

County of New York.

City of New York.

**BIRTH RETURN.**

(In full when possible.)

16483  
16493

Name of Child

Henriette Sprinz

Sex

female

{ Color or Race, }  
{ If other than the White }

Date of Birth,

MONTH

DAY

YEAR

April

5

1888

Place of Birth (Street and Number)

226 Chrystie St.

Name of Father

Henry Sprinz

{ If out of wedlock and name  
not given, write O. W.

Full Name of Mother

Lisette Sprinz

Maiden Name of Mother

" Lissner

Birthplace (Country or State) of Mother

New York State

Age 34 years.

" " of Father

Germany

Age 32 years. Occupation

Sailor

Number of Child of Mother

(whether 1, 2, 3, &amp;c.)

5<sup>th</sup>

How many of them now living

4

Name and address of Medical Attendant or  
other authorized person, in own handwriting

Signature

H. Wald M.D.

Address

102 Rivington St.

Date of this Return

15<sup>th</sup> of April 1888