 1919 U.S. Beaver
" Jan 1919 " Feb. 18' Navy yard
^{more islands}

'C'

City Fireman Feb. 24 1919 present time
10 City of Los Angeles

good

11

not

13
have not
nothing

14
do not claim

15
have not

16
have not

17
no

18
am not

19
home

20
yes

21

3000.00 20.00 per week 20 per week
22.00

170.00 per month \$900.00

OFFICE OF THE
Civil Service Commission

Los Angeles, Cal., JUL 31 1915

Mr. Hermon Robinson

LOS ANGELES, CAL.

Dear Sir:

This Commission has been called upon to-day to certify
to the FIRE

Department sufficient names from the eligible list of

FIREMAN to fill

290 vacancies, at a salary of \$ _____

As your name is among those certified, please report to the
head of that department immediately.

If you are unable to accept the position at this time, please
notify the Civil Service Commission at once.

Respectfully,

THE CIVIL SERVICE COMMISSION

By F. M. DEE, JR.

Secretary.

Civil Service Department of Los Angeles City California

OFFICE OF THE
CIVIL SERVICE COMMISSIONERS

Los Angeles, Cal.,

JUL 31 1915

NOTICE OF ELIGIBILITY

Vernon Robinson

Los Angeles, Cal.

Dear Sir:—

You are hereby informed that the papers of the examination taken by

you for the position

JUL 15 1915

of **FIREMAN** have been marked, and

that your general average is *80.8* per cent.

You are No. *219* on the eligible list.

Respectfully yours,

CIVIL SERVICE COMMISSION.

F. M. DEE, Jr., Secretary.

REGISTRATION DISTRICT NO. 1501		REGISTRAR'S NUMBER 340		CERTIFICATE OF DEATH				STATE OF CALIFORNIA		
DECEDENT PERSONAL DATA (TYPE OR PRINT NAME)	1A NAME OF DECEASED—FIRST NAME Vernon		1B MIDDLE NAME		1C LAST NAME Robinson		2A DATE OF DEATH MONTH DAY YEAR March 15, 1951		2B HOUR 11:00	
	3 SEX Male	4 COLOR OR RACE Cauc.	5 MARRIED, NEVER MARRIED, WIDOWED, DIVORCED Married		6 DATE OF BIRTH October 19, 1889		7 AGE (LAST BIRTHDAY) 61 YEARS		IF UNDER 1 YEAR MONTHS DAY	IF UNDER 24 HOURS HOURS MINUTES
	8A USUAL OCCUPATION (GIVE KIND OF WORK DONE DURING MOST OF WORKING LIFE, EVEN IF RETIRED) Retired Fireman		8B KIND OF BUSINESS OR INDUSTRY City Fire Dept.		9 BIRTHPLACE (STATE OR FOREIGN COUNTRY) Kansas		10 CITIZEN OF WHAT COUNTRY? United States			
	11 NAME AND BIRTHPLACE OF FATHER David Frank Robinson—Virginia			12 MAIDEN NAME AND BIRTHPLACE OF MOTHER Mary Walters—Pennsylvania			13 NAME OF SPOUSE (IF MARRIED) Betty Lloyd Robinson			
	14 WAS DECEASED EVER IN U. S. ARMED FORCES? SPECIFY YES, NO, UNKNOWN Yes				15 SOCIAL SECURITY NUMBER WWW I Navy 551-30-5512		16 INFORMANT Hospital Record			
PLACE OF DEATH 0159	17A PLACE OF DEATH—CITY OR TOWN (IF OUTSIDE CORPORATE LIMITS, WRITE RURAL AND NAME OF NEAREST TOWN) Bodfish				17B LENGTH OF STAY (IN THIS PLACE) 14 yrs.		17C COUNTY Kern County			
	17D FULL NAME AND ADDRESS OF HOSPITAL OR INSTITUTION (IF NOT IN HOSPITAL OR INSTITUTION, GIVE STREET ADDRESS OR LOCATION) 1 Mile No. of Bodfish, Garfield Sub.									
USUAL RESIDENCE (WHERE DECEASED LIVED) (IF INSTITUTION RESIDENCE BEFORE ADMISSION)	18A STREET ADDRESS (IF RURAL GIVE LOCATION) 1 Mile No. of Bodfish, Sub.			18B CITY OR TOWN (IF OUTSIDE CORPORATE LIMITS, WRITE RURAL AND NAME OF NEAREST TOWN) Bodfish		18C COUNTY Kern		18D STATE California		
	CAUSE OF DEATH (ENTER ONLY ONE CAUSE PER LINE FOR (A), (B) AND (C))	THIS DOES NOT MEAN THE MODE OF DYING SUCH AS HEART FAILURE, ASTHMA, ETC. IT MEANS THE DISEASE, INJURY OR COMPLICATION WHICH CAUSED DEATH.		19I DISEASE OR CONDITION DIRECTLY LEADING TO DEATH 525 X (A)		APPROXIMATE TIME BETWEEN ONSET AND DEATH				
19II OTHER SIGNIFICANT CONDITIONS CONDITIONS CONTRIBUTING TO THE DEATH BUT NOT RELATED TO THE DISEASE OR CONDITION CAUSING DEATH.		19J ANTECEDENT CAUSES 11/21/51		MORBID CONDITIONS, IF ANY, GIVING RISE TO THE ABOVE CAUSE (A) STATING THE UNDERLYING CAUSE LAST.		DUE TO (B) Cor pulmonale Chronic pulmonary fibrosis				
OPERATIONS	20A DATE OF OPERATION		20B MAJOR FINDINGS OF OPERATION				21 AUTOPSY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
	22A ACCIDENT (SPECIFY) SUICIDE HOMICIDE		22B PLACE OF INJURY (E.G. IN OR ABOUT HOME, FARM, FACTORY, STREET, OFFICE BUILDING, ETC.)		22C LOCATION CITY OR TOWN COUNTY STATE					
DEATH DUE TO EXTERNAL VIOLENCE	22D TIME OF INJURY MONTH DAY YEAR HOUR		22E INJURY OCCURRED <input type="checkbox"/> WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK		22F HOW DID INJURY OCCUR?					
	23A CORONER'S I HEREBY CERTIFY THAT I HAVE HELD AN <input type="checkbox"/> AUTOPSY, <input type="checkbox"/> INC. EST. OR <input type="checkbox"/> INVESTIGATION ON THE REMAINS OF THE DECEASED AND FIND THAT THE DECEASED CAME TO DEATH AT THE HOUR AND DATE STATED ABOVE.				23B PHYSICIAN'S I HEREBY CERTIFY THAT I ATTENDED THE DECEASED FROM 2-26-51 TO 3-11-51 THAT I LAST SAW THE DECEASED ALIVE ON 3-11-51 AND THAT DEATH OCCURRED FROM THE CAUSES AND AT THE HOUR AND DATE STATED ABOVE.					
PHYSICIAN'S OR CORONER'S CERTIFICATION	23C SIGNATURE B. G. Stewart, M.D. B.G. Stewart, M.D.				23D ADDRESS Bakersfield, California		23E DATE SIGNED 3/15/51			
	24A <input checked="" type="checkbox"/> BURIAL <input type="checkbox"/> CREMATION <input type="checkbox"/> REMOVAL		24B DATE 3/15/51		24C CEMETERY OR CREMATORY Glendale Calif. Grand View Crematory		25 SIGNATURE OF EMBALMER F. M. Cavanaugh - 306		25 LICENSE NUMBER	
FUNERAL DIRECTOR AND REGISTRAR	27. DATE RECEIVED BY LOCAL REGISTRAR 3-16-51			28 SIGNATURE OF LOCAL REGISTRAR WM. C. BUSS, M. D. E. Beck		26 FUNERAL DIRECTOR L.G. SCOVERN & SON GLENDALE				

<u>NAME</u>	<u>BORN</u>	<u>WHERE</u>	<u>DIED</u>	<u>WHERE</u>	<u>MARRIED</u>	<u>WHERE</u>
Lillie Veronica Robinson	5 Feb 1893	Topeka, Shawnee, Kansas	30 May 1968	_____	18 May _____	_____
Edgar R _____ Robinson	22 Feb 1895	Topeka, Shawnee, Kansas	30 Jan 1965	_____	_____	_____
Anna Cora Robinson	16 Mar 1897	Topeka, Shawnee, Kansas	19 July 1975	L.A., Cal.	14 Nov 1914	Kansas
William Leroy Robinson	2 Nov 1907	Topeka, Shawnee, Kansas	4 Jan 1961	Coos Bay Oregon	_____	_____

TO WHOM
TRUES

NINA HURLEY

Floyd Hampton Porter

MAE

THEIR PARENTS:

William _____ Robinson	13 Apr 1864	_____, Virginia	21 Apr 1944	L.A., Cal	_____	_____
Carrie M _____ Robinson	16 Sep 1861	_____, Kansas	28 Sep 1944	L.A., Cal	_____	_____

Carrie M. Robinson

William Robinson

THEIR PARENTS:

? ? ?
° ° °

Plus your brothers, sisters, children, uncles, aunts, everyone!
I can't tell you how I'd appreciate any help you could give me.