

No. 17655

Name, Elizabeth

Foster

Sex, Female

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. |
|----------------|---------------|-----------|----------------|---------------------|-------------------|----------------------|--------------------|---------------------|
| 22 5 90 | Waltham Park | | | 14 7 90 | Waltham | Neglected | | |

| Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | HEALTH. | | | General Remarks. |
|--------------------|---------------------|--------------|-------|----------|-------|---------------------|----------------|--|------------------|
| | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If had Measles, Scarlet Fever, Whooping Cough, or Small Pox. | |
| | 22 5 1908 | | | | | | | | |

PREVIOUS HISTORY OF--

Child—
 Father— George Foster, deceased.
 Mother— Christina Foster, widow 38 Grenville Street, South Waltham
 Relations— Brothers 17656 & 17658, Sister 17654

SUBSEQUENT HISTORY OF RELATIONS.

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED. | |
|------------------|-------|----------------------------------|-----------------------|-------------|----------|-------------------------------|-----------|
| Date. | Dept. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. |
| | | 14. 7. 90 | Mrs Foster Waltham | | | | |

| CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. |
|--------------------|---|----------------------------------|-------------------------------------|
| 18 6 1900 | Finally by me 51st 1700 Foster 17655 | | |

SUBSEQUENT HISTORY.

| Date. | Particulars. |
|-------|--------------|
| | |

No. 17656

Name, William

Foster

Sex, Male

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. |
|----------------|---------------|-----------|----------------|---------------------|-------------------|----------------------|--------------------|---------------------|
| 26 7 77 | Gloucester | Epoc | | 14 7 90 | Ballanah | Neglected | | |

| Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | HEALTH. | | | General Remarks. |
|--------------------|---------------------|--------------|-------|----------------|-------|---------------------|----------------|--|------------------|
| | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If had Measles, Scarlet Fever, Whooping Cough, or Small Pox. | |
| | 26 7 97 | | | Brother Foster | | | | | |

PREVIOUS HISTORY OF—

Child—
 Father— } see folio 51
 Mother— }
 Relations— Brother 17658, Sisters 17655 + 17654

SUBSEQUENT HISTORY OF RELATIONS.

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED. | |
|------------------|--------|----------------------------------|-----------------------------|-------------|----------|-------------------------------|-----------|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. |
| | | 14. 7. 90 | Mr & Mrs Foster Ballanah | | | | |

| CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. |
|--------------------|----------------------|----------------------------------|-------------------------------------|
| | | | |

SUBSEQUENT HISTORY

| SUBSEQUENT HISTORY |
|--------------------|
| |

No. 17654

Name, *Ida*

Foster Sex, *Female*

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. | Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | HEALTH. | | | General Remarks. |
|----------------|---------------|-----------|----------------|---------------------|-------------------|----------------------|--------------------|---------------------|--------------------|---------------------|--------------|-------|----------|--------|---------------------|----------------|--|------------------|
| | | | | | | | | | | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If Incl. Measles, Scarlet Fever, Whooping Cough, or Small Pox. | |
| 14 1 86 | Colones | Prot | | 14 7 90 | Ballarat | Neglected | | | | 14.1.1904 | | | Mother | Father | | | | |

PREVIOUS HISTORY OF-

Child—
 Father— } *see folio 51*
 Mother— }
 Relations— *Brothers 17656, 17658, Sister 17655.*

SUBSEQUENT HISTORY OF RELATIONS.

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED. | | CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|------------------|--------|----------------------------------|----------------------------------|-------------|----------|-------------------------------|-----------|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. | Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| | | 14. 7. 90 | Mother Mrs Foster Ballarat | | | | | | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. | SUBSEQUENT HISTORY |
|--------------------|--|----------------------------------|-------------------------------------|--------------------|
| 15 11 97 | finally by Mrs C. Foster 80 Eyre St Ballarat 1897 1897 E.M.P.S. No 2033 | | | |

No. 17658

Name, Joseph

Foster

Sex, male

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. | Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | HEALTH. | | | General Remarks. |
|----------------|----------------|-----------|----------------|---------------------|-------------------|----------------------|--------------------|---------------------|--------------------|---------------------|--------------|-------|----------|-------|---------------------|----------------|--|------------------|
| | | | | | | | | | | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If had Measles, Scarlet Fever, Whooping Cough, or Small Pox. | |
| 28 1 48 | Ballinah (Irk) | | | 14 7 90 | Ballinah | Neglected | | | 28 1 1906 | | | | | | | | | |

PREVIOUS HISTORY OF—

Child—

Father—

Mother—

Relations— Brother 17656 Sisters 17655 & 17657.

} see folio 51

SUBSEQUENT HISTORY OF RELATIONS.

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED. | | CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|------------------|--------|----------------------------------|-----------------------------------|-------------|----------|-------------------------------|-----------|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. | Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| | | 14. 7. 90 | M ^r Foster Ballinah | | | | | | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. | Subsequent History |
|--------------------|--|----------------------------------|-------------------------------------|--------------------|
| 20 2 99 | Discharged by the 1899 1542 No 2741 | | | |

No. 17659

Name, Francis John

Grant

Sex,

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. | Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | HEALTH. | | | General Remarks. |
|----------------|---------------|-----------|----------------|---------------------|-------------------|----------------------|---------------------------|---------------------|--------------------|---------------------|--------------|-------|----------|-------|---------------------|----------------|--|------------------|
| | | | | | | | | | | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If had Measles, Scarlet Fever, Whooping Cough, or Small Pox. | |
| 30 12 89 | Carlton | C/S | | 3 7 90 | South Melbourne | Neglected | 1/- 2/- 3/7 1/2 5/6 | | | 30 12 1907 | | | | | | | | |

No record of birth at B.G.
9 27/3/58

PREVIOUS HISTORY OF—

Child—
 Father— John Luskill, laborer, Tasmania
 Mother— Eliza Grant, factory hand, 107 Heath St, South Mth
 Relations—

SUBSEQUENT HISTORY OF RELATIONS.

Mother C/o Mrs Lanon 277 Richardson Street, North Carlton verbal 29/1/00
 Mother Mrs Bailey, 245 Albert St, & Brunswick verbal 9/3/1900
 (mother same address. She says that the mother died in the Melbourne
 Hospital in January 1901 Verbal 12 5.00 G. Mother Mrs A.A. Bailey 38 Wood
 Str. East Brunswick verbal 3/4/06

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED. | | CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|------------------|----------------|----------------------------------|-----------------------------|-------------|----------|-------------------------------|----------------------------|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. | Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| 18 11 01 | Lynn Dept | 5.7.90 | Mrs B. Arneth Richmond | | | 30.12.03 | Mrs Stewart Richmond | | | | | | | | | |
| 27.5.06 | State Hospital | 8.9.92 | Mrs. Brown Richmond | | | 23.7.04 | Mrs. C. Smith Richmond | | | | | | | | | |
| | | 26.11.92 | Mrs. Donald Richmond | | | 14.8.05 | Mrs. Frank Andrew Richmond | | | | | | | | | |
| | | 10/9/94 | Mrs. Malcolm Richmond | | | 18.7.06 | Mrs. Simpson Richmond | | | | | | | | | |
| | | 11.12.01 | Laura Blacker Richmond | | | 5.8.06 | abandoned Richmond | | | | | | | | | |
| | | 6.3.02 | Caroline Woodhouse Richmond | | | | | | | | | | | | | |
| | | 2.2.03 | State Richmond | | | | | | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. | SUBSEQUENT HISTORY |
|--------------------|-------------------------|----------------------------------|-------------------------------------|--------------------|
| 23 6 91 | On probation | Place with Mr. Malcolm Luskill | | |
| | Sub Dec 5 Act 121 | Sumley on 30.9.01 under Act 20 | | |
| | to Mrs Johnson Richmond | S. S. 5. Act 121. 5/1/1906 | | |
| | | 10/1/11 | | |

No. 17660

Name, *Mino*

Humphries Sex,

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. | Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | HEALTH. | | | General Remarks. |
|-----------------------|--|------------|----------------|---------------------|-------------------|----------------------|--------------------|---------------------|--------------------|---------------------|--------------|-------|----------|-------|---------------------|----------------|--|------------------|
| | | | | | | | | | | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If had Measles, Scarlet Fever, Whooping Cough, or Small Pox. | |
| <i>83</i> 31-12-80 | <i>comp. N. V. comm. colony of Registrar of Births</i> | <i>6/8</i> | | <i>14-7-90</i> | <i>Northeast</i> | <i>Neglected</i> | | | | <i>1901</i> | | | | | | | | |

PREVIOUS HISTORY OF—

Child—
 step Father— *Lewis Tucker in jail*
 Mother— *Maud*
 Relations— *Summers No 17303*

SUBSEQUENT HISTORY OF RELATIONS.

See file 64 in 10 part

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED | | CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|------------------|--------------|----------------------------------|-----------------------------|-------------|----------|------------------------------|--------------------------------|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. | Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| <i>14-7-90</i> | <i>Leeds</i> | <i>20-5-91</i> | <i>Mr Lewis Steigler</i> | | | <i>1-7-96</i> | <i>Mr McDonald Bannockburn</i> | | | | | | | | | |
| <i>14-8-91</i> | <i>do</i> | <i>31-8-92</i> | <i>Mr McDonald Steigler</i> | | | | | | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. | SUBSEQUENT HISTORY |
|--------------------|---|---|-------------------------------------|--------------------|
| <i>18-7-90</i> | <i>Mr Brown</i> <i>See 30 Dec 5.</i> | <i>15-2-98</i> <i>See 30 D.D.S to sister</i> <i>Mr Campbell 135 Barkly St W.</i> <i>Brunswick 498</i> <i>1070</i> <i>No 2445</i> | | |

No. 17661

Name, John James

Living

Sex,

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. | Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | HEALTH. | | | General Remarks. | |
|----------------|-----------------|-----------|----------------|---------------------|-------------------|----------------------|--------------------|---------------------|--------------------|---------------------|--------------|-------|----------|-------|---------------------|----------------|--|------------------|----------------------------|
| | | | | | | | | | | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If had Measles, Scarlet Fever, Whooping Cough, or Small Pox. | | Particular Marks (if any). |
| 28.2.86 | Yarragon N.S.W. | | | 14.7.90 | Maitland | Reflected | | | | 28.2.1904 | | | | | | | | | |

PREVIOUS HISTORY OF--

Child—
 Father—
 Mother—
 Relations—

} home

SUBSEQUENT HISTORY OF RELATIONS.

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BEARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED. | | CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|------------------|----------|----------------------------------|----------------|-------------|----------|-------------------------------|----------|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | License. | Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| 16.7.90 | Yarragon | | | | | | | | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. | SUBSEQUENT HISTORY |
|--------------------|--|--|-------------------------------------|--------------------|
| 25.7.90 | On probation under Rec 30 Pub Rec 5 Act 112-1 to 9112 Garran, Yarragon 89015307 | Finally discharged to Mrs Farbach, Yarragon 9.5.92 | | |

No. 17663 Name, William Dalton

Dalton Sex,

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. |
|----------------|---------------|-----------|----------------|---------------------|-------------------|----------------------|--------------------|---------------------|
| 21 185 | | Dist | | 21 7 90 | Blues | Vagrancy | | |

| Date of Admission. | Expiration of Term. | RECOMMITTED. | | PARENTS. | | HEALTH. | | | General Remarks. |
|--------------------|---------------------|--------------|-------|----------|-------|---------------------|----------------|--|------------------|
| | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If had Measles, Scarlet Fever, Whooping Cough, or Small Pox. | |
| | 21 1 1903 | | | | | | | | |

PREVIOUS HISTORY OF--

Child—
 Father—George Dalton, laborer, whereabouts unknown
 Mother—Anna Dalton
 Relations—No 17664 - 555

SUBSEQUENT HISTORY OF RELATIONS.

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED. | |
|------------------|--------|----------------------------------|-----------------|-------------|----------|-------------------------------|-----------|
| Date. | Depot. | Date. | Foster Parents. | Date. | By whom. | Date. | Licensee. |
| | | 21.7.90 | Mrs Filby Blues | | | | |

| CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. |
|--------------------|---|----------------------------------|-------------------------------------|
| 18 2 98 | See 30 2 98 to foster-mother Mrs Filby Blues 2/98 1707 No. 2522 | | |

SUBSEQUENT HISTORY

| SUBSEQUENT HISTORY |
|--------------------|
| |

No. 17666, Name, John

Wallow Sex,

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. |
|----------------|---------------|-----------|----------------|---------------------|-------------------|----------------------|--------------------|---------------------|
| 2 10 86 | | Prot | | 21 7 90 | Clines | Wagman | | |

| Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | HEALTH. | | | General Remarks. |
|--------------------|---------------------|--------------|-------|----------|-------|---------------------|----------------|--|------------------|
| | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If had Measles, Scarlet Fever, Whooping Cough, or Small Pox. | |
| | 2 10 1904 | | | | | | | | |

PREVIOUS HISTORY OF--

Child--
 Father-- }
 Mother-- } See Bro 17663
 Relations-- }
 Bro 17666

SUBSEQUENT HISTORY OF RELATIONS.

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED. | |
|------------------|----------------|----------------------------------|------------------|-------------|----------|-------------------------------|-----------|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. |
| 25-11-02 | Washburne | 21. 7. 90 | Mrs Silby Clines | | | | |
| 18-1-04 | Expulsion Dept | | | | | | |

| CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. |
|--------------------|--|---|-------------------------------------|
| 2 10 99 | Dec 20 1895 with JED Mrs Silby of Clines | 26-1-04 Probation with Mrs Silby Clines | |

SUBSEQUENT HISTORY.

| SUBSEQUENT HISTORY. | |
|---------------------|--|
| | |

No. 17663 Name, George

Dalton Sex,

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. |
|----------------|---------------|-----------|----------------|---------------------|-------------------|----------------------|--------------------|---------------------|
| 2 2 53 | | Pish | | 21 7 90 | Clunes | Vagrancy | | |

| Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | HEALTH. | | | General Remarks. |
|--------------------|---------------------|--------------|-------|----------|-------|---------------------|----------------|--|------------------|
| | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If had Measles, Scarlet Fever, Whooping Cough, or Small Pox. | |
| | 2 4 90 | | | | | | | | |

PREVIOUS HISTORY OF—

Child—
 Father—
 Mother—
 Relations—
 See Nos 17663
 Nos 17663 17664

SUBSEQUENT HISTORY OF RELATIONS.

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED | |
|------------------|--------|----------------------------------|-------------------|-------------|----------|------------------------------|-----------|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. |
| | | 21.7.90 | Mrs. Talby Clunes | | | | |

| CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. |
|--------------------|--|----------------------------------|-------------------------------------|
| 11 10 97 | Action 30 Dec Dec 5 to Foster mother Mrs. Talby Clunes Clunes 497. No 213 7696 | | |

SUBSEQUENT HISTORY

| SUBSEQUENT HISTORY |
|--------------------|
| |

No. 17666

Name, *Lancy*

Hogan

Sex,

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. |
|----------------|---------------|-----------|----------------|---------------------|-------------------|----------------------|--------------------|---------------------|
| 5 4 82 | Shutford Mea | | | 27 7 90 | Paie | Neglected. | | |

| Date of Admission. | Expiration of Term. | RECOMMITTED. | | PARENTS. | | HEALTH. | | | General Remarks. |
|--------------------|---------------------|--------------|-------|----------|-------|---------------------|----------------|--|------------------|
| | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If had Measles, Scarlet Fever, Whooping Cough, or Small Pox. | |
| | 8 9 1900 | | | | | | | | |

PREVIOUS HISTORY OF-

Child—
 Father— *Michael James Hogan Miner deserted,*
 Mother— *Blura Hogan, very poor, and in delicate health.*
 Relations— *Bro 17667*

SUBSEQUENT HISTORY OF RELATIONS.

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED. | |
|------------------|-------------|----------------------------------|---|-------------|----------|-------------------------------|-----------|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. |
| 23. 7. 90 | <i>Boyo</i> | 14. 8. 90 | <i>M^{rs} Andrews Limas Hills</i> | | | | |
| | | 1. 3. 92 | <i>SP boy to Lilydale</i> | | | | |
| | | 19. 9. 92 | <i>M^{rs} Ellen Lilydale</i> | | | | |

| CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. |
|--------------------|----------------------|----------------------------------|-------------------------------------|
| 28 10 92 | <i>Drowned</i> | | |

SUBSEQUENT HISTORY.

| SUBSEQUENT HISTORY. |
|---------------------|
| |

No. 17667 Name, Arthur Herbert

Hogan Sex,

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. | Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | HEALTH. | | | General Remarks. | |
|----------------|---------------|-----------|----------------|---------------------|-------------------|----------------------|--------------------|---------------------|--------------------|---------------------|--------------|-------|----------|-------|---------------------|----------------|--|------------------|----------------------------|
| | | | | | | | | | | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If had Measles, Scarlet Fever, Whooping Cough, or Small Pox. | | Particular Marks (if any). |
| 7 4 66 | Shelton Ma | | | 22 7 90 | Sale | Reflected | | | 7 4 1904 | | | | | | | | | | |

No record at Reg. from 543 47 71.4

PREVIOUS HISTORY OF-

Child—
 Father—
 Mother—
 Relations—
 } See Bro 17666

SUBSEQUENT HISTORY OF RELATIONS.

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED. | | CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|------------------|--------|----------------------------------|-------------------------------|-------------|----------|-------------------------------|--------------------------|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. | Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| 23. 7. 90 | Girls | 14. 7. 90 | Mrs Andrews Imas Hills | | | 1. 12. 90 | Herbert Allen Shelton | | | | | | | | | |
| | | 1 3. 92 | J. P. Child to V. J. Child | | | | | | | | | | | | | |
| | | 19. 9. 92 | Mrs. Ellen Child | | | | | | | | | | | | | |
| | | 1. 12. 92 | J. P. Child Hunawading | | | | | | | | | | | | | |
| | | 1. 2. 93 | As to Measles | | | | | | | | | | | | | |
| | | 8 2 96 | Mrs Barry Shelton | | | | | | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. | Subsequent History |
|--------------------|----------------------|----------------------------------|-------------------------------------|--------------------|
| | | | | |

No. 17668

Name, John William

Smith

Sex,

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. |
|----------------|-----------------|-----------|----------------|---------------------|-------------------|----------------------|-----------------------|---------------------|
| 21 4 98 | Queenscliff 6/8 | | | 22 7 98 | Queenscliff | Neglected | 2/- week 29/4-1901 | |

| Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | HEALTH. | | | General Remarks. |
|--------------------|---------------------|--------------|-------|----------|-------|---------------------|----------------|--|------------------|
| | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If had Measles, Scarlet Fever, Whooping Cough, or Small Pox. | |
| | 21 4 98 | | | | | | | | |

PREVIOUS HISTORY OF—

Child—

Father— William Smith, fisherman, Queenscliff, poor

Mother— Anne.

Relations—

The father is a hard working fisherman against whom nothing is known by the Police.

SUBSEQUENT HISTORY OF RELATIONS.

Sister Miss L Smith P. O. Queenscliff re letter to boy 25/12/90. do 2/10/02
same address 7/10/92 same 20/2/93

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED | |
|------------------|--------|----------------------------------|------------------------|-------------|----------|------------------------------|------------------------|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. |
| 23. 7. 91 | Boys | 29. 7. 90 | Mrs Matthews Falbot | | | 10. 5. 92 | Mrs Matthews Falbot |
| | | 13. 1. 92 | Abandoned | | | | |
| | | 1. 2. 92 | Rel. Mrs Matthews | | | | |

Send for details of 10/12/1900
Railway Station
Falbot
2/10/02

| CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged | State of Education when Discharged. |
|--------------------|----------------------|---------------------------------|-------------------------------------|
| | | | |

SUBSEQUENT HISTORY.

| SUBSEQUENT HISTORY. |
|---------------------|
| |

No. 17669 Name, Amos

Arblander Sex,

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. |
|----------------|---------------|-----------|----------------|---------------------|-------------------|----------------------|--------------------|---------------------|
| 12 5 73 | Southport Wis | | | 25 7 90 | Melbourne | Vagrancy | | |

| Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | HEALTH. | | | General Remarks. |
|--------------------|---------------------|--------------|-------|----------|-------|---------------------|----------------|--|------------------|
| | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If had Measles, Scarlet Fever, Whooping Cough, or Small Pox. | |
| | 12 5 73 | | | | | | | | |

PREVIOUS HISTORY OF-

Child - Was brought before the Court on warrant with two other boys
 Father - W. Reid
 Mother - Margaret Arblander 588 Spencer St, West Melbourne
 Relations -

SUBSEQUENT HISTORY OF RELATIONS.

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED. | |
|------------------|-----------|----------------------------------|----------------|-------------|----------|-------------------------------|---|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. |
| 25 7 90 | Boys | | | | | 6. 6. 91 | M. J. Smith Farmer Seymour Victoria at Ararat |
| 27 7 90 | Barraback | | | | | | |

See folio 371
Barraback books

| CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. |
|--------------------|----------------------|----------------------------------|-------------------------------------|
| | | | |

SUBSEQUENT HISTORY

| SUBSEQUENT HISTORY |
|--------------------|
| |

No. 17670 Name, George

Gamble Sex,

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. |
|----------------|---------------|-----------|----------------|---------------------|-------------------|--------------------------|--------------------|---------------------|
| 20 8 74 Colac | | MC | | 25 7 90 Colac | | Stealing Goods 2/- worth | 49/5204 | |

| Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | HEALTH. | | | General Remarks. |
|--------------------|---------------------|--------------|-------|----------|-------|---------------------|----------------|--|------------------|
| | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If had Measles, Scarlet Fever, Whooping Cough, or Small Pox. | |
| | 20 5 17 | | | | | | | | |

PREVIOUS HISTORY OF-

Child -
 Father - George Gamble, laborer, very poor
 Mother - Mary Ann Gamble Colac, very poor
 Relations -

SUBSEQUENT HISTORY OF RELATIONS.

SUBSEQUENT HISTORY OF CHILD.

| WIDELY STATIONED. | | WITH WIFE AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED. | |
|-------------------|--------|----------------------------------|----------------|-------------|----------|-------------------------------|-----------|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. |
| 26 7 77 | Boys | 1 3 90 | Mrs. Riley | | | | |
| 1 4 91 | Ido | | Colony | | | | |

| CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. |
|--------------------|--|----------------------------------|-------------------------------------|
| 6 3 91 | On probation under Sec 20 Sub Sec 5 Act 1121 to Mr. Smith, South Melbourne 2/11/1567 | | |
| 17 6 91 | On probation to Mother Mrs. Gamble, Jambour under Sec 20, Act Dec 5, Act 1121 | | 1020 |

SUBSEQUENT HISTORY

| SUBSEQUENT HISTORY | |
|--------------------|--|
| | |

No. 17671

Name, Annie

Sex, *Septon*

Sex,

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Committal. |
|----------------|---------------|-----------|----------------|---------------------|-------------------|----------------------|--------------------|--------------------|
| 535 | | R/C | | 26 7 90 | Sale | Abandoned, | | |

| Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | HEALTH. | | | General Remarks. |
|--------------------|---------------------|--------------|-------|----------|-------|---------------------|----------------|--|------------------|
| | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If had Measles, Scarlet Fever, Whooping Cough, or Small Pox. | |
| | 5 1903 | | | | | | | | |

PREVIOUS HISTORY OF—

Child— *Supposed to be illegitimate*
 Father— *Unknown*
 Mother— *Abandoned*
 Relations—

SUBSEQUENT HISTORY OF RELATIONS.

Mother when dying gave her name as Annie Blair. Father's name Fred Miller.

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED | |
|------------------|--------|----------------------------------|---------------------|-------------|----------|------------------------------|-----------|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. |
| | | 26.7.90 | Mrs. O'Neil Sale | | | | |

| CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. |
|--------------------|--|----------------------------------|-------------------------------------|
| 20 8 96 | Died in the Sale Hospital through the effects of typhus. | | |

SUBSEQUENT HISTORY

21/9/96/2860

No. 17673

Name, George Henry

Bradshaw Sex,

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. |
|----------------|---------------|-----------|----------------|---------------------|-------------------|----------------------|--------------------|---------------------|
| 14 8 89 | Victoria | CP | | 24 7 90 | Williamstown | Reflected | | |

| Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | HEALTH. | | | General Remarks. |
|--------------------|---------------------|--------------|-------|----------|-------|---------------------|----------------|--|------------------|
| | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If had Measles, Scarlet Fever, Whooping Cough, or Small Pox. | |
| | | | | | | | | | |

PREVIOUS HISTORY OF-

Child—
 Father— Not known
 Mother— Mary Ann Bradshaw, general servant, deserted.
 Relations—
 The mother left child with a Mrs Shore of North Road, and promised to pay 10/- per week. He did so for some time, when she disappeared, and her whereabouts are unknown. A warrant has been issued for her arrest. The Bench recommended that child be left with Mrs Shore, who has had him for some time.

SUBSEQUENT HISTORY OF RELATIONS.

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED-OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED. | |
|------------------|--------|----------------------------------|---------------------------|-------------|----------|-------------------------------|-----------|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. |
| | | 29.7.90 | Mrs Shaw Williamstown | | | | |
| | | 27.9.90 | Mrs Jones Williamstown | | | | |
| | | 10.10.90 | Mrs Shaw 10, Town | | | | |

| CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. |
|--------------------|--|----------------------------------|-------------------------------------|
| 24 11 90 | Died at Father's parents 2/0 90/3474 | | |

SUBSEQUENT HISTORY.

| SUBSEQUENT HISTORY. |
|---------------------|
| |

No. 17675 Name, John

Mungovan Sex, Male

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. |
|----------------|---------------|-----------|----------------|---------------------|-------------------|----------------------|--------------------|---------------------|
| 21 2 79 | Melbourne | R/C | | 1 8 90 | Melbourne | Neglected | | |

R.G. 590/5150
6. 8. 90

| Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | HEALTH. | | | General Remarks. |
|--------------------|---------------------|--------------|-------|----------|-------|---------------------|----------------|--|------------------|
| | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If had Measles, Scarlet Fever, Whooping Cough, or Small Pox. | |
| | 21 2 97 | | | | | | | | |

PREVIOUS HISTORY OF-

Child-

Father- John Mungovan, dead.

Mother- Catherine Mungovan, dead.

Relations- This boy was brought before the Court in Nov^r 1889 at the investigation of his father, who had since died. The Bench handed him over to Mr. Barber who is appointed by the B/G to take charge of neglected children. Mr. Barber sent him up the country but he was taken to a vagrant life and consequently Mr. Barber caused him to be brought before the Court that he may be committed to the care of the Department for neglected children.

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED. | |
|------------------|------------|----------------------------------|----------------------|-------------|----------|-------------------------------|------------------------|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. |
| 1. 8. 90 | Boys | 11. 8. 90 | M ^r Gough | | | 30. 11. 92 | M ^r J Doyle |
| 11. 4. 91 | do | | Kilmore | | | | Coghills CE |
| 9. 7. 91 | do | 7. 4. 91 | Absconded | | | 14. 1. 93 | Absconded |
| 23. 7. 91 | Baccarab | 10. 4. 91 | M ^r Gough | | | 21. 10. 93 | M ^r Sumner |
| 17. 8. 91 | G.P.S. | | Kilmore | | | | Donald. |
| 23. 9. 93 | Boys Depot | 23. 4. 91 | Kate Brockell | | | 11. 11. 93 | Absconded G.P.M. |
| | | | Downick | | | | |
| | | 30. 5. 91 | Absconded | | | | |
| | | 10. 9. 91 | Jane Bankwell | | | | |
| | | | Kilmore | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. |
|--------------------|----------------------|----------------------------------|-------------------------------------|
| | | | |

SUBSEQUENT HISTORY OF RELATIONS.

Resided Mt Mungovan Auburn Road Hawthorn until 2 9 90 (Foster - care by (Marrumb) Sister Hannah, M^r Mungovan 3/0 M^r John 469 Latrobe Street West Melbourne 2/14/91 Sister Miss Anna M^r Mungovan C/O M^r Underwood Prince of Wales Hotel Flemington 2/7/91 Sister Miss Anna Maria Mungovan C/O M^r John 469 Latrobe St 10 Melb 28. 2. 92 Or 459 Latrobe St, Melbourne 2/1/93

| CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| | | | | | | | | |

SUBSEQUENT HISTORY

| |
|--|
| |
|--|

No. 17676

Name, John Duncan

Sussey

Sex, male

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. |
|----------------|---------------|-----------|----------------|---------------------|-------------------|----------------------|------------------------|---------------------|
| 6 1 77 | Edinburgh | Pres | | 30 7 90 | Daylesford | Neglected. | 2/6 week 9/20/50 75 | |

| Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | HEALTH. | | | General Remarks. |
|--------------------|---------------------|--------------|-------|----------|-------|---------------------|----------------|--|------------------|
| | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If had Measles, Scarlet Fever, Whooping Cough, or Small Pox. | |
| | 6 1 95 | | | | | | | | |

PREVIOUS HISTORY OF-

Child—
 Father— Joseph Sussey, Miner, Edinburgh, dead.
 Mother— Anne Jensen, House hold servant, Edinburgh, Victoria.

Relations—

Anne Jensen, was the wife of Joseph Sussey, he died, and she married again to Hans Jensen who is also dead. she is now a widow again and has two children, but as she is a servant she is unable to control the boy named herein.

SUBSEQUENT HISTORY OF RELATIONS.

Mr. J. B. Geake, Solicitor, will be glad to know how boy is getting on at times 9/9/57 31

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED | |
|------------------|--------|----------------------------------|-------------------------|-------------|----------|------------------------------|--------------------------|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. |
| 1. 8. 90 | Boyo | 9. 8. 90 | Mrs. Coles Berwick | | | 1. 1. 92 | Mr. Raleigh Glenbrook |
| | | 5. 9. 90 | Mrs. English Berwick | | | | |
| | | 7. 4. 91 | Mrs. McGowan Berwick | | | | |

| CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged | State of Education when Discharged. |
|--------------------|----------------------|---------------------------------|-------------------------------------|
| | | | |

SUBSEQUENT HISTORY.

| SUBSEQUENT HISTORY. |
|---------------------|
| |

No. 17647

Name, Frances Ann

Ball

Sex, Female

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. |
|----------------|---------------------------------|-----------|----------------|---------------------|-------------------|----------------------|--------------------|---------------------|
| 17 9 86 | Longwarry N/6 Gippeland Wash | | | 1 8 90 | Warren | Neglected | | |

| Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | HEALTH. | | | General Remarks. |
|--------------------|---------------------|--------------|-------|----------|-------|---------------------|----------------|--|------------------|
| | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If had Measles, Scarlat Fever, Whooping Cough, or Small Pox. | |
| | 17 9 1884 | | | Both | | | | | |

PREVIOUS HISTORY OF-

Child-
 Father- Richard, Samuel, Ball, deserted.
 Mother- Mary Ann Ball, Longwarry, poor.
 Relations- Brother 17678.

SUBSEQUENT HISTORY OF RELATIONS.

Admitted 7/90 to Mr. Stewart by Rev. Wm. St. Clair, Minister. Mother of Mr. St. Clair, Gardiner St. Clair on the 2.12.90, Police state the mother is addicted to drink but cannot call in a drunkard, never seen her do any work, they have only seen the husband once under the influence of drink. he kept his wife on a life of drinking. with mandate.

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED. | |
|------------------|--------|----------------------------------|-----------------------|-------------|----------|-------------------------------|-----------|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. |
| 2 8 90 | Girle | 26 8 90 | Mrs. Mattson Arach | | | | |

| CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. |
|--------------------|--|----------------------------------|-------------------------------------|
| 29 5 91 | In probation Dec 20 pub Dec 5 Act 1121 to Mother Mrs. Ball, Gardiner | 9 Ballare 121 | |

| SUBSEQUENT HISTORY |
|--------------------|
| |

No. 17678

Name, Richard, John

Ball

Sex, Male

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. |
|----------------|---------------|-----------|----------------|---------------------|-------------------|----------------------|--------------------|---------------------|
| 30 1 88 | Longwarry n/w | | | 1 8 90 | Warragul | Neglected | | |

| Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | HEALTH. | | | General Remarks. |
|--------------------|---------------------|--------------|-------|----------|-------|---------------------|----------------|--|------------------|
| | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If had Measles, Scarlet Fever, Whooping Cough, or Small Pox. | |
| 2 8 90 | 30 1 1906 | | | Both | | | | | |

PREVIOUS HISTORY OF-

Child—
 Father— }
 Mother— } see folio 40
 Relations— Sister 17677

SUBSEQUENT HISTORY OF RELATIONS.

Richard who is known as Richard Mattson now resides at Pearson St Lambton Newcastle N.S.W. Inquiry re date of birth & parentage - 15/4/17. 11-7-18 A note was sent to Richard on 18/12/16 giving particulars of his birth and commitment; he gave the same address 31/6/10935.

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED. | |
|------------------|---------|----------------------------------|-------------------------|-------------|----------|-------------------------------|-----------|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. |
| 2-8-90 | Orlando | 26.9.90 | Edith Mattson Asarah | | | | |

| CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. |
|--------------------|---|----------------------------------|-------------------------------------|
| 29 5 91 | on probation to Mrs Mattson under sec 30 sub sec 5 Act 1121 | | |

SUBSEQUENT HISTORY.

1050

No. 17680

Name, Alfred

Parkinson Sex, male

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. |
|----------------|---------------|-----------|----------------|---------------------|-------------------|----------------------|--|---------------------|
| 9 1 90 | Melbourne | C/E | | 8 8 90 | St Kilda | Neglected | 5/week 1/2-1/2-amount 4/2/5205 8.8.90 | |

| Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | HEALTH. | | Particular Marks (if any). | General Remarks. |
|--------------------|---------------------|--------------|-------|----------|--------|---------------------|----------------|----------------------------|------------------|
| | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | | |
| 8 8 90 | 9 1 1900 | | | Mother | Father | Good | | | |

PREVIOUS HISTORY OF-

Child—
 Father—Thomas Parkinson, Pitman, dead.
 Mother—Margaret Emily Parkinson, General Seaman
 1 Robt Street St Kilda, poor.
 Relations—

SUBSEQUENT HISTORY OF RELATIONS.

Mother of
 Edward, Mr Blackburn Raylaw. Service Robt St St Kilda, was given permission to see child at office 19 4 90. Mother Mrs. McCullum, Euston N.S. Wales. She bears a very good character. Her husband is a laborer and is old. They are in poor circumstances for support. Domestic trouble. Father of Euston. The Acting Secretary refused to give the mother beyond what she was informed that she may write to him through the office. Mrs Jones is not his mother, for with Probate No 546 Mother died on 1.11.05 from influenza & bronchitis pneumonia for 1905 from police.

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED. | |
|------------------|--------|----------------------------------|----------------------------------|-------------|----------|-------------------------------|-----------|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. |
| 8.8.90 | Q ordo | 11.8.90 | Mrs Martin Arthurs | | | | |
| 25.8.90 | do | 8.9.90 | Elizabeth Jones Williamstown. | | | | |
| | | 9.3.91 | Mrs Jones 10' Town | | | | |

| CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|----------|---------|--------------------|---------|---------------------|---------|---------|---------|--|
| Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| | | | | | | | | 16.10.05 boy is of stunted growth being no bigger than the average boy of 12. He suffers from postural growth for which an operation is necessary. He is unfit for laborious work says J.P. for 1912 |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. |
|--------------------|---|----------------------------------|-------------------------------------|
| 30 9 03 | Deceased with 30 Mrs Jones 11 Macquarie St Williamstown No 53 96 | | |

SUBSEQUENT HISTORY

| SUBSEQUENT HISTORY |
|--------------------|
| |

No. 17682 Name, Joseph

Cooney Sex, Male

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. |
|----------------|--------------------|-----------|----------------|---------------------|-------------------|----------------------|------------------------|---------------------|
| 28 6 89 | West Melbourne W/V | | | 11 8 90 | Melbourne | Neglected | Sp. work \$27/52 75 | |

| Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | HEALTH. | | | General Remarks. |
|--------------------|---------------------|--------------|-------|----------|-------|---------------------|----------------|--|------------------|
| | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If had Measles, Scarlet Fever, Whooping Cough, or Small Pox. | |
| | 28 6 1907 | | | | | | | | |

PREVIOUS HISTORY OF-

Child—
 Father— Joseph Byrnes, Coach Driver, Hillston, New South Wales
 Mother— Mary Ann Cooney, Servant, 541 King Street, West Melbourne
 Relations— The mother was in service at the Australian Bank & Stock Bank Hillston, N. Wales, where she was seduced under promise of marriage by Joseph Byrnes, when finding herself pregnant, Byrnes gave her £100 (20) to proceed to Victoria to take her child, he has since supported himself and child, but is unable to do so any longer, she is proceeding to a solicitor at North Hobart, Van. Diemen and to take proceedings against Joseph Byrnes

SUBSEQUENT HISTORY OF RELATIONS.

Letter from Mother, stating what she received from the Petitioner father. \$91 634 with mandate.

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED. | |
|------------------|--------|----------------------------------|---------------------------|-------------|----------|-------------------------------|-----------|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. |
| 11. 8. 90 | Yards | 15. 8. 90 | Ellen Hughes Footscray | | | | |
| | | 1. 8. 91 | Mrs. Green Footscray | | | | |

| CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. |
|--------------------|--|----------------------------------|-------------------------------------|
| 28 6 07 | Dec 20 1895 with Mr. My Green, Latrobe St Footscray No. 5515 | | |

SUBSEQUENT HISTORY.

1

No. 17083 Name, Thomas

Dedrick Sex, Male

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. |
|----------------|----------------------------|-----------|----------------|---------------------|-------------------|----------------------|--------------------|---------------------|
| 28 11 84 | Hemington's Hall Melbourne | Quaker | | 8 8 90 | Aboriginal B. | Neglected | | |

| Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | State on Admission. | HEALTH. | | General Remarks. |
|--------------------|---------------------|--------------|-------|----------|-------|---------------------|----------------|--|------------------|
| | | Date. | Term. | Living. | Dead. | | If Vaccinated. | If had Measles, Scarlet Fever, Whooping Cough, or Small Pox. | |
| 8 8 90 | 28 11 1902 | | | - | Ret. | | | | |

PREVIOUS HISTORY OF-

Child - Half-Caste
 Father - unknown
 Mother - Mary Hamilton, Aboriginal Half-Caste, since dead.
 Relations -

SUBSEQUENT HISTORY OF RELATIONS.

Doctor Shields on re had 894/7644 of 10/11/94

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED. | | CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|------------------|-------------|----------------------------------|--------------------------|-------------|----------|-------------------------------|-----------|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. | Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| 8.8.90 | Quilo Ferry | 15.9.90 | Mrs Fowler Northam | | | | | | | | | | | | | |
| 25-8-91 | do | 1.11.91 | 100 children Northampton | | | | | | | | | | | | | |
| 26-3-95 | do | 1.6.92 | F.P. Shields Northam | | | | | | | | | | | | | |
| | | 1.7.93 | near Carlisle | | | | | | | | | | | | | |
| | | 27/94 | Mrs Osborne Carlton | | | | | | | | | | | | | |
| | | 20/9/94 | Jessie Simpson Leston | | | | | | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. | SUBSEQUENT HISTORY |
|--------------------|---|------------------------------------|-------------------------------------|--------------------|
| 27 3 95 | Prohibition Sec 30 Mrs J. Under Jones 895/2639. | 1789 abandoned on 15-7-96 896/5320 | | |

No. 17684

Name, *Daisy Mary*

Smith Sex, *Female*

| Date of Birth. | Native Place. | Religion. | Read or Write. | Date of Commitment. | Committing Bench. | Cause of Commitment. | Maintenance Order. | Term of Commitment. |
|--------------------|---------------|-----------|----------------|---------------------|-------------------|----------------------|--------------------|---------------------|
| 25 7 90 | Carlton Gt | C/8 | | 14 8 90 | Melbourne | Neglected | | |
| 25 7 90 | | | | | | | | |

| Date of Admission. | Expiration of Term. | RECOMMENDED. | | PARENTS. | | HEALTH. | | | General Remarks. |
|--------------------|---------------------|--------------|-------|----------|-------|---------------------|----------------|--|------------------|
| | | Date. | Term. | Living. | Dead. | State on Admission. | If Vaccinated. | If had Measles, Scarlet Fever, Whooping Cough, or Small Pox. | |
| 14 8 90 | 25 7 1908 | | | Mother | | | | | |

PREVIOUS HISTORY OF-

Child—
 Father— *Henry Smith, Bank Clerk, supposed London, England.*
 Mother— *Emma Smith, Ladies companion, 111/12 Avenue Road, N. 10.*
 Relations—
The Mother Emma Smith, was seduced under promise of marriage and when the father became aware of her condition, he deserted to London. She then left England to hide her shame.

SUBSEQUENT HISTORY OF RELATIONS.

Lady Clarke, was interested in getting this child committed. Letters with mandate 22. 8. 90. Mrs. Clarke on 6. 2. 99 received death returned unclaimed 14/2/99

SUBSEQUENT HISTORY OF CHILD.

| WHERE STATIONED. | | WITH WHOM AND WHERE BOARDED OUT. | | IF ADOPTED. | | WITH WHOM AND WHERE LICENSED. | |
|------------------|----------------------------|----------------------------------|--------------------------|-------------|----------|-------------------------------|-----------|
| Date. | Depot. | Date. | Foster Parent. | Date. | By whom. | Date. | Licensee. |
| 14. 8. 90 | <i>Girls</i> | 14. 8. 90 | <i>Mrs W. Kelan</i> | | | | |
| 4. 9. 96 | <i>6 Bedford Street</i> | | <i>F. Osborne</i> | | | | |
| 3. 12. 78 | <i>Children's Hospital</i> | 6. 91 | <i>Mrs Dick</i> | | | | |
| | | 22. 9. 96 | <i>Rel'd to Mrs Dick</i> | | | | |
| | | 17. 1. 99 | <i>Rel'd to Mrs Dick</i> | | | | |

| CONDUCT. | | SCHOOL ATTENDANCE. | | SCHOOL PROFICIENCY. | | HEALTH. | | General Remarks. |
|----------|---------|--------------------|---------|---------------------|---------|---------|---------|------------------|
| Date. | Report. | Date. | Report. | Date. | Report. | Date. | Report. | |
| | | | | | | | | |

DISCHARGE.

| Date of Discharge. | Manner of Discharge. | State of Health when Discharged. | State of Education when Discharged. |
|--------------------|-------------------------|----------------------------------|-------------------------------------|
| 2 2 99 | <i>Disd B 099 / 472</i> | | |

SUBSEQUENT HISTORY

| SUBSEQUENT HISTORY |
|--------------------|
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