

DEPARTMENT OF PUBLIC WELFARE

RECORD ROOM - BASEMENT - 327 ST. PAUL PLACE

SERIAL NUMBER	SERIAL DATE	SUBJECT	YEARS AFFECTED
1	12-19-38	(CASE HISTORY RECORDS - ACTIVE CASES)	1930--
2	12-19-38	(MASTER FILE - INDEX)	1933--
3	12-19-38	(MASTER FILE INDEX ^{ADC - AID TO DEPENDENT CHILDREN} ^{OAP - OLD AGE PENSION} ^{A TO B - AID TO THE BLIND} ^{CCC - CIVILIAN CONSERVATION CORPS})	1930--
4	12-19-38	(RECORD OF MAJOR PROBLEMS OF PERSONS RECEIVING RELIEF - STATISTICAL RECORD - EMERGENCY CHARITY ASSO)	1936-37
5	12-21-38	(INDEX OF ASSIGNMENTS TO SOCIAL WORKERS)	1936--
6	12-16-38	(APPLICANTS IDENTIFICATION CARD - RELIEF AND NON-RELIEF CLIENT'S - AS ISSUED BY U.S. DEPARTMENT OF LABOR)	1935-36
7	12-6-38	"CLOSED FILE" (CASE HISTORY RECORDS)	1933--
8	12-8-38	"CLOSED FILES" (^{AID TO DEPENDENT CHILDREN} ^{OLD AGE PENSION} ^{AID TO BLIND})	1930--
9	12-5-38	"CLOSED FILES - O.T.I." (OUT OF TOWN INQUIRIES)	1935--
10	12-2-38	"CLOSED FILES" (CASE HISTORY RECORDS - REFERRALS) D.P.W. - (DEPT. OF PUBLIC WELFARE)	1938--
11	12-1-38	"CLOSED FILES CCC" - (CIVILIAN CONSERVATION CORPS)	1937--
12	12-2-38	"CLOSED FILE - MISC. FILE"	1933--
13	12-5-38	^{BERG " BALTO. EMERGENCY RELIEF COM.} ^{ECA " EMERGENCY CHARITY ASSO} "NO CASE MADE FILE W.P.A." WORKS PROGRESS ADMINISTRATION	1933--
14	12-20-38	(RECORD OF PERSONS WORKING ON W.P.A. AND OF PERSONS WHO HAD BEEN WORKING ON W.P.A.)	1936--
15	12-16-38	(W.P.A. ASSIGNMENTS - CUT-OFFS AND RECLASSIFICATIONS)	1935--
16	12-19-38	(RECORD OF NON-RELIEF CLIENTS ELIGIBLE FOR W.P.A. PROJECT)	1935--
17	12-20-38	(ACTIVE FILE - REFERRALS TO W.P.A.)	1937--
18	12-19-38	(NOTICE OF FAILURE TO REPORT OR REFUSAL TO ACCEPT REFERRAL)	1935-36
19	12-16-38	(OUT OF TOWN INQUIRIES)	1935-36
20	12-5-38	(OUT OF TOWN INQUIRIES - OLD AGE AND MOTHERS ASSISTANCE)	1933--

NOTE

THE "BALTIMORE EMERGENCY RELIEF COMMISSION" WAS FORMED SEPTEMBER 1-1933 AND CONTINUED UNTIL JUNE 1936.

THE "EMERGENCY CHARITY ASSOCIATION" WAS FORMED IN JUNE 1936 AND CONTINUED UNTIL JUNE 1937; DURING WHICH PERIOD IT HANDLED ONLY GENERAL PUBLIC ASSISTANCE.

THE PRESENT "DEPARTMENT OF PUBLIC WELFARE" WAS ESTABLISHED IN JANUARY 10TH 1935 AND HANDLED ONLY OLD AGE PENSIONS- MOTHER'S ASSISTANCE AND HOSPITALIZATION; IN JUNE 1937 THIS AGENCY ALSO TOOK OVER GENERAL PUBLIC ASSISTANCE, COMPLETING THE ENTIRE SET-UP.

Kovako-Scott
(Worker's full name)

12-19-38
(Date)

1 ✓
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland
Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place
(Name of building, room number, street address)

1. Title (Case History Records - Active Cases)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1930--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 144 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling See addenda sheets, list of file drawers as labeled.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CASE Records of individuals consists of record out card
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,

(office record of workers taking out and return of case
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
papers in each individual folder); face sheet (identification
record of client); Social Service Exchange identification;
application for relief; case history record; social
workers investigations and summary of case; application
for general public assistance; correspondence requesting
relief; marriage report; dispensary report; references
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued regarding employment; authorization as to turning over to Department of Public Welfare all finances and insurance held; employer's reports; correspondence between the Mayor and the Dept. of Public Welfare regarding employment; social workers authorization for allowance check, commodities, etc;
7. Arrangement Alph. by names of clients
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Typed and handwritten on plain paper, printed heads and printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of steel file drawer 11 1/4" x 14" x 26" Average 250 cases per drawer
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
(Average 30 papers per case)
11. Location by dates and quantities 1930-TO DATE - 144 steel File drawers
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
in north west corner in record room (in cellar.)
12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)
cont. from line 6 insurance reports; removal notices; references from religious organizations and other charities concerning relief for client; reports from State Industrial Accident Commission respecting injuries while employed; information and application for old age pension; entry ticket for relief allowance.
13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

(Case History Records - Active Cases)

continued from line 6; list of steel file drawers.

labeled as follows

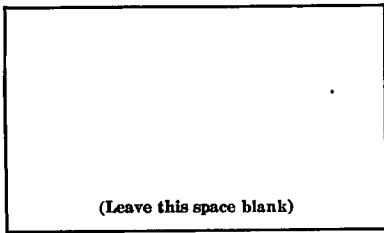
Goodrich	A-M	Southern	No. 1	
"	N-Z	"	No. 1	
Purnell	A-Z	"	No. 2	
Waechter	A-Z	"	No. 3	
Sharkey	A-Z	"	No. 4	
Adams	A-Z	"	No. 5	
Schmidt	A-Z	"	No. 6	
Roberts	A-Z	"	No. 7	
Maloney-Schuetz	A-N	Southern	No. 8	
"	"	N-Z	"	No. 8
W. Reddick	A-Z	Southern	No. 9	
Rosedorn	A-Z	"	No. 9	
Nicholson	A-Z	"	No. 10	
Hill	A-Z	"	No. 11	
Siegel	A-N	"	No. 12	
"	O-Z	"	No. 12	
Herzog	A-N	"	No. 13	
"	O-Z	"	No. 13	
Kaufman	A-Z	"	No. 14	
Underwood	A-Z	"	No. 15	
Hayden	A-Z	"	No. 16	
Meyer	A-Z	"	No. 17	

WORKS PROGRESS ADMINISTRATION

SURVEY OF STATE AND LOCAL HISTORICAL RECORDS: 1936

HISTORICAL RECORDS SURVEY

(Name of State)



THE PAINTINGS AND STATUARY FORM

County City or town

Agency or department

Bureau

Name of other owner, if any

Name of building (Street address)

1. Item or items (Paintings, etchings, drawings, statues, etc.)

2. Title or subject

3. (Number of items) (Date or dates) (Size or sizes)

4. Indicate by an (x) whether: Oil (), watercolor (), engraved (), crayon (), pen-and-ink (), photostat (), mounted (), framed (), marble (), bronze ().

5. Condition of work

6. Artist (Publisher or engraver) (Place of publication)

7. Location (Rooms and vaults, corridors, parks, etc.)

8. Other information

(Case History Records - Active Cases)

Addenda sheet 2

Continued from addenda sheet 1

Werner	A-M	Southern	No. 18	
"	N-Z	"	No. 18	
Gardner	A-R	"	No. 19	
Gardner	S-Z	"	No. 19	} 1 drawer
Geller	A-Z	Northern	No. 34	
M. Williams	A-Z	Southern	No. 20	
Lurie	A-R	"	No. 21	
Hipolite	A-Z	"	No. 22	
Berman	A-R	"	No. 23	
Berman	S-Z	"	No. 23	} 1 drawer
January	S-Z	Western	No. 12	
Sirkis	A-Z	Southern	No. 24	
Roy	A-Z	"	No. 25	
Cesar	A-Z	"	No. 26	
Supik	A-M	"	No. 27	
Supik	N-Z	"	No. 27	
Maloney	A-Z	"	No. 28	
Tepletzky	A-Z	"	No. 29	
Smith	A-Z	"	No. 30	
Solomon	A-Z	Eastern	No. 1	
Mr. Keener	A-M	"	No. 2	
Mr. Keener	N-Z	"	No. 2	

WORKS PROGRESS ADMINISTRATION

SURVEY OF STATE AND LOCAL HISTORICAL RECORDS: 1936

HISTORICAL RECORDS SURVEY

(Name of State)

THE PAINTINGS AND STATUARY FORM

(Leave this space blank)

County City or town

Agency or department

Bureau

Name of other owner, if any

Name of building (Street address)

1. Item or items (Paintings, etchings, drawings, statues, etc.)

2. Title or subject

3. (Number of items) (Date or dates) (Size or sizes)

4. Indicate by an (x) whether: Oil (), watercolor (), engraved (), crayon (), pen-and-ink (), photostat (), mounted (), framed (), marble (), bronze ().

5. Condition of work

6. Artist (Publisher or engraver) (Place of publication)

7. Location (Rooms and vaults, corridors, parks, etc.)

8. Other information

(Case History Records - Active Cases)

Addenda sheet 3

Continued from addenda sheet 2

Holt	A-2	Eastern	No. 3
Hall	A-2	"	No. 4
Temin	A-2	"	No. 5
Hect	A-2	"	No. 6
Weinstein	A-2	"	No. 7
Dunn	A-2	"	No. 8
Michelson	A-2	"	No. 9
Bevans	A-2	"	No. 10
Jandorf	A-2	"	No. 11
Neufeld	A-2	"	No. 12
Jacobs	A-2	"	No. 13
Wesley	A-2	"	No. 14
Hetzer	A-2	"	No. 15
Draper	"	"	No. 16
Draper	S-2	"	No. 16
McCusker	A-2	"	No. 17
Dockhorn	A-2	"	No. 18
Rosenblatt	A-2	"	No. 19
De Cesare	A-2	"	No. 20
Bean	A-2	"	No. 21
Hollingsworth	A-2	"	No. 22
Kandel	A-2	"	No. 23
Stevens	A-2	"	No. 24
Barranger	A-2	"	No. 25

WORKS PROGRESS ADMINISTRATION

SURVEY OF STATE AND LOCAL HISTORICAL RECORDS: 1936

HISTORICAL RECORDS SURVEY

(Name of State)

THE PAINTINGS AND STATUARY FORM

(Leave this space blank)

County City or town

Agency or department

Bureau

Name of other owner, if any

Name of building
(Street address)

1. Item or items
(Paintings, etchings, drawings, statues, etc.)

2. Title or subject

3.
(Number of items) (Date or dates) (Size or sizes)

4. Indicate by an (x) whether: Oil (), watercolor (), engraved (), crayon (), pen-and-ink (),
photostat (), mounted (), framed (), marble (), bronze ().

5. Condition of work

6. Artist
(Publisher or engraver) (Place of publication)

7. Location
(Rooms and vaults, corridors, parks, etc.)

8. Other information

(Case History Records - Active Cases)

Addenda sheet 4

Continued from addenda sheet 3

Kirby	A-2	Eastern	No. 26
Dobson	A-2	"	No. 27
Bates	A-2	"	No. 28
Croswell	A-2	"	No. 29
Gregg	A-2	"	No. 30
Trader	A-2	"	No. 31
Keener	A-2	Northern	No. 1
Epes	A-S	"	No. 2
Crostonopol	A-2	"	No. 3
Wilder	A-R	"	No. 4
Wilder	S-2	"	No. 4
Epes	T-2	"	No. 2
Willis	A-2	"	No. 5
J. Goodman	A-M	"	No. 6
J. Goodman	N-2	"	No. 6
Reddick	A-2	"	No. 7
Clayton	A-2	"	No. 8
Hilliard	A-2	"	No. 9
Freeman	A-2	"	No. 10
Lewis	A-2	"	No. 11
Lisansky	A-2	"	No. 12
Benham	A-2	"	No. 13
Cohen	A-2	"	No. 14

WORKS PROGRESS ADMINISTRATION

SURVEY OF STATE AND LOCAL HISTORICAL RECORDS: 1936

HISTORICAL RECORDS SURVEY

(Name of State)

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1. Item or items
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2. Title or subject

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(Number of items) (Date or dates) (Size or sizes)

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photostat (), mounted (), framed (), marble (), bronze ().

5. Condition of work

6. Artist
(Publisher or engraver) (Place of publication)

7. Location
(Rooms and vaults, corridors, parks, etc.)

8. Other information

(Case History Records - Active Cases)

Addenda sheet 5

Continued from addenda sheet 4

Vigilante	A-2	Northern	No. 15
Wilson	A-2	"	No. 16
Baerwald	A-2	"	No. 17
Stern	A-2	"	No. 18
Hoene	A-2	"	No. 19
Hyman	A-2	"	No. 20
Owings	A-2	"	No. 21
Biser	A-2	"	No. 22
Dorman	A-2	"	No. 23
Wade	A-2	"	No. 24
Eisenberg	A-R	"	No. 25
Eisenberg	S-2	"	No. 25
Cooper	A-2	"	No. 26
Mohlhenrich	A-2	"	No. 27
Brooks	A-2	"	No. 28
Keyser	A-2	"	No. 29
Kolker	A-2	"	No. 30
Junge	A-2	"	No. 31
Woodbury	A-2	"	No. 32
Harrison	A-2	"	No. 33
Thomas	A-2	Western	No. 1
Tucher	A-2	"	No. 2
Alleyne	A-2	"	No. 3

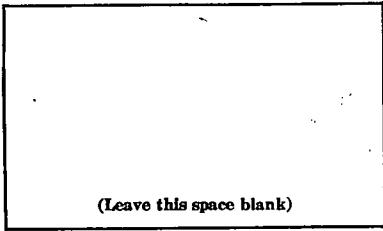
WORKS PROGRESS ADMINISTRATION

SURVEY OF STATE AND LOCAL HISTORICAL RECORDS: 1936

HISTORICAL RECORDS SURVEY

(Name of State)

THE PAINTINGS AND STATUARY FORM



County City or town

Agency or department

Bureau

Name of other owner, if any

Name of building (Street address)

1. Item or items (Paintings, etchings, drawings, statues, etc.)

2. Title or subject

3. (Number of items) (Date or dates) (Size or sizes)

4. Indicate by an (x) whether: Oil (), watercolor (), engraved (), crayon (), pen-and-ink (), photostat (), mounted (), framed (), marble (), bronze ().

5. Condition of work

6. Artist (Publisher or engraver) (Place of publication)

7. Location (Rooms and vaults, corridors, parks, etc.)

8. Other information

(Case History Records - Active Cases)

Addenda sheet 6

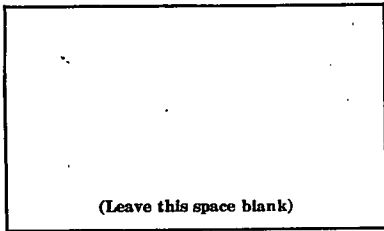
Continued from addenda sheet 5

Waters	A-Z	Western	No. 4
Marshall	A-Z	"	No. 5
Schwartz	A-Z	"	No. 6
Trigg	A-Z	"	No. 7
Gruebel	A-Z	"	No. 8
Bryant	A-M	"	No. 9
Bryant	N-Z	"	No. 9
Barclay	A-Z	"	No. 10
Fowler	A-Z	"	No. 11
January	A-R	"	No. 12
Rasin	A-Z	"	No. 13
Gehring	A-Z	"	No. 14
Wells	A-M	"	No. 15
Wells	N-Z	"	No. 15
Clough	A-Z	"	No. 16
Mehling	A-Z	"	No. 17
Salkin	A-Z	"	No. 18
Klemme	A-M	"	No. 19
Klemme	N-Z	"	No. 19
Quinlin	A-Z	"	No. 20
Bird	A-Z	"	No. 21
Judge	A-Z	"	No. 22

WORKS PROGRESS ADMINISTRATION

SURVEY OF STATE AND LOCAL HISTORICAL RECORDS: 1936
HISTORICAL RECORDS SURVEY

(Name of State)



(Leave this space blank)

THE PAINTINGS AND STATUARY FORM

County City or town

Agency or department

Bureau

Name of other owner, if any

Name of building
(Street address)

1. Item or items
(Paintings, etchings, drawings, statues, etc.)

2. Title or subject

3.
(Number of items) (Date or dates) (Size or sizes)

4. Indicate by an (x) whether: Oil (), watercolor (), engraved (), crayon (), pen-and-ink (),
photostat (), mounted (), framed (), marble (), bronze ().

5. Condition of work

6. Artist
(Publisher or engraver) (Place of publication)

7. Location
(Rooms and vaults, corridors, parks, etc.)

8. Other information

(Case History Records - Active Cases)

Addenda sheet 7

Continued from addenda sheet 6

L. Brown	A-2	Western	No. 23
Reed	A-2	"	No. 24
Luthy	A-M	"	No. 25
Luthy	N-2	"	No. 26
Dwyer	A-2	"	No. 27
Duker	A-2	"	No. 28
Coplan	A-2	"	No. 29
Lyon's	A-2	"	No. 30

WORKS PROGRESS ADMINISTRATION
SURVEY OF STATE AND LOCAL HISTORICAL RECORDS 1936
HISTORICAL RECORDS SURVEY

WPA Form 11HR

Name of State

THE PRINTED RECORDS FORM

(Leave this space blank)

County: _____ City or town: _____

Agency or department: _____

Bureau: _____

1. Title of set of records in which publication appears (if any): _____

2. Title of publication: _____

3. Dates, total volumes, and volume numbering or lettering: _____

4. Missing volumes, by numbers and dates: _____

5. Average number of pages per volume: _____

6. Average height, width, and thickness of volumes: _____

7. Indexing: _____

8. Condition of printing, paper, binding: _____

9. Location by dates and volume numbers: _____

10. Major subjects covered: _____

11. Other information: _____

Kovaka - Scott

(Worker's full name)

12-19-38

(Date)

2

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland
Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place
(Name of building, room number, street address)

1. Title (Master File - Index)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1933--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 99 Wooden file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling See addenda sheets - list of file drawers as labeled.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Master index cards, including cross reference cards
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,

and master file inquiry cards; master index cards
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by

show surname and given names of man and woman;
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

previous marriage; alias; dates of births of man and woman;

places of births; occupation; race; defects; family status;

address of client; district; dates transferred and closed from

E.C.A.; date of acceptance; date of closing of case; reason; names

of children; dates of births; addresses, if different; relatives and

6. Contents—continued others also their addresses and kinship;
Cross reference cards show name of client; man or woman;
alias; address and relationship; master file inquiry
card (temporary registrations); show surname and given
names of man and woman; address; dates of appointments; (Cont. on line 12)

7. Arrangement Alph. (by code called Soundex System), by names of clients.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by
title and identification number)

9. Writing Typed and handwritten on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of file drawers 4 3/4 x 6 x 4" (Average 500 cases per drawer. -
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
3 cards per case)

11. Location by dates and quantities 1933 to date, 99 wooden file drawers
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
near south wall in record room, in cellar.

12. Other information Records and equipment in good condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

continued from line 6 ~ additional members in family;
race; dates of births of all members in family; classification
of assistance applied for and signature of clerk.

Note: Above index supports all general public
assistance cases.

13. (For use in Florida.) Early imprints (Author) (Publisher)

(Place of publication)

(Date of publication)

(Department of Public Welfare Master Index)

Addenda sheet 1

Continued from line 6, list of file drawers labeled

as follows

A - A (lbm)

A (lbr) - A (mdr)

A (mdr) - B (c)

B (c) - B (cr)

B (cr) - B (drr)

B (L) - B (ld)

B (ldb) - B (mcm)

B (mcr) - B (rc)

B (rc) - B (rd)

B (rd) - B (rm)

B (rm)

B (rm) - C (bdr)

C (bl) - C (cdm)

C (cdr) - C (lbr)

C (lc) - C (lrc)

C (ld) - C (mrd)

C (mm) - C (rcd)

C (rcd) - C (rm)

C (rmb) - C (prd)

D (bb) - D (cm)

D (cm) - D (lcm)

D (lcr) - D (lmr)

D (mm) - E (blr)

E (bm) - E (l)

E (lb) - E (cbr)

F (cdr) - F (ld)

F (ldb) - F (rbr)

F (rc) - F (rmc)

F (rmd) - G (cr)

G (crc) - G (ldc)

G (ldm) - G (r)

G (r) - G (rdl)

G (rcd) - G (rm)

G (rm) - Hughes

H (b) - H (ccm)

H (cd) - H (dcm)

H (der) - H (lbm)

H (lbr) - H (mbr)

H (mc) - H (mm)

H (mmc) - H (rcm)

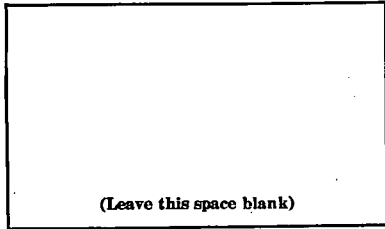
Harrison - H (rmc)

H (rmd) - Jacobs

J (cbe) - J (m)

James (m) - Johnson (mcm)

Johnson (mcm)



SURVEY OF STATE AND LOCAL HISTORICAL RECORDS: 1936

HISTORICAL RECORDS SURVEY

(Name of State)

THE PAINTINGS AND STATUARY FORM

County City or town

Agency or department

Bureau

Name of other owner, if any

Name of building (Street address)

1. Item or items (Paintings, etchings, drawings, statues, etc.)

2. Title or subject

3. (Number of items) (Date or dates) (Size or sizes)

4. Indicate by an (x) whether: Oil (), watercolor (), engraved (), crayon (), pen-and-ink (), photostat (), mounted (), framed (), marble (), bronze ().

5. Condition of work

6. Artist (Publisher or engraver) (Place of publication)

7. Location (Rooms and vaults, corridors, parks, etc.)

8. Other information

(Department of Public Welfare - Master Index)

Addenda sheet 2

Continued from addenda sheet #1

J(md) - K(cl)
 K(cib) - K(ld)
 K(lidb) - K(mc)
 K(mcb) - K(rcr)
 K(ird) - L(rmr)
 L(b) - L(ccm)
 L(cd) - L(l)
 L(lbr) - L(mdr)
 L(ml) - M(c)
 M(cle) - M(cmr)
 M(cr) - M(del)
 M(dcm) - M(lr)
 M(lr) - M(md)
 M(mdm) - M(r)
 M(r) - M(rd)
 M(rdm) - N(cl)
 N(cle) - N(rbl)
 N(rbr) - O(lcd)
 O(lcl) - P(ccl)
 P(ccm) - P(drr)
 P(lmr)
 P(lr) - P(rc)
 P(rc) - P(rmd)
 P(roml) - R(bl m)

R(bm) - R(c)
 R(c) - R(cio)
 R(cio) - R(dl)
 R(dlb) - R(mc)
 R(mcb-rir) - S(b-bc)
 S(bcb) - S(brc)
 S(brd) - S(d)
 S(d) - S(dlm)
 S(dlr) - S(drd)
 S(drd) - S(lcr)
 S(ld) - S(mbr)
 S(mc) - S(md)
 S(md)
 S(md)
 S(mmb) - S(rd)
 S(rdb-rir) - T(b-cim)
 T(d-lr)
 T(lr) - T(mbc)
 T(mbc-rm)
 T(rmb-drc)
 V(l-rmr) - W(bc)
 W(cb-d)
 W(d-dd)
 W(dl-lc)

W(lc-ldl)

W(ldm-lm)

W(lm-rd)

W(rd-rmr) - Y(b-mc)

Y(mc-rm) - Z

WORKS PROGRESS ADMINISTRATION

SURVEY OF STATE AND LOCAL HISTORICAL RECORDS: 1936

HISTORICAL RECORDS SURVEY

(Name of State)

THE PAINTINGS AND STATUARY FORM

(Leave this space blank)

County City or town

Agency or department

Bureau

Name of other owner, if any

Name of building (Street address)

1. Item or items (Paintings, etchings, drawings, statues, etc.)

2. Title or subject

3. (Number of items) (Date or dates) (Size or sizes)

4. Indicate by an (x) whether: Oil (), watercolor (), engraved (), crayon (), pen-and-ink (), photostat (), mounted (), framed (), marble (), bronze ().

5. Condition of work

6. Artist (Publisher or engraver) (Place of publication)

7. Location (Rooms and vaults, corridors, parks, etc.)

8. Other information

SCOTT-KOVAKA

(Worker's full name)

12-19-38

(Date)

3

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 ST. PAUL PLACE
(Name of building, room number, street address)
RECORD ROOM - BASEMENT

1. Title (MASTER FILE INDEX) AFC - AID TO DEPENDENT CHILDREN
OAP - OLD AGE PENSION
ATOB - AID TO THE BLIND
CCC - CIVILIAN CONSERVATION CORPS.
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities)

or both)

2. Dates 1930--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 25 - STEEL FILE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other) SEE ADDENDA SHEET

4. Labeling DRAWERS LABELED WITH INCLUSIVE LETTERING HIST OF DRAWERS
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINING MASTER FILE INDEX OF CASES KNOWN AS - AID TO DEPENDENT
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record.

CHILDREN - OLD AGE PENSION - AID TO THE BLIND - CIVILIAN CONSERVATION
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by

CORPS - SHOWING NAMES OF APPLICANTS, DATE OF BIRTH, RACE, CASE NUMBER,
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

PAY-ROLL NUMBER UNDER SPECIFIC CLASSIFICATIONS, AS NOTED ABOVE, ALI AS,

PREVIOUS MARRIAGE, FAMILY STATUS, RELIGION, ADDRESS, DATE OF APPLICATION,

DATE OF GRANT, DATE CASE CLOSED, REASON CASE CLOSED, NAMES OF CHILDREN,

DATES OF BIRTH, CLASSIFICATION OF GRANT - ON REVERSE SIDE IS SHOWN

REFERENCES AS TO OTHER MEMBERS OF THE FAMILY.

6. Contents—continued _____

7. Arrangement ALPHABETICALLY BY NAMES OF CLIENTS.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN AND TYPED ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWERS 4" x 6" x 16" AVERAGE 1200 CARDS PER DRAWER
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
SIZE OF CARDS 3" x 5"

11. Location by dates and quantities 1930 To DATE - 25 - STEEL FILE DRAWERS LOCATED
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
NEAR EAST WALL OF RECORD ROOM IN BASEMENT.

12. Other information RECORDS AND CONTAINERS ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)

NOTE: THIS INDEX SUPPORTS ALL CASES IN THE CATEGORIES ABOVE NOTED.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

ADC - AID TO DEPENDENT CHILDREN
 OAP - OLD AGE PENSION
 ATOB - AID TO THE BLIND
 CCC - CIVILIAN CONSERVATION CORPS

(MASTER FILE INDEX)

25-DRAWERS LABELED WITH INCLUSIVE LETTERING AS FOLLOWS:-

- " A - BAG
- BEA - BRI
- BRO - CAP
- CAR - CON
- COOK - DEY
- DIA - EYL
- FAB - FUS
- GAB - GWY
- HAA - HEP
- HER - HYS
- ICEN - JON
- JONES - KOZ
- KRA - LOZ
- LUB - MCW.
- MEA - MUR
- MUR - FAY
- PER - REE
- REE - ROZ
- RUA - SHA
- SHE - SOW
- SPA - SZY
- TAB - TYS
- U'DEL - WEI
- WEL - WILM.
- WILS - Z.W.O.

Kovaka-Scott

(Worker's full name)

12-19-38

(Date)

4

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE., NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place.
(Name of building, room number, street address)

1. Title (Record of Major Problems of Persons Receiving Relief - Statistical Record - Emergency Charity Asso.)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates June 16, 1936-1937.
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 12 steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Not labeled
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Cards contain record of major problems of relief clients showing social worker's names; their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by surname of clients, given names of man and woman; type of case; case number; address of client; date of last opening; date of last closing; number in budget group and date; exact dates of births, deaths and birthplaces of each person in family; others in household, showing names, sex, dates
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record. Each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued of births and relationship; dates; members of household, (man and woman) came to U.S., and to Baltimore City; whether citizen or alien; usual industry; usual occupation; reason unemployed; color; parentage class; religion; marital status; class of problem; date of intake; date of (continue on) (line 12)
7. Arrangement Alph. by surnames of clients
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Typed on printed form (cards)
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of file drawers 6" X 9 X 18" Average 703 cards per drawer.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities June 1936-1937, 12 steel file drawers
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
on east wall in record room in cellar.
12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 6 — classification as to relief; total income received from E.C.A.; supplementation of family's own income by E.C.A.; date case closed; reason for closing case; date of major problem.
- Note E.C.A. = Emergency Charity Association
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Kovokd-Scott
(Worker's full name)

12-21-38
(Date)

5
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland
Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place.
(Name of building, room number, street address)

1. Title (Index of Assignments to Social Workers)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1936--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 4 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Drawers labeled A-E; F-M; N-S; T-Z
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Card shows name of street; block numbers;
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

Ward number and Social Workers' district number.
Record of assignments of cases to Social Workers.

6. Contents—continued _____

7. Arrangement Alph. by names of streets
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on ruled cards
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of file drawers 4"x5'4"x16" Average 5000 cards per drawer.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1936 to date, 4 file drawers on south wall in record room, in cellar.
(Room, vault, wall—N. E| S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

SCOTT-KOVAKA
(Worker's full name)

12-16-38
(Date)

6
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND
Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 ST. PAUL PLACE
(Name of building, room number, street address)
RECORD ROOM - BASEMENT.

- Title (APPLICANT'S IDENTIFICATION CARD - RELIEF AND NON-RELIEF CLIENTS - AS ISSUED BY U. S. DEPARTMENT OF LABOR)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
- Dates 1935-1936
(Earliest and latest dates; missing dates. Show exact date of breaks)
- Quantity 11 - STEEL FILE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other) SEE ADDENDA SHEETS
- Labeling DRAWERS LABELED WITH INCLUSIVE LETTERING LIST OF DRAWERS
(Explain fully; years; numbers; letters; number of records so labeled)
- Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)
- Contents CONTAINING RELIEF AND NON-RELIEF CLIENTS IDENTIFICATION CARDS AS ISSUED BY U. S. DEPARTMENT OF LABOR, SHOWING CASE NUMBER, IDENTIFICATION NUMBER, NAME AND ADDRESS OF APPLICANT, AGE, HEIGHT AND WEIGHT, PRINCIPAL AND SECONDARY CLASSIFICATION, REGISTRATION DATES, ALSO DATE PLACED ON PROTECT. - ON REVERSE SIDE APPEARS DATE RECEIVED IN THE DEPARTMENT OF PUBLIC WELFARE.
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued _____

7. Arrangement ALPHABETICALLY BY NAME OF APPLICANT
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN ON PRINTED CARDS
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWERS 4 1/4" x 5 1/4" x 16 AVERAGE 1200 CARDS
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
PER DRAWER

11. Location by dates and quantities 1935-1936 - 11- STEEL FILE DRAWERS LOCATED
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
NEAR WEST WALL OF RECORD ROOM IN BASEMENT.

12. Other information RECORD AND CONTAINERS ARE IN EXCELLENT CONDITION
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)

NOTE :- THESE RECORDS WERE DISCONTINUED IN YEAR 1936 AND NOW USED FOR REFERENCE PURPOSES ONLY.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

APPLICANT'S IDENTIFICATION CARD - RELIEF AND NON-RELIEF CLIENTS -

AS ISSUED BY U.S. DEPARTMENT

11-STEEL FILE DRAWERS LABELED AS FOLLOWS:-

- " A. A. To BRO "
- BROWN To CU
- DAA To FA
- GA To HI
- HOA To KEM
- KH To MAN
- MAR To OG.
- OM To ROS
- ROT To SN
- SP To VI
- WAA To Z.

WORKS PROGRESS ADMINISTRATION

SURVEY OF STATE AND LOCAL HISTORICAL RECORDS: 1936

HISTORICAL RECORDS SURVEY

(Name of State)

THE PAINTINGS AND STATUARY FORM

(Leave this space blank)

County City or town

Agency or department

Bureau

Name of other owner, if any

Name of building
(Street address)

1. Item or items
(Paintings, etchings, drawings, statues, etc.)

2. Title or subject

3.
(Number of items) (Date or dates) (Size or sizes)

4. Indicate by an (x) whether: Oil (), watercolor (), engraved (), crayon (), pen-and-ink (),
photostat (), mounted (), framed (), marble (), bronze ().

5. Condition of work

6. Artist
(Publisher or engraver) (Place of publication)

7. Location
(Rooms and vaults, corridors, parks, etc.)

8. Other information

SCOTT-KOVAKA
(Worker's full name)

12-6-38.
(Date)

7
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND
Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 ST. PAUL PLACE
(Name of building, room number, street address)
BASEMENT - RECORD ROOM

1. Title "CLOSED FILE"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
(CASE HISTORY RECORDS)
or both)

2. Dates 1933 --
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 506- STEEL FILE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling AS SHOWN ON LINE 1- WITH INCLUSIVE LETTERING } SEE ADDENDA SHEETS
(Explain fully; years; numbers; letters; number of records so labeled) } LIST OF DRAWERS

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINING CLOSED CASE HISTORY RECORDS OF PERSONS HAVING RECEIVED
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
AID FROM THE DEPARTMENT OF PUBLIC WELFARE, INCLUDING INTERVIEW
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
APPLICATION BLANKS GIVING FULL HISTORY OF APPLICANT, SOCIAL WORKERS
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
INVESTIGATION HISTORY OF APPLICANT, CASE HISTORY RECORD, CORRESPONDENCE
RELATIVE TO THE FURNISHING OF WEARING APPAREL, COMMODITIES AND OTHER
ARTICLES, ALSO RENT NOTIFICATIONS, CORRESPONDENCE RELATING TO WORK
ASSIGNMENTS, MEDICAL REPORTS, APPLICATIONS FOR RELIEF, REPORTS OF
PREVIOUS EMPLOYMENT, REQUESTS FOR POLICE INFORMATION, REPORTS

6. Contents—continued *AS TO CUT-OFFS, RECORD OF BUDGET ALLOWANCES AND REPORTS, ASSIGNMENTS AND IDENTIFICATION FOR WORK, RECORD OF INSURANCE CARRIED, IF ANY, REGISTRATION CARD FROM NATIONAL RE-EMPLOYMENT SERVICE AND CERTIFICATION OF ELIGIBILITY FOR WORK.*
7. Arrangement *ALPHABETICALLY BY NAME OF APPLICANT*
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing *NONE*
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing *HANDWRITTEN AND TYPED ON PRINTED HEADS - PRINTED FORMS AND PLAIN PAPER.*
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size *OF STEEL FILE DRAWERS 11 1/2" X 14" X 26 1/2" AVERAGE 200 CASES PER DRAWER -*
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities *1933 TO DATE - 506 - LOCATED IN THE NORTH-EAST SECTION OF RECORD ROOM BASEMENT.*
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information *RECORD AND CONTAINERS ARE IN EXCELLENT CONDITION.*
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

"CLOSE FILE"

LIST OF DRAWERS LABELED AS FOLLOWS:

"AAMON -	ADAM (CHARLES)"	BOLAN (MOLBROOK-GERTRUDE)-Bony (ROGER- ^{MARY})
ADAMS (CLARENCE)-	ADDISON (LEONARD)	BONGIOVANO (CHAS.-MARG)-BORCHERS (JOHN-MARTIN)
ADDISON (NATHAN) -	ALBANA	BORDJENSKI (JOS-MARIE)-BOTHOFF (WILB. MINNIE)
ALBANESE -	ALGER	BOTKINS (BERNARD-MARG) BOWIE (EARNEST-ELIZ.)
ALI -	ALLEN (KENNETH)	BOWIE - BOYD (NORMAN)
ALLEN (LATIMORE) -	ALMENS	BOYD (PHILIP) - BRANDON (ROBERTA)
ALMOND -	AMBROSE (JOHN)	BRANDSHAW (AARON) BRANIGAN (JAMES)
AMBROSE (JOSEPH) -	ANDERSON (BENT)	BRANNON (FRANCIS) BRECHT (WILLIAM)
ANDERSON (BERNARD)-	ANDERSON (LEACH)	BRECKEL (JNO.) - BRIDGE (HENRY)
ANDERSON (LEE) -	ANDREWS (PHILIP)	BRIDGE (PAUL) - BRITTINGHAM (WILLIAM)
ANDREWS (REDMOND) -	APOSTOL (MIKE)	BRITNER (RICHARD)-BROOKS (ARYILLE)
APPEL -	ARMETTO	BROOKS (BEATRICE) - BROOKS (CHARLOTTE)
ARMIGER -	ARNOLD	BROOKS (W.-EMMALINE)-BROWN (CHAS.-ELIZ.)
ARO -	ASKINS	BROWN (CHAS.-EMMA) - BROWN (FREDERICK)
ASPANTA -	AUTRY	BROWN (GABRIEL) - BROWN (JAMES-JENNIE)
AUTS -	BAER (HERMAN)	BROWN (JAMES-LILLIE) - BROWN (LILLIE)
BAER (JOSEPH) -	BAILEY (JAMES)	BROWN (LONNIE) - BROWN (SAM.-HATTIE)
BAILEY (JOHN) -	BAKER (HARRY-JENNIE)	BROWN (SAM.-LOTTIE)-BROWN (WM.-INEZ)
BAKER (HARRY-MYRTLE)-	BAKER (WILLIAM)	BROWN (WM.-JENNIE)-BUNSON (MELVIN)
BAKER (WILLIE) -	BALLARD (LENA)	BRUNSON (NATHAN) - BUCHER (MORRIS)
BALLARD (PERCY) -	BANKS (MILES)	BUCHANA (CHAS.) - BUISE (CHAS.)
BANKS (PAUL) -	BARCARES	BUKOWSKAUS (JOS.) - BURDYCH (JOHN)
BARCLAY -	BARNES (FRANK)	BUREL (SAMUEL) - BURKHARDT (ISADORE)
BARNES (FRED) -	BAROCH	BURKHARDT (JOHN) - BURNS (THOMAS)
BAROFF -	BASCIANO	BURNS (VERNON) - BURY (PETER)
BASEHART -	BAUER (CHAS.-CECELIA)	BUSCEMI (GUISEPLI) - BUTLER (ERESTINE)
BAUER (EARNEST) -	BERGH (WOODROW)	BUTLER (FOLEY) - BUTLER (WM.-LUCY)
BEACHAM -	BECK (FRED.-JEANETTE)	BUTLER (WM.-MABEL) - BZYZINSKI (JOS.)
BECK (GEO.) -	BELCHNER (LEO)	CABNESS (CLAIBORNE)-CALLOWAY (FRANK)
BELCHNER (PAUL) -	BELSCHNER (PAUL)	CALLO - CAMPBELL (JOHN)
BELSKNER (JOHN) -	BENNETT (STEWART-EDNA)	CAMPBELL (JOSEPH) CANELOS
BENNETT (STEWART-EDITH)-	BERGER (ISRAEL)	CANESTRARO - CRONAR
BERGER (JACOB) -	BERTHOLDT (CHAS.-ELIZ.)	CARBONE - CARNES
BERTHOLDT (FRED) -	BIBENS	CARNEVALE - CARRINGTON
BICHANICH -	BISHOP (JOS.-ELIZ.)	CARRO (MARIE)-CARTER (CHARLES)
BISHOP (JOS.-NETTIE)-	BLAIR (CLARENCE)	CARTER (CHESTER)-CARTER (LYTAN)
BLAIR (CORNELIUS-CATHERINE)-Bley (RAYMOND-SADIE)	BLUMBERG (MEYER-IDA)	CARTER (MAJOR)-CASCIO (VINCENT)
BLICKENSTAFF -	BOOKMAN (JNO.-EVELYN)	CASE - CAULK
BLUMENFIELD (BERNARD-MARIE)		CAUROURAS-CHAIT
		CHALK (ALBERT)-CHANEY (JAMES)
		CHANEY (JESSIE)-CHASE (CLARENCE)
		CHASE (EDWARD)-CHENWORTH (HARRIET)
		CHERIGOS - CHINCARINI.

LIST OF DRAWERS LABELED AS FOLLOWS:-

CHINN - CIAURI.
 CICCHIETTI (ANGELO) - CLARK (ELIZAH)
 CLARK (ELMER) - CLARK (WILBUR)
 CLARK (WM.) - CLAYTON (CHARLES)
 CLAYTON (DAVID) - CLOTHISH (PAUL)
 CLOUD - COFER
 COFFAY - COHENS
 COKER (GEORGE) - COLE (THERESA)
 COLE (THOMAS) - COLEMAN (WM-ETHEL)
 COLEMAN (WM-JULIA) - COLLINS (GORDON)
 COLLINS (HARRY) - COMPOS (PETER)
 COMMADORE (ARTHUR) - CONRAD (ELMER)
 CONRAD (FRANK) - COOK (BENT.)
 COOK (CHARLES) - COOKE (ROBT.)
 COOKERLY - COOPER (STEWART)
 COOPER (THOMAS) - CORNELL
 CORNICK - COTHAN.
 COTHORN - COVERT.
 COVEY - CRAFTON
 CRAGG - CRAWFORD
 CRAWL - CROCKET
 CROCKETT - CROSS (JAMES)
 CROSS (JOHN) - CUBBAGE
 CUCCHIELLA - CUNNINGHAM (THOMAS)
 CUNNINGHAM (WALTER) - CURTIS (ROLAND)
 CURTIS (SAM) - DAFFIN
 DAFINA - DANIEL
 DANIELLO - DARNELL
 DARONE - DAVIES
 DAVIS - DAVIS (HARRY)
 DAVIS (HAMIE) - DAVIS (LOUIS)
 DAVIS (LUKE) - DAVIS (WM-LULA)
 DAVIS (WM-MAMMIE) - DAY
 DAYE - DECKELMAN
 DECKER - DELCHER
 DELCIELLO - DENEAL.
 DENEKE - DEROSA
 DERR - DE WERT
 DE WIT - DIETMAN
 DIETRICK - DILLAERD (EDWARD)
 DILLARD (GORTON) - DITZEL
 DIVA (SALVATOR) - DOCKING (WM)
 DOCKS (EDWARD) - DONELLA (JOHN)

DONNELLEY (EDWARD) - DORSEY (FRANK)
 DORSEY (GEORGE) - DOUGHERTY (JOHN)
 DOUGHERTY (JOSEPH) - DOYLE (JOHN)
 DOYLE (JOSEPH) - DUBICKI (ANTONI)
 DUBIEL (JOSEPH) - DUMLER (HARRY)
 DUMMOODIE (ALEX) - DUPREE (TOBIN)
 DUPREE (WILSON) - DZIWANOWSKI (BRONISLAW)
 EDDIE (FRAZIER) - ECKELS (PETER)
 ECKENRODE (JOE) - EDWARDS (MICHAEL)
 EDWARDS (NATHANIEL) - ELEY (WILLIE)
 ELFREY (GEORGE) - ELLBROAD (ARCHIE)
 ELLSON (FRANK) - ENNISS (MATTIE)
 ENNOLS (EDWARD) - ESCHRICH (JOHN)
 ESCOLOPIO (ANDREW) - EVANS (MORTON)
 EVANS (NATHANIEL) - EZORSKY (MORRIS)
 FABER (CHARLES) - FARLEY (WILLIAM)
 FARLOW (CHARLES) - FEEHLY (FRANCIS)
 FEELEY (JNO.) - FERGUSON (ELLA)
 FERGUSON (FERNANDO) - FIELDS (OSCAR)
 FIELDS (RAYMOND) - FINNEY (HOWARD)
 FINNEY (JAMES) - FISHER (JNO)
 FISHER (JOSEPH) - FITZPATRICK (WILLIAM)
 FITZSIMMONS (JAMES) - FLETCHER (DEWEY)
 FLETCHER (EARL) - FOARD (DANIEL)
 FOARD (EDWIN) - FORD (CHARLES)
 FORD (CHESTER) - FORNVILLE (HUGHS)
 FORREST (CAMELIA) - FOULTZ (EDWARD)
 FOUNTAIN (CHAS) - FRALEY (ROBERT)
 FRALING (MATTHEW) - FRANKLIN (ROBERT)
 FRANKLIN (WALTER) - FREEBERGER (WILLIAM)
 FREEDLAND (MAX) - FRIED (MAURICE)

"Closed Files"

contd. from sheet 2.

- Friedel (Conrad) - Fuhrman (Geo)
- Fuhrmancek (Edward) - Fyfe (James)
- Gobbins (Chas.) - Gallmeyer (Louis)
- Gallo (Dominick) - Gardner (Juhus)
- Gardner (Lee) - Garrity (Scott)
- Garrity (William) - Gaybeard (Joseph)
- Gayles (Ollie) - George (Eugene)
- George (Frank) - Getner (Jacob)
- Getner (Margaret) - Gibson (William)
- Giddens (Earl) - Gillis (William)
- Gillisom (Timothy) - Glaser (Louis)
- Glasgow (Hillary) - Gaitz (Jacob)
- Geatz (Lawrence) - Goldstein (Benjamin)
- Goldstein (David) - Goodman (Rayfield)
- Goodman (Waverly) - Gorski (William)
- Gorsuch (Brenten) - Grafton (Raymond)
- Graham (Albert) - Gravenstein (Walter)
- ~~GRAVES (BERNARD)~~ - ~~GRAY (WALTER)~~
- Gray (William) - Green (Doxie)
- Green (Eddie) - Green (Melvin)
- Green (Milton) - Greenleaf (John)
- Greenlee (Odem) - Griffin (Janie)
- Griffin (Jeremiah) - Grimm (Howard)
- Grimm (Jesse) - Gross (Warren)
- Gross (William) - Guins (Erving)
- Gulbin (Harry) - Gwynn (Raymond)

THE VOLUMES FORM—Continued

10. Size
(Height, width, and thickness, and average number of pages, by uniform groups)

11. Location by dates and volume numbers
(Buildings and rooms or vaults)

12. Subtitle divisions by dates and volume numbers

13. Other information

"Closed Files"

Continued from sheet 3

- Hoag (Andrew) - Hairstone (James)
- Haislip (Harry) - Hall (John - Rose)
- Hall (John - Sadie) - Hamilton (Archie)
- Hamilton (Berlin) - Hampton (Richard)
- Hampton (Sanford) - Hansley (William)
- Hanson (Albert) - Hardy (Spencer)
- Hardy (Thomas) - Harri (Raymond)
- Harrel (James) - Harris (Greer)
- Harris (Harry) - Harris (Rosella)
- Harris (Sam) - Harrison (Stephen)
- Harris (Perry) - Harbath (John)
- Harvey (Alfred) - Haupt (George)
- Haupt (Henry) - Hayden (Walter)
- Hayes (Albert) - Healey (William)
- Healy (Ambrose) - Height (Leon)
- Heightington (David) - Henderson (James)
- Henderson (John) - Henry (Hughlett)
- Henry (James) - Herfel (George)
- Herfurth (Charles) - Hesson (Vera)
- Hester (Benjamin) - Higdon (William)
- Higgin (Lawrence) - Hill (John - Irene)
- Hill (John - Jennie) - Hines (Herbert)
- Hines (James) - Hobbs (Robert)
- Hobbs (Sam) - Hoffman (Herman)
- Hoffman (Jacob) - Holiday (Chas.)
- Holien (James) - Holly (Eloise)

Cont. on sheet 5

THE VOLUMES FORM—Continued

10. Size
(Height, width, and thickness, and average number of pages, by uniform groups)

11. Location by dates and volume numbers
(Buildings and rooms or vaults)

12. Subtitle divisions by dates and volume numbers

13. Other information

"Closed Files"

cont'd. from sheet 4

- Holly (Eugenia) - Holt (Jessie)
- Holt (John) - Hooks (Lee)
- Hooper (Alfred) - Horne (Walter)
- Horner (Andrew) - Hausley (John)
- Hauston (Chas.) - Howard (Thomas)
- Howard (Valentine) - Huber (John)
- Huber (Joseph) - Huges (Gilmore)
- Huges (James) - Hunt (Milton)
- Hunt (Ohlen) - Hutcheson (Mary)
- Hutchins (Arthur) - Ichniewski (Michael)
- Ichnioski (Ferdinand) - Ittner (Paul)
- Itzikoff (Harry) - Jackson (Ezekial)
- Jackson (Fleming) - Jackson (Lottie)
- Jackson (Louis) - Jackson (William - Martha)
- Jackson (William - Mary) - James (Benjamin)
- James (Chas.) - Jarmer (Kurt)
- Jaroski (John) - Jefferies (Herbert)
- Jefferies (James) - Jenkins (Samuel)
- Jenkins (Thomas) - Jochenning (Lottie)
- John (Cardinal) - Johnson (Chas. - Jennie)
- Johnson (Chas. - Lena) - Johnson (Elmer - Hazel)
- Johnson (Elmer - Lois) - Johnson (Harry - Lena)
- Johnson (Harry - Mabel) - Johnson (James - Mary)
- Johnson (James - Minnie) - Johnson (Levi)
- Johnson (Lewis) - Johnson (Richard)
- Johnson (Robert) - Johnson (Thomas)

Cont. on sheet 6

THE VOLUMES FORM—Continued

10. Size
(Height, width, and thickness, and average number of pages, by uniform groups)

11. Location by dates and volume numbers
(Buildings and rooms or vaults)

12. Subtitle divisions by dates and volume numbers

13. Other information

"Closed Files"

Cont'd. from sheet 5

Johnson (Tilghman) - Johnson (William - Mary)
 Johnson (William - Mary) - Jones (Chas. - Jessie)
 Jones (Chas. - Lillie) - Jones (Fred - Ethel)
 Jones (Fred - Hilda) - Jones (James - Ida)
 Jones (James - Louise) - Jones (Lynal)
 Jones (McKinley) - Jones (Stanley)
 Jones (Stephen) - Jones (Winston)
 Jones (Zadie K) - Joynes (William)
 Jrimans (John) - Kalafas (Sam)
 Kalal (Frank) - Karaska (Jack)
 Karavedus (Harry) - Kearins (Joseph)
 Kearney (Benny) - Keiles (William)
 Keilholtz (Chas.) - Kelly (Chas.)
 Kelly (Daniel) - Kendall (Edwin)
 Kendall (George) - Kermish (Philip)
 Kern (Adam) - Kidwell (Earl)
 Kidwell (Henry) - King (Grant)
 King (Harry) - Kirby (John)
 Kirby (Joseph) - Kiwaki (Alex.)
 Klaburner (Raymond) - Kluge (Thorwald)
 Kluzel (Chas.) - Knox (Curley)
 Knox (Douglas) - Komalsky (Michael)
 Komarowski (Anthony) - Kourk (Andrew)
 Kouten (Mike) - Kramer (Louis)
 Kramer (Meyer) - Kreski (John)
 Kress (Henry) - Krzyzanowski (Peter)

Cont. on sheet 7

THE VOLUMES FORM—Continued

10. Size
(Height, width, and thickness, and average number of pages, by uniform groups)

11. Location by dates and volume numbers
(Buildings and rooms or vaults)

12. Subtitle divisions by dates and volume numbers

13. Other information

"Closed Files"

continued from sheet 6.

- Kuba(Andrew) - Kutrich(Henry)
- Kutrich(Cyril) - Lalumern(Albert)
- Lam(Dave) - Lane(Fred)
- Lane(George) - Lanteri(Michael)
- Lantz(Louis) - Lauentein(Karl)
- Lauer(Andrew) - Layman(Walter)
- Layne(Walter) - LeCompte(William)
- LeCows(Freddie) - Lee(Philis)
- Lee(Raleigh) - Leidleick(Frederick)
- Leight(Edmond) - Leonard(Joseph)
- Leonard(Kennard) - Levin(Isreal)
- Levin(Joseph) - Levin(Edward)
- Lewis(Edwin) - Lewis(Nevan)
- Lewis(Olner) - Liedlich(George)
- Liemon(Max) - Linnell(David)
- Lins(Chas.) - Little(Henry)
- Little(James) - Lockner(John)
- Locks(James) - Long(Gardner)
- Long(George) - Love(William)
- Loveday(Delia) - Lucas(Frank)
- Lucas(George) - Luttrell(George)
- Lutts(Edwin) - Lyttle(Robert)
- McAbee(Allen) - McCart(Joseph)
- McCarter(Dolphus) - McCodgan(Arthur)
- McCallam(Howard) - McCroy(James)
- McCubbin(Grayson) - McDonald(Thomas)

cont. on sheet 8

THE VOLUMES FORM—Continued

10. Size
(Height, width, and thickness, and average number of pages, by uniform groups)

11. Location by dates and volume numbers
(Buildings and rooms or vaults)

12. Subtitle divisions by dates and volume numbers

13. Other information

"Closed Files"

continued from sheet 7

McDonald (Valentine) - McGinnis (William)
 McGinnis (Wilmer) - McKay (William)
 McKean (William) - McLeod (Walter)
 McLewee (Robert) - McQuay (Irving)
 McQuay (Nellie) - Mack (William)
 Mack (Wilson) - Madison (Wilson)
 Madkins (William) - Malambre (Roy)
 Malan (Milton) - Mann (Addison)
 Mann (Archie) - Mariani (Michael)
 Marine (John) - Marshall (Carter)
 Marshall (Charles) - Martin (Calvin)
 Martin (Charles) - Martin (William - Lottie)
 Martin (William - Mary) - Mason (Ruth)
 Mason (Sloan) - Matis (John)
 Mathins (Frank) - Matthews (William - Mildred)
 Matthews (William - Priscilla) - Mays (William)
 Mayola (Larry) - Meeks (William)
 Meerddter (George) - Mensh (Jacob)
 Mentis (Peter) - Messina (Steve)
 Messineo (Frank) - Mecharles (Charles)
 Michaels (Charles) - Miles (Ernest)
 Miles (Frank) - Miller (Charles)
 Miller (Chester) - Miller (Joe)
 Miller (John) - Miller (Theresa)
 Miller (Thomas) - Mills (William)
 Millstein (Abraham) - Mitchell (Brodie)

cont. on sheet 9

THE VOLUMES FORM—Continued

10. Size
(Height, width, and thickness, and average number of pages, by uniform groups)

11. Location by dates and volume numbers
(Buildings and rooms or vaults)

12. Subtitle divisions by dates and volume numbers

13. Other information

"Closed Files"

Continued from sheet 8.

- Mitchell (Carl) - Mitchell (Virginia)
- Mitchell (Walter) - Monastero (Giuseppe)
- Monath (Margaret) - Montley (George)
- Montone (Anthony) Moore (Elmer)
- Moore (Ernest) - Moore (William - Ethel)
- Moore (William - Iva) - Morgan (Vernon)
- Morgan (Walter) - Morrison (John)
- Morrison (Johnson) - Moss (George)
- Moss (Henry) - Muir (George)
- Muir (Roland) - Murley (John)
- Murphy (Addie) - Murray (John)
- Murray (Joseph) - Myers (John)
- Myers (Joseph) - Nash (Herman)
- Nash (Howard) - Neenan (Thos.)
- Neff (Ernest) - Neubig (John)
- Neuberger (Sidney) - Niccoli (Jack)
- Nice (Edward) - Nitzki (Joseph)
- Nixon (Albert) - Norjen (Clinton)
- Norko (Felix) - Novotny (William)
- Nowak (Casiner) - Ochs (Paul)
- O'Connel (Joseph) - O'Leary (Victor)
- Olecsick (John) - Opie (William)
- Opolko (Constantine) - Ostrowski (Walter)
- O'Sullivan (Edward) - Ozman (William)
- Pabst (Henry) - Palmer (Howard)
- Palmer (James) - Parham (Herbert)
- Parham (James) - Parker (Rufus)

THE VOLUMES FORM—Continued

10. Size
(Height, width, and thickness, and average number of pages, by uniform groups)

11. Location by dates and volume numbers
(Buildings and rooms or vaults)

12. Subtitle divisions by dates and volume numbers

13. Other information

"Closed Files"

Continued from sheet 9.

Parker (Samuel) - Parrish (Howard)
 Parrish (James) - Patterson (Beatrice)
 Patterson (Chas.) - Payne (Isabelle)
 Payne (James) - Peczerycia (Basil)
 Peddcord (Albert) - Tensmith (Edward)
 Penta (Wm.) - Perry (Roy)
 Perry (Sam) - Petrulionis (Joseph)
 Petrush (Joseph) - Phelps (James)
 Phelps (John) - Phipps (John)
 Phipps (Martin) - Pindell (Wm.)
 Pinder (Chester) - Pitts (Jefferson)
 Pitts (John) - Poe (James)
 Poe (Roland) - Poole (Julius)
 Poole (Lott) - Pott (Henricus)
 Potter (Chas.) - Powell (Richard)
 Powell (Robert) - Pretty (George)
 Prettyman (Archie) - Prince (Fred)
 Prince (George) - Pugh (Blaine)
 Pugh (Calvin) - Pzylusky (Andrew)
 Quade (Frank) - Quoss (Fred)
 Raab (Edwin) - Raleigh (William)
 Raley (Joseph) - Rapisardi (Ignacio)
 Rapp (Chas.) - Raymon (Lewis)
 Raymond (Alex) - Peding (Aaron)
 Redman (Chas.) - Reed (William)
 Reeder (Albert) - Reif (John)

Cont. on sheet 9

THE VOLUMES FORM—Continued

10. Size
(Height, width, and thickness, and average number of pages, by uniform groups)

11. Location by dates and volume numbers
(Buildings and rooms or vaults)

12. Subtitle divisions by dates and volume numbers

13. Other information

"Closed Files"

continued from sheet 10.

- Reifner (Frederick) - Rittmon (Chas.)
- Retz (Adolf) - Riccobane (Joseph)
- Rice (Addison) - Richardson (Clyde)
- Richardson (Daniel) - Riddell (Eugene)
- Riddick (Jake) - Riley (Frank)
- Riley (George) - Ritter (Henry)
- Ritter (Howard) - Roberts (Isaiah)
- Roberts (James) - Robinson (Charles)
- Robinson (Chester) - Robinson (John - Elise)
- Robinson (John - Ethel) - Robinson (William - Katie)
- Robinson (William - Lena) - Rogers (Chas.)
- Rogers (Christian) - Rollins (Frank)
- Rollins (George) - Rosen (Harry)
- Rosen (Louise) - Ross (Frank)
- Ross (George) - Rousby (James)
- Rouse (Chas.) - Ruby (Grayson)
- Ruby (Harry) - Rupert (Kenneth)
- Rupp (Andrew) - Ruta (Joseph)
- Ruth (Benjamin) - Rzepkowski (Ignatius)
- St. Clair (Edward) - Sakowski (John)
- Saks (Nat) - Sanderlan (William)
- Sanders (Amos) - Sanchiapone (Alfred)
- Sagkin (Jacob) - Saunders (Wilbur)
- Saunders (William) - Scanland (Alonzo)
- Scanlon (Daniel) - Schalitzky (John)
- Schall (Alex) - Scherr (Isaiah)

THE VOLUMES FORM—Continued

10. Size
(Height, width, and thickness, and average number of pages, by uniform groups)

11. Location by dates and volume numbers
(Buildings and rooms or vaults)

12. Subtitle divisions by dates and volume numbers

13. Other information

"Closed Files"

continued from sheet 11.

Scherr (Jonas) - Schmidl (William)
 Schmidt (Adam) - Schockett (Harry)
 Schoeberlin (Henry) - Schuchmen (Robert)
 Schuch (George) - Schwartz (Edward)
 Schwartz (Elmer) - Scott (Felix)
 Scott (Frank) - Scott (Rufus)
 Scott (Sam) - Seaton (Susan)
 Seawall (Leroy) - Seldemridge (Charles)
 Seldon (Norman) - Settles (Thomas)
 Setzer (Ike) - Shanahan (Timothy)
 Shane (Frank) - Shayte (Benjamin)
 Sheo (George) - Sheppard (James)
 Sheppard (John) - Shinnick (C. Webster)
 Shipec (Clarence) - Short (Napoleon)
 Short (Peter) - Siebert (George)
 Siebert (John) - Simard (Charles)
 Simeon (Fred) - Simms (Walter)
 Simms (William) - Singer (Meyer)
 Singer (Morris) - Skinner (William)
 Skipper (Charles) - Sloan (Zedler)
 Sloat (Clarence) - Smialkowski (Walter)
 Smick (Frank) - Smith (Frank - Azanora)
 Smith (Chas. - Bertha) - Smith (Edw. - Hannah)
 Smith (Edw. - Irene) - Smith (Geo. - Martha)
 Smith (James - Carrie) - Smith (Jonah)
 Smith (Joseph) - Smith (Norton)

Cont. on sheet 13.

THE VOLUMES FORM—Continued

10. Size
(Height, width, and thickness, and average number of pages, by uniform groups)

11. Location by dates and volume numbers
(Buildings and rooms or vaults)

12. Subtitle divisions by dates and volume numbers

13. Other information

"Closed Files"

continued from sheet 12.

- Smith (Ollie) - Smith (Travers)
- Smith (Ulysses) - Smith (William)
- Smith (Willie) - Snowden (James)
- Snowden (John) - Soellner (Martha)
- Sofar (James) - Soustak (Joseph)
- Souters (Ignatius) - Spellman (Joseph)
- Spence (Clinton) - Spindler (William)
- Spinicchio (Joseph) - Spruel (Owen)
- Spruel (Charles) - Stampone (Louis)
- Standback (Arthur) - Stansburry (Gilbert)
- Stansburry (Harry J) - Stavares (Harry)
- Stavelly (Phyney) - Steinemen (Benjamin)
- Steiner (Louis) - Stevens (Joseph)
- Stevens (Levin) - Stewart (George - Kosta)
- Stewart (George - Marion) - Stiff (Thad.)

cont. on sheet 12.

THE VOLUMES FORM—Continued

10. Size
(Height, width, and thickness, and average number of pages, by uniform groups)

11. Location by dates and volume numbers
(Buildings and rooms or vaults)

12. Subtitle divisions by dates and volume numbers

13. Other information

"CLOSE FILES"

Labeled as follows—with inclusive lettering.

STIFFER (JOHN)	STOKES (SPRUNT)	WEDGE (RUSSELL)	WEINER (WALTER)
STOKES (THEO)	STREAMS (WALTER)	WINFELD (JOSEPH)	WELLS (GROVER)
STREATER (FOSTER)	STUBEL (JOHN)	WELLS (HARRY)	WEST (ALONZO)
STUCK (ETHEL)	SULLIVAN (JAMES)	WEST (ANNIE)	WHEATLEY (AMOS)
SULLIVAN (JOHN)	SUSSAN (WILLIAM)	WHEATLEY (ANDREW)	WHITE (CHAS-FANNIE)
SUSSKIN (SAM-ADA)	SWIFT (JOHN-WINIFRED)	WHITE (CHAS-GERT)	WHITE (JOS-JULIA)
SWIFT (SYDNEY)	SZYMSKI (LAWRENCE)	WHITE (JOS-LILLIAN)	WHITEFIELD (GEO)
TAAFE (JOHN)	TALLY (WILLIAM)	WHITEFORD (CHAS)	WICKS (JNO)
TAMALAVIEZ (BRUNO)	TAYLOR (CHAS-MARG.)	WICKS (LEON)	WILDER (ZEPH)
TAYLOR (CHAS-MARY)	TAYLOR (JAMES-WILHELMINA)	WILDERSON	WILLIARD
TAYLOR (JEAN)	TAYLOR (WILLIARD)	WILKELFORD (HARVEY)	WILLIAMS (CHAS)
TAYLOR (WILLIAM)	TERRY (GEORGE)	WILLIAMS (HARDY)	WILLIAMS (JNO-HATTIE)
TERRY (HENRY)	THOMAS (CHAS-HELEN)	WILLIAMS (JNO-IDA)	WILLIAMS (RAYMOND)
THOMAS (CHAS-IDA)	THOMAS (JAS-MARY)	WILLIAMS (READ)	WILLING (RESLIE)
THOMAS (JAS-MYRTLE)	THOMAS (ROSCOE)	WILLINGER (ELMER)	WILSON (EDNA)
THOMAS (RUFUS)	THOMPSON (CLAUDE)	WILSON (EDW)	WILSON (JNO-MARY)
THOMPSON (CORNELIUS)	THOMPSON (PETER)	WILSON (JNO-PANSY)	WILSON (WILLIAM)
THOMPSON (PHILLIP)	THORNTON (CUSEY)	WILSON (WINNIE)	WINSTON (JOHN)
THORNTON (WALTER)	TILLMAN (GEORGE)	WINSTON (LEROY)	WISZGOWSK (JOS)
TILLMAN (JOHN)	TOLSON (FRANK)	WITCHERD (DAVID)	WOLFE (JAMES)
TOLSON (HOWARD)	TOWNSLEY (ROBERT)	WOLFE (JNO)	WOODEY (WM)
TOWSON (BOTHWELL)	TREGOR (HARRY)	WOODFOLK	WOODY
TREHEARN (ROBERT)	TRUETT (ROBERT)	WOODYARD (CLEM)	WRIGHT (DENNIS)
TRUITT	TUDOR	WRIGHT (EDDIE)	WRIGHT (WM-CARRIE)
TUER (EUGENE)	TURNER (JOS)	WRIGHT (WM-EFFIE)	WIANNUZZI (RAYMOND)
TURNER (JOSEPHINE)	TYLER (ROBERT)	YANOK (MICHAEL)	YOUNG (AIREY)
TYLER (SOLOMON)	URBACK (LOUIS)	YOUNG (ALBERT)	YOUNG (JOS)
URBAN	VANDERBURG	YOUNG (KENNETH)	ZAGBIA (STEPHENS)
VANDERFORD	VELTON	ZAHL (GEORGE)	ZIEGLER (GEORGE)
VENABLE	VITS	ZIEGLER (HARRY)	ZYWICKI (PETER)
VITSHIAKIS	WADDLE		
WADDY	WAHL		
WAHLHAUPTER (WM)	WALKER (JACK)		
WALKER (JAS)	WALLACE (GEO)		
WALLACE (HARRY)	WALTERS (ELVIN)		
WALTERS (FRANK)	WARD (GEORGE)		
WARD (GLADYS)	WARNER (CLINTON)		
WARNER (ERNEST)	WASHINGTON (GEO-ETHEL)		
WASHINGTON (GEO-FLORENCE)	WATERS (FRANK)		
WATERS (GEO)	WATKINS (ROBT.)		
WATKINS (SAM)	WATTS (NORMAN)		
WATTS (PAUL)	WEBB (JOSEPH)		
WEBB (LEONARD)	WEDEL (FRANK)		

Total
506 Drawers.

Scott-Kovaka

(Worker's full name)

12-8-38

(Date)

8

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland
Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place - Cellar Record Room
(Name of building, room number, street address)

- Title "Closed Files" (Aid to Dependent Children - Old Age Pension - Aid To Blind)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
- Dates 1930 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)
- Quantity 50 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)
- Labeling See addenda sheets - list of drawers as labeled.
(Explain fully; years; numbers; letters; number of records so labeled)
- Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Case history records of persons receiving aid also of persons seeking aid from the Department of Public Welfare, including summary of forms in individual cases, under heading Aid to Dependent Children, containing notification from the Baltimore Social Service Exchange to the Department of Public Welfare giving Police Department report and applications for aid from other agencies; application for aid to

6. Contents—continued dependent children; case history record; social worker's record of investigations; correspondence pertaining to eligibility, employment, marital and family status, character references, establishing residence; supplemental relief record; aid to dependent children allowance cut off (cont. on line 12)
7. Arrangement Alph. by names of applicants
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Typed on plain paper; printed head and printed forms;
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Handwritten on plain paper, printed head and printed forms.
Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of steel file drawer 11 1/2" X 14" X 26 1/2"
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities 1930 to date, 50 steel file drawers near north wall in Record Room (in cellar).
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 6 ~~under~~ ticket; clothing orders; record of previous relief assistance obtained; birth reports; death reports. Summary of forms under headings Old Age Pension contain face sheet (identification record of applicant); case history of applicant; Social Service Exchange Identification (a record showing whether or not receiving aid
13. (For use in Florida.) Early imprints (Continue on addenda sheet)
(Author) (Publisher)
(Place of publication) (Date of publication)

8

"Closed Files" (Aid to Dependent Children - Old Age Pension - Aid To Blind)

Addenda sheet # 1

continued from line 12

from other agencies); application for general public assistance; references as to residence and physical disability of applicant; application for relief from Maryland Workshop for Blind; social worker's record of investigations; memoranda of case transferred from Maryland Workshop for Blind to Old Age Pension; marital status reports; birth reports; hospital dispensary reports; application for old age pension; physicians report on examination; death report.

Summary of forms under headings Assistance To Blind contain application for Public Assistance to the Needy Blind; face sheet (identification record of applicant); case history record; application for relief from Maryland Workshop for Blind; report on application for blind assistance; Social Service Exchange Identification (a record showing whether or not receiving aid from other agencies); authorization for eye examination - Aid to Blind Program; physicians report on eye examination; State Supervising Ophthalmologist report on eye examination; Social Worker's report and summary of case; Assistance to Blind Cut Off Ticket; marital status report; birth report; Hospital Dispensary report; application for general public assistance; correspondence regarding residence, investigations and family status; death reports.

SURVEY OF STATE AND LOCAL HISTORICAL RECORDS: 1936

HISTORICAL RECORDS SURVEY

(Name of State)

(Leave this space blank)

THE MAPS AND PHOTOGRAPHS FORM

County City or town

Agency or department

Bureau

Name of other owner, if any

Name of building

(Street address)

1. Item or items

(Map or maps, photographs, etc.)

2. Area covered, title, or subject

3.

(Number of items or pages)

(Date or dates)

(Size or sizes)

4. Indicate by an (x) whether: Printed (), engraved (), black-and-white (), colored (), blue-print (), photostat (), mounted (), framed (), relief (), shaded ().

5. If map, also indicate

(Scale)

(Type of map: Physical, political, etc.)

6.

(Condition of writing or other work)

(of paper, film, etc.)

7.

(Artist, author, etc.)

(Publisher or engraver, if any)

(Place of publication)

8. Location

(Rooms and vaults)

9. Other information

Continued from line 4. List of file drawers labeled as follows.

Closed Files-	A.D.C.	O.A.P.	A.T.B.	
"	"	"	"	Aaron - Aliff
"	"	"	"	Allen - Bailey
"	"	"	"	Baker - Bell
"	"	"	"	Belsky - Boggs
"	"	"	"	Bohla - Briscoe
"	"	"	"	Britt - Browne
"	"	"	"	Brownley - Cairns
"	"	"	"	Calabrese - Charnitz
"	"	"	"	Chase - Colyer
"	"	"	"	Combs - Crowner
"	"	"	"	Cruce - Deshields
"	"	"	"	Desmond - Duchon
"	"	"	"	Dudley - Ernst
"	"	"	"	Ervin - Flemister
"	"	"	"	Fletcher - Garey
"	"	"	"	Garland - Gorsuch
"	"	"	"	Gorth - Grossmann
"	"	"	"	Grove - Harrington
"	"	"	"	Harris - Henickle
"	"	"	"	Henry - Holly
"	"	"	"	Holmes - Huttenberg
"	"	"	"	Hyatt - Jenkins
"	"	"	"	Jannings - Jolly
"	"	"	"	Jones - Kearney
"	"	"	"	Kearns - Knorr

Continue on sheet 2

THE VOLUMES FORM—Continued

10. Size
(Height, width, and thickness, and average number of pages, by uniform groups)

11. Location by dates and volume numbers
(Buildings and rooms or vaults)

12. Subtitle divisions by dates and volume numbers

13. Other information

"Closed Files"

Continued from addenda sheet 1

Closed Files - A.D.C. - O.A.P. - A.T.B.

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Knott - Laszczak
 Lauer - Linton
 Lipp - McCotter
 McCoy - Marable
 Marbury - Meekins
 Meeks - Mitchell
 Mitchison - Mullen
 Muller - Norwood
 Nott - Piesinger
 Pellone - Powell
 Power - Redhead
 Redman - Roberts (John)
 Roberts (Katie) - Ruffin
 Ruggles - Schonberger
 Schane - Seawall
 Lebour - Simpson
 Sinatra - Smith (Priscilla)
 Smith (Regino) - Stern
 Stevens - Tawney
 Taylor - Tolson
 Tomasek - Wagenfer
 Wagner - Wayson
 Weakley - Whye
 Wichner - Winder
 Windsor - Zwolinski

A.D.C. = Aid to Dependent Children
 O.A.P. = Old Age Pensions
 A.T.B. = Aid To Blind

THE VOLUMES FORM—Continued

10. Size
(Height, width, and thickness, and average number of pages, by uniform groups)

11. Location by dates and volume numbers
(Buildings and rooms or vaults)

12. Subtitle divisions by dates and volume numbers

13. Other information

Scott-Kovack
(Worker's full name)

12-5-38
(Date)

9
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland
Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place
(Name of building, room number, street address)

1. Title "Closed Files - O.T.I." (Out of Town Inquiries)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1935--
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 2 Steel files drawers
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling See line 12 --- list of drawers as labeled.
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Correspondence relating to the transfer and circumstances involving the return of clients to Baltimore City, including referrals to General Public Assistance, Works Progress Administration; record of individual case to the Social Service Exchange for identification purposes; applications for General Public Assistance; record of Intake interview; record of previous employment; employment

6. Contents—continued compensation reports; references relating to establishing residence in Baltimore City; grant of authorization for substitution of other member of family for work; assignment of any and all banking funds and life insurance interest during such period as relief is ^(cont on line 12)
7. Arrangement Alph. by names of applicants
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Typed and handwritten on plain paper and printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of steel drawer 11 1/2" x 14" x 26 1/2" Average 300 cases per drawer
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
(Average 20 papers per case)
11. Location by dates and quantities 1935-To DATE - 2 steel file drawers
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
near north wall in record room (in cellar)
12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 6 ~~~~~ administered; establishment of parental and marital status and rent notifications
Continued from line 4 ~~~~~ List of drawers as labeled.
Closed Files O.T.I. Abbott - Massenberg
Closed Files O.T.T. Mienel - Zeone
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)
(Place of publication) (Date of publication)

Scott-Kovaka

(Worker's full name)

12-2-38

(Date)

10

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place
(Name of building, room number, street address)

1. Title "Closed Files" (Case History Records - Referrals)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them, with dates or quantities or both)

2. Dates 1938--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 3-Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling See addenda sheet-list of drawers as labeled.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Contained case history records of persons receiving aid from the Department of Public Welfare, including referrals to General Public Assistance, Works Progress Administration and also case referrals but not accepted (known as N.C.M. = No Case Made); individual records include W.P.A referral, showing record of case to the Social Service Exchange for identification purposes also referral record to the W.P.A.
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued from the D.P.W.; application for General Public Assistance; record of Intake Interview; correspondence relative to previous employment and references; salary references of prior employment; employment Compensation reports relating benefits and eligibility, references (cont. on line 12)
7. Arrangement Alph. by names of applicants
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Handwritten and typed on plain paper, printed heads and on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of steel file drawer 11"2" x 14" x 26 1/2" Average 2000 cases per drawer
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
(Average 10 papers per individual)
11. Location by dates and quantities 1938 TO DATE - 3 Steel file drawers
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
on north wall in record room (in cellar)
12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 6 ~~relating~~ relating to establishing residence in Baltimore City; grant of authorization for substitution of other member of family for work; assignment of any and all banking funds and life insurance interest during such period as relief is administered; establishment of parentage and marital status, and rent notifications.
13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

"Closed Files"

(Case History Records - Referrals)

Continued from line # _____ list of drawers
labeled as follows

Closed Files

D.P.W. - G.P.A. - W.P.A. - N.C.M.

A - G

Closed Files

D.P.W. - G.P.A. - W.P.A. - N.C.M.

H - P

Closed Files

D.P.W. - G.P.A. - W.P.A. - N.C.M.

Q - Z

D.P.W. = Dept. of Public Welfare

G.P.A. = General Public Assistance

W.P.A. = Works Progress Administration

N.C.M. = No Case Made

THE VOLUMES FORM—Continued

10. Size
(Height, width, and thickness, and average number of pages, by uniform groups)

11. Location by dates and volume numbers
(Buildings and rooms or vaults)

12. Subtitle divisions by dates and volume numbers

13. Other information

SCOTT-KOVAKA
(Worker's full name)

12-1-38
(Date)

11
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 ST. PAUL PLACE
BASEMENT-RECORD ROOM
(Name of building, room number, street address)

1. Title "CLOSED FILES" "DPW" - (DEPARTMENT OF PUBLIC WELFARE)
"CCC" - (CIVILIAN CONSERVATION CORPS)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1937 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2 - STEEL FILE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling AS SHOWN ON LINE 1 - WITH INCLUSIVE LETTERING } "ALASCIO-KYLER"
"LANDSA-ZORNAK"
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINING CLOSED CASES OF CERTIFICATIONS AND REFERRALS FOR
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record.

ENROLLMENT IN THE CIVILIAN CONSERVATION CORPS, EMANATING FROM
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by

THE DEPARTMENT OF PUBLIC WELFARE, INCLUDING SOCIAL WORKERS' CASE
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

HISTORY OF APPLICANT, CORRESPONDENCE RESPECTING APPOINTMENT FOR

INTERVIEW, ALSO REFERENCES AS TO ESTABLISHING RESIDENCE IN BALTO. AND

REFERENCES ESTABLISHING PARENTAGE AND MARITAL STATUS, CORRESPONDENCE

RELATIVE TO ABSENCE AND DISCHARGE, IDENTIFICATION REPORTS BY THE

SOCIAL SERVICE EXCHANGE AND RECRUITING OFFICER'S REPORT OF APPLICANT'S
ACCEPTANCE

6. Contents—continued _____

7. Arrangement ALPHABETICALLY BY NAME OF APPLICANT.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN AND TYPED OF PRINTED HEADS, PRINTED FORMS AND PLAIN PAPER.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWERS 11 1/2" x 14" x 26 1/2" } AVERAGE 1000 CASES
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
} APPROXIMATELY 5000 PAPERS
} EACH DRAWER

11. Location by dates and quantities 1937 TO DATE - 2-STEEL FILE DRAWERS LOCATED NEAR NORTH WALL OF RECORD ROOM IN BASEMENT.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information RECORDS AND CONTAINERS ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

SCOTT-KOVAKA
(Worker's full name)

12-2-38
(Date)

12
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 ST. PAUL PLACE
(Name of building, room number, street address)
BASEMENT - RECORD ROOM

1. Title "CLOSED FILE - MISC. FILE"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1933 --
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2 - STEEL FILE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling AS SHOWN ON LINE 1 WITH INCLUSIVE LETTERING - L.C. - 1-DRAWER "B"
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINS RECORD OF CLOSED WELFARE CASES, INCLUDING INTERVIEW APPLICATION BLANKS GIVING FULL HISTORY OF APPLICANTS, SOCIAL WORKER'S INVESTIGATION HISTORY OF APPLICANT, CASE HISTORY RECORD, CORRESPONDENCE RELATIVE TO THE FURNISHING OF WEARING APPAREL, COMMODITIES AND OTHER ARTICLES, ALSO RENT NOTIFICATIONS, CORRESPONDENCE RELATING TO WORK ASSIGNMENTS, MEDICAL REPORTS, APPLICATIONS FOR RELIEF, REPORTS OF PREVIOUS EMPLOYMENT, REQUESTS FOR POLICE INFORMATION, REPORTS AS TO CUT-OFFS, RECORD OF BUDGET ALLOWANCES AND REPORTS, ASSIGNMENTS
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued AND IDENTIFICATION FOR WORK, RECORD OF INSURANCE CARRIED, IF ANY, REGISTRATION CARD FROM NATIONAL RE-EMPLOYMENT SERVICE AND CERTIFICATION OF ELIGIBILITY FOR WORK.

7. Arrangement ALPHABETICALLY BY NAME OF APPLICANT
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN AND TYPED ON PRINTED HEADS, PRINTED FORMS AND PLAIN PAPER
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWERS 11 1/2" X 14" X 26 1/2" AVERAGE 250 CASES PER DRAWER.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1933 TO DATE - 2 - STEEL FILE DRAWERS LOCATED ON NORTH WALL OF RECORD ROOM IN BASEMENT.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information RECORDS AND CONTAINERS ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

SCOTT-KOYAKA
(Worker's full name)

12-5-38
(Date)

13
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~BALTIMORE CITY~~ BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 ST. PAUL PLACE
(Name of building, room number, street address)

BASEMENT - RECORD ROOM

1. Title "NO CASE MADE FILE" "BERG" (BALTIMORE EMERGENCY RELIEF COMMISSION)
"E.C.A." (EMERGENCY CHARITY ASSOCIATION)
"W.P.A." (WORKS PROGRESS ADMINISTRATION)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities)

or both)

2. Dates 1933 --
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 17 - STEEL FILE DRAWER
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling AS SHOWN ON LINE 1 - WITH INCLUSIVE LETTERING } SEE ADDENDUM SHEET
(Explain fully; years; numbers; letters; number of records so labeled) } LIST OF DRAWERS.

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS CASE HISTORIES OF APPLICANTS SEEKING WORK
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record.

ASSIGNMENTS, INCLUDING REFERRAL DATA FROM THE B.E.R.C. AND/OR
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by

E.C.A. TO THE W.P.A., APPLICATIONS FOR GENERAL PUBLIC ASSISTANCE
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

SOCIAL WORKER'S INVESTIGATION OF APPLICANTS, GIVING FULL

DETAILS OF QUALIFICATIONS, UNEMPLOYMENT COMPENSATION REPORTS,

EMERGENCY ORDERS FOR SURPLUS FOOD COMMODITIES, REFERENCES AS

TO ESTABLISHING RESIDENCE, INTAKE APPLICATION INTERVIEW RECORDS,

INTAKE APPOINTMENT RECORDS, SUPPLEMENTARY RECORDS OF INVESTIGATION.

6. Contents—continued CORRESPONDENCE RELATING TO PRIOR EMPLOYMENT, ASSIGNMENT OF ANY AND ALL BANKING FUNDS AND LIFE INSURANCE INTERESTS AND HOLDINGS DURING SUCH PERIOD AS ASSISTANCE IS BEING RECEIVED, CERTIFICATION OF ELIGIBILITY FOR WORK ON W.P.A. OR G.C.C., REGISTRATION CARD FROM - CONT. ON LINE 12.
7. Arrangement ALPHABETICALLY BY NAME OF APPLICANT
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing HANDWRITTEN AND TYPED ON PRINTED HEADS, PRINTED FORMS AND PLAIN PAPER.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF STEEL FILE DRAWERS 11 1/4" x 14" x 26 1/2" AVERAGE 1000 CASES OR APPROXIMATELY 500 PAPERS PER EACH DRAWER.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities 1933 TO DATE - 17 STEEL FILE DRAWERS LOCATED NEAR NORTH WALL OF RECORD ROOM IN BASEMENT.
(Room. vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information RECORD AND CONTAINERS ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
Whether record is known to have been kept earlier than dates shown in item 2)
CONTINUED FROM LINE 6:-
NATIONAL RE-EMPLOYMENT SERVICE, STATISTICAL INTAKE RECORD, GIVING DETAILS AS TO APPLICATION'S CLASSIFICATION AND APPLICATIONS FOR RELIEF ASSISTANCE.
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

"NO CASE MADE FILE"

13

"B.E.R.C." (BALTIMORE EMERGENCY RELIEF COMMISSION)

"E.C.A." (EMERGENCY CHARITY ASSOCIATION)

"W.P.A." (WORKS PROGRESS ADMINISTRATION)

LABELED AS FOLLOWS: -

17 - STEEL FILE DRAWERS LETTERED

"AA - BECK"

"BECO - BROOK"

"BROOKS - CARS"

"CARR - DAMS"

"DAN - EVANO"

"EVANS - G. N."

"GOD - HARZ"

"HAW - J. A. L."

"JAM - KIK"

"KIL - MCCOY"

"MCCR - MONT"

"MOO - PIM"

"PIN - RZ"

"SAA - SMITH (J)"

"SMITH (L) - THOMAS (E)"

"THOMAS (F) - WAY"

"WEA - Z. Y. S."

Kovaka-Scott
(Worker's full name)

12-20-58
(Date)

14
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON; D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland
Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place
(Name of building, room number, street address)

1. Title (Record Of Persons Working On W.P.A. And Of Persons Who Had Been Working On W.P.A.)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1936--
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 8 Cardboard boxes
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling Not labeled, see addenda sheet for list of boxes.
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Card shows dates of referrals; name and address of applicant; case number; name of person their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by available for W.P.A.; Social Security number; date of initial assignment; employment classification; date rejected; remarks concerning eligibility for unemployment compensation; date cut off and reason for cut off.
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents ¹¹¹¹ continued _____

7. Arrangement Alph. by names of applicants
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on plain cards
(Handwritten Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of cardboard box 3 1/2" x 5 1/4" x 10" Average 1000 cards per box.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1936 to date, 8 cardboard boxes on top of desk in north west corner of record room in cellar.
(Room, vault, wall, N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records are in excellent condition
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

Record of persons working on W.P.A. and
of persons who have been working on W.P.A.

continued from line 6; list of file boxes as follows

1 box	A - C
1 "	C - G
1 "	G - I
1 "	J - L
1 "	M - N
1 "	O - R
1 "	S - T
1 "	T - Z

SURVEY OF STATE AND LOCAL HISTORICAL RECORDS: 1936
HISTORICAL RECORDS SURVEY

(Name of State)

THE PAINTINGS AND STATUARY FORM

(Leave this space blank)

County City or town

Agency or department

Bureau

Name of other owner, if any

Name of building
(Street address)

1. Item or items
(Paintings, etchings, drawings, statues, etc.)

2. Title or subject

3.
(Number of items) (Date or dates) (Size or sizes)

4. Indicate by an (x) whether: Oil (), watercolor (), engraved (), crayon (), pen-and-ink (),
photostat (), mounted (), framed (), marble (), bronze ().

5. Condition of work

6. Artist
(Publisher or engraver) (Place of publication)

7. Location
(Rooms and vaults, corridors, parks, etc.)

8. Other information

SCOTT-KOVAKA
(Worker's full name)

12-16-38
(Date)

15
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND
Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 ST. PAUL PLACE
(Name of building, room number, street address)
RECORD ROOM - BASEMENT

1. Title (W.P.A. ASSIGNMENTS - CUT-OFFS AND RECLASSIFICATIONS)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1935--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 22-STEEL FILE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other) } SEE ADDENDA SHEET

4. Labeling DRAWERS LABELED WITH INCLUSIVE LETTERING } LIST OF DRAWERS
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS W.P.A. ASSIGNMENTS, REASSIGNMENTS, RECLASSIFICATIONS,
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
NOTICES OF TERMINATION OF EMPLOYMENT, NOTICES TO REPORT FOR WORK
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
ON PROJECT AND NOTICES OF CHANGE IN WORK STATUS; SHOWING NAME AND
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
ADDRESS OF EMPLOYEE AND PROJECT INVOLVED, INCLUDING OTHER GENERAL
DETAILS PERTAINING TO SOCIAL SECURITY IDENTIFICATION NUMBER, CASE
NUMBER, DATE OF ASSIGNMENT, SEX, RACE, WAGE CLASSIFICATION AND
EMPLOYMENT CLASSIFICATION, ALSO BEARING STAMP SHOWING DATE OF RECEIPT
OF SLIPS IN THE DEPARTMENT OF PUBLIC WELFARE AND INCLUDING DATE OF

6. Contents—continued INITIAL SALARY CHECKS TO CLIENTS AS WELL AS STAMPS
SHOWING FAILURE TO REPORT AND REJECTIONS.
7. Arrangement ALPHABETICALLY BY NAME OF CLIENTS
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing TYPED ON PLAIN AND PRINTED FORMS
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF STEEL FILE DRAWERS 5" x 6 1/2" x 20" AVERAGE 2500 FORMS PER DRAWER.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities 1935 TO DATE - 22 - STEEL FILE DRAWERS - LOCATED
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
NEAR WEST WALL OF RECORD ROOM IN BASEMENT
12. Other information RECORDS AND CONTAINERS ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

(WPA - ASSIGNMENTS - CUT-OFFS AND RE-CLASSIFICATIONS)

DRAWERS LABELED WITH INCLUSIVE LETTERING AS FOLLOWS:-

A - BAN

BANN - BOR

BOS - BUS

BUSI - COF

COG - DAY

DEA - EU

EV - GA

GE - HALLA

HALLE - HIT

HO - JA

JE - KEL

KE - LE

LEI - MEW

MAA - MONR

MONT - OY

PA - RAN

RAO - SAN

SAP - A + E. SMITH

F. SMITH - S S

TA - WAK

WAL - A. E. WILLIAMS

F. WILLIAMS - Z

TOTAL 22-STEEL FILE DRAWER.

THE VOLUMES FORM—Continued

10. Size
(Height, width, and thickness, and average number of pages, by uniform groups)

11. Location by dates and volume numbers
(Buildings and rooms or vaults)

12. Subtitle divisions by dates and volume numbers

13. Other information

SCOTT-KOVAKA
(Worker's full name)

12-19-38
(Date)

16'
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 ST. PAUL PLACE
(Name of building, room number, street address)
RECORD ROOM - BASEMENT.

1. Title (RECORD OF NON-RELIEF CLIENTS ELIGIBLE FOR W.P.A. PROJECTS)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1935--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2 - STEEL FILE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling 1-DRAWER LABELED "FORM 600 "A-Z (A-M) NO RECORDS" NOT LABELED (M-Z).
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINING CERTIFICATION OF ELIGIBILITY SLIPS FOR W.P.A. PROJECTS. SHOWING CASE NAME AND ADDRESS OF APPLICANTS, CASE NUMBER, RELIEF DISTRICT APPLIED TO BY APPLICANT, NUMBER OF PERSONS IN CASE, TELEPHONE, RACE OR COLOR, DATE OF CERTIFICATION, LAST-FIRST AND MIDDLE NAME OF APPLICANT, RELATIONSHIP TO THE HEAD OF FAMILY, SEX, MARITAL STATUS, BIRTH DATE AND PLACE THEREOF, DATE AND PLACE OF NATURALIZATION OR FIRST PAPERS, SIGNATURE AND TITLE OF SOCIAL WORKER AND DIVISION OF EMPLOYMENT ON W.P.A. PROJECT, ALSO SHOWING STAMP AS TO RECEIPT AND DATE BY MASTER FILE
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record. their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued OF THIS BUREAU AS WELL AS STAMP SHOWING DATE RECEIVED
By THE DEPARTMENT OF PUBLIC WELFARE. - FILE CLEARANCE FORMS SHOW CASE
NAMES AND ADDRESS, CASE NUMBER AND DATE CLEARED - WITH INFORMATION AS TO REASON
FOR REMOVALS FROM ACTIVE FILES - SUCH AS "FAILED TO REPORT" "NOT REGISTERED" "CASE
CLOSED PENDING INVESTIGATION" "MOVED - ADDRESS UNKNOWN" "UNEMPLOYABLE" } CONT ON
LINE 12
7. Arrangement ALPHABETICALLY BY NAMES OF APPLICANTS.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing HANDWRITTEN AND TYPED ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF STEEL FILE DRAWERS 6 1/4" x 8 1/2" x 17" AVERAGE 2000 PAPERS EACH DRAWER.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities 1935 TO DATE - 2 - STEEL FILE DRAWERS - LOCATED NEAR
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
WEST WALL OF RECORD ROOM IN BASEMENT.
12. Other information RECORDS AND CONTAINERS ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
Whether record is known to have been kept earlier than dates shown in item 2)
CONTINUED FROM LINE 6: -
AND SIGNATURE OF THE MANAGER OF THE NATIONAL RE-EMPLOYMENT SERVICE. ALSO
CONTAINS REFERRAL SHEETS SHOWING FAMILY COMPOSITION OF CLIENTS; EMPLOYABLE
MEMBERS; INDIVIDUAL RECORDS OF EMPLOYMENT OF EMPLOYABLE MEMBERS; PROOF
OF NEED AND COMMENTS CONCERNING HISTORY OF CLIENTS AND DISPOSITION BY THE
W. P. A. AS TO ACCEPTANCE OR REJECTION. ALSO U. S. EMPLOYMENT SERVICE REGISTRATION
DATE OF REGISTRATION, IDENTIFICATION NUMBER, PRIMARY AND SECONDARY CLASSIFICATION.
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)
(Place of publication) (Date of publication)

SCOTT-KOVAKA
(Worker's full name)

12-20-38
(Date)

17
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 ST. PAUL PLACE
(Name of building, room number, street address)
RECORD ROOM - BASEMENT.

1. Title (ACTIVE FILE - REFERRALS TO W.P.A.)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1937--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 3-CARTBOARD BOXES
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling BOXES LABELED WITH INCLUSIVE LETTERING } "A-G"
"H-Q"
"R-Z"
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINING RECORD OF PERSONS (OF REFERRALS SENT TO W.P.A.)
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record.

NOT ASSIGNED AS YET. CARD SHOWS DATE OF REFERRALS, NAME AND ADDRESS
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
OF APPLICANT; RACE; NAME OF PERSON AVAILABLE FOR W.P.A. ALSO SOCIAL
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
SECURITY NUMBER OF APPLICANT.

6. Contents—continued _____

7. Arrangement ALPHABETICALLY BY NAMES OF APPLICANT
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPED ON PLAIN CARDS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF CARD-BOARD BOXES 3 1/2 x 5 1/4 x 10" AVERAGE 800 CARDS PER BOX.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1937 TO DATE - 3 CARD-BOARD BOXES LOCATED ON TOP OF DESK NEAR NORTH-WEST CORNER OF RECORD ROOM IN BASEMENT.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information RECORDS AND CONTAINERS ARE IN GOOD CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

SCOTT-KOVAKA
(Worker's full name)

12-19-38
(Date)

18
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 ST. PAUL PLACE
(Name of building, room number, street address)
RECORD ROOM - BASEMENT

1. Title (NOTICE OF FAILURE TO REPORT OR REFUSAL TO ACCEPT REFERRAL)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both).
2. Dates 1935-1936
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 3-STEEL FILE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling DRAWERS LABELED WITH INCLUSIVE LETTERING AS SHOWN ON LINE 12.
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINING NOTIFICATIONS OF FAILURE TO REPORT OR REFUSAL TO ACCEPT REFERRAL AS ISSUED BY THE U.S. EMPLOYMENT SERVICE ON FORMS
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
OF THE U.S. DEPARTMENT OF LABOR, SHOWING DATE SENT TO THE DEPARTMENT OF PUBLIC WELFARE AND ITS LOCATION, NAME AND ADDRESS OF APPLICANT, CASE NUMBER, INFORMATION AS TO (FIRST) "DID NOT ANSWER CALL-IN CARD" (SECOND) "REFUSED REFERRAL TO JOB," ALSO ADDITIONAL COMMENTS SUCH AS DATES REFUSED W.P.A. LABOR AND REASON THEREOF, MANAGER'S SIGNATURE. ON REVERSE SIDE SHOWS DATE RECEIVED - STAMP - IN THE

6. Contents—continued DEPARTMENT OF PUBLIC WELFARE AND ITS MASTER FILE.

7. Arrangement ALPHABETICALLY BY NAMES OF APPLICANTS

(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE

(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by

title and identification number)

9. Writing TYPED ON PRINTED FORMS.

(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWERS 4 1/4" x 5 1/4" x 16" AVERAGE 1800 DOCUMENTS

(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

PER DRAWER.

11. Location by dates and quantities 1935-1936 - 3-STEEL FILE DRAWERS - LOCATED

(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

ON WEST WALL OF RECORD ROOM IN BASEMENT.

12. Other information RECORD AND CONTAINERS ARE IN EXCELLENT CONDITION.

(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

NOTE - THESE RECORDS HAVE BEEN DISCONTINUED (1936) SINCE THE LIQUIDATION OF THE EMERGENCY CHARITY ASSOCIATION.

1-DRAWER LABELED "A TO K"

1-DRAWER LABELED "L TO Z"

1-DRAWER LABELED "FORM 360 TO BE FILED"

13. (For use in Florida.) Early imprints

(Author)

(Publisher)

(Place of publication)

(Date of publication)

Kovaka-Scott
(Worker's full name)

12-16-38
(Date)

19
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland
Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place
(Name of building, room number, street address)

1. Title (Out Of Town Inquiries)
(Give present full title in quotes: assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1935-1936
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling Not labeled
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Out of town inquiries respecting persons employed on W.P.A. projects, cards show date of inquiry; name of applicant; place inquiry received from and present address of employee.
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued _____

7. Arrangement Alph. by names of client
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on plain cards
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of file drawer 4 1/4 x 5 1/4 x 16" Approx. 750 cards.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1935-1936, 1 steel file drawer on east wall in record room in cellar.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
Subsequent records are contained in folder of individual, with other case record.
(Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

Scott-Kovacka
(Worker's full name)

12-5-38
(Date)

20 ✓
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland
Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 Saint Paul Place.
(Name of building, room number, street address)

1. Title (Out of Town Inquiries - Old Age and Mothers Assistance)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1933--
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling Not labeled
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Old Age Pension and Mothers Assistance correspondence and case history records, pertaining to securing their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached
old age pensions and mothers assistance including correspondence from various organizations in and out of town regarding applicant; insurance; social workers correspondence regarding investigations and progress of case.

6. Contents—continued _____

7. Arrangement Alph. by names of applicants
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on plain paper and on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel file drawer 11"4"x14"x26 1/2" Approx 2500 cases.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1 steel file drawer on north wall in record room (in cellar)
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

SCOTT-KOVAKA
(Worker's full name)

12-1-38
(Date)

21
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND
Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 ST. PAUL PLACE
(Name of building, room number, street address)
BASEMENT-RECORD ROOM

1. Title "BALTIMORE CITY HOSPITAL INFIRMARY"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1936 --
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 1 - STEEL FILE DRAWER
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling AS SHOWN ON LINE 1 - WITH INCLUSIVE LETTERING - "A TO Z"
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents RECORDS CONTAIN GENERAL CORRESPONDENCE, REPORTS AND ADMISSION PERMITS RESPECTING HOSPITALIZATION, INCLUDING REPORTS OF EXAMINATIONS AND MEDICAL SERVICES RENDERED, SOCIAL WORKERS' INVESTIGATION AND HISTORY OF APPLICANT, CORRESPONDENCE RELATIVE TO TRANSPORTATION, AND ALSO AS TO PREVIOUS STATUS OF THE APPLICANT BEFORE ESTABLISHING PERMANENT RESIDENCE IN THE CITY, REFERRAL PERMIT AUTHORIZING ADMITTANCE OF CLIENT IN THE HOSPITAL, ALSO HOSPITAL'S ADMISSION SLIP GIVING FULL DETAILS PERTAINING TO THE HISTORY OF APPLICANT.
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

HOSPITALIZATION

6. Contents—continued *NOTE - THESE RECORDS CONTAIN INDIVIDUAL CASES OF CLIENTS HAVING BEEN ACCEPTED BY THE WELFARE ORGANIZATIONS IN BALTIMORE, DURING SUCH PERIODS AS RELIEF IS BEING AFFORDED TO SUCH CLIENTS.*

7. Arrangement *ALPHABETICALLY BY NAMES OF CLIENTS*
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing *NONE*
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing *HANDWRITTEN AND TYPED ON PRINTED HEADS, PRINTED FORMS AND PLAIN PAPER*
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size *OF STEEL FILE DRAWER 11 1/2" x 14" x 26 1/2" AVERAGE 400 CASES APPROXIMATELY 2500 PAPERS*
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities *1936 TO DATE 1 - STEEL FILE DRAWER ON NORTH WALL OF RECORD ROOM IN BASEMENT.*
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information *RECORDS AND CONTAINER ARE IN EXCELLENT CONDITION.*
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

SCOTT-KOVAKA
(Worker's full name)

12-19-38
(Date)

22
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND
Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 ST. PAUL PLACE
(Name of building, room number, street address)
RECORD ROOM - BASEMENT

1. Title (GRANT AUTHORIZATIONS - OLD AID ASSISTANCE - AID TO
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
DEPENDENT CHILDREN)
or both)
2. Dates 1938 --
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 1 - STEEL FILE DRAWER
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling DRAWER NOT LABELED
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another
record. Explain why records are missing, if possible)

6. Contents CONTAINING GRANT AUTHORIZATION RECORDS OF CHANGE IN ADDRESSES,
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
CHANGE IN AMOUNT TO LESS INCOME, DECREASED INCREASE TO MAXIMUM
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
GRANT, CHANGE IN FAMILY GROUP, INCORRECT ADDRESSES, SHOWING PAYROLL
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
NUMBER, WELFARE NUMBER, OLD AGE ASSISTANCE - ENTRY - CHANGE - EMERGENCY -
FUEL - ICE - CUT-OFFS; ALSO NAMES AND ADDRESSES OF CLIENTS, INCLUDING OLD
AND NEW ADDRESS; SEMI-MONTHLY GRANTS SHOW AMOUNT FOR STATE - CITY -
TOTAL AND MONTHLY; ONE TIME EMERGENCY PAYMENT; NUMBER IN FAMILY (PAST
AND PRESENT); DATE OF BIRTH, RACE, RELIGION, DATE ISSUED AND DATE EFFECTIVE,

6. Contents—continued REMARKS AS TO REASON OF CHANGE AND REMARKS AS TO CHANGE OF ADDRESS, ALSO DEPARTMENT OF PUBLIC WELFARE OFFICE RECORD SHOWING CHANGES AS REQUESTED AND NEW SOCIAL WORKER

7. Arrangement ALPHABETICALLY BY NAMES OF CLIENTS.

(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE

(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN ON PRINTED FORMS.

(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWER 6" x 9" x 24" AVERAGE 3000 DOCUMENTS

(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1938 TO DATE - 1-STEEL FILE DRAWER, LOCATED

(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

NEAR WEST WALL OF RECORD ROOM IN BASEMENT.

12. Other information RECORDS AND CONTAINERS ARE IN EXCELLENT CONDITION.

(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

NOTE: - THERE ARE DIFFERENT COLORED FORMS USED FOR EACH CLASSIFICATION.

NOTE: - THESE FORMS WILL EVENTUALLY BE FILED WITH THE CASE HISTORY

RECORDS OF EACH PARTICULAR CLIENT.

13. (For use in Florida.) Early imprints

(Author)

(Publisher)

(Place of publication)

(Date of publication)

SCOTT - KOVAKA
(Worker's full name)

12-21-38
(Date)

23
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND
Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 ST. PAUL PLACE
(Name of building; room number, street address)
RECORD ROOM - BASEMENT

1. Title (OLD AGE PENSIONS PENDING)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1937--
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 6 - STEEL FILE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling DRAWERS NOT LABELED - SEE LINE 12 - LIST OF DRAWERS AS NUMBERED.
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINING SUPERVISORS INDEX CARDS OF OLD AGE PENSIONS PENDING,
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
SHOWING NAME AND ADDRESS OF APPLICANT AND CASE NUMBER, ALSO BUDGET CARDS, SHOWING IDENTICAL INFORMATION, ALSO RECORD-OUT CARD, SHOWING CASE NUMBER, NAME OF APPLICANT, DATE ISSUED AND BY WHOM RECEIVED.
RECORDS CONTAIN FACE SHEETS GIVING APPLICANT'S IDENTIFICATION HISTORY, APPLICANT'S APPLICATION FOR OLD AGE ASSISTANCE, CASE HISTORY RECORD, SOCIAL SERVICE EXCHANGE IDENTIFICATION RECORD, INTAKE APPLICATION INTERVIEW RECORD, REFERENCES ESTABLISHING

6. Contents—continued RESIDENCE, DEATH AND MARRIAGE CERTIFICATION RECORD.

.....
.....
.....

7. Arrangement NUMERICALLY BY CASE NUMBERS.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN AND TYPED ON PRINTED FORMS AND PLAIN PAPER.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWERS 11 1/2" x 14" x 2 1/2" AVERAGE 275 DOCUMENTS
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
PER DRAWER.

11. Location by dates and quantities 1937 TO DATE - 6-STEEL FILE DRAWERS, LOCATED
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, or floor)
NEAR WEST WALL OF RECORD ROOM IN BASEMENT.

12. Other information RECORDS AND CONTAINERS ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

CONTINUED FROM LINE 4:-

Whether record is known to have been kept earlier than dates shown in item 2)

<u>1 - STEEL FILE DRAWER - LABELED "14400 To 14699"</u>					
<u>1</u>	<u>"</u>	<u>"</u>	<u>"</u>	<u>"</u>	<u>14700 To 15075</u>
<u>1</u>	<u>"</u>	<u>"</u>	<u>"</u>	<u>"</u>	<u>15076 To 15284</u>
<u>1</u>	<u>"</u>	<u>"</u>	<u>"</u>	<u>"</u>	<u>15318 To 15565</u>
<u>1</u>	<u>"</u>	<u>"</u>	<u>"</u>	<u>"</u>	<u>15566 To 15859</u>
<u>1</u>	<u>"</u>	<u>"</u>	<u>"</u>	<u>"</u>	<u>15861 To 16098</u>

18. (~~Use in Florida~~) ~~Early imprints~~ (Author) (Publisher)

Note: These records will eventually be filed in Closed Files (Aid to Dependent Children - Old Age Pensions - Aid To Blind) serial #8
(Place of publication) (Date of publication)

Kovak - Scott
(Worker's full name)

12-15-38
(Date)

24
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland
Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place
(Name of building, room number, street address)

1. Title (Old Age Records - Dead)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1930 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 4 Steel file drawers; 3 Cardboard transfer cases.
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling Not labeled (list of file drawers on attached addenda sheet)
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)
6. Contents Individual records of persons who have received old age pensions, now deceased; including application for old age relief; report on application for Old Age Relief; Old Age Assistance, Entry Ticket; Old Age Assistance Change Ticket; Old Age Assistance Cut Off Ticket; Social Service Exchange Identification Report; Death Report; Memorandum of monthly grants; Certification as to residence; Marriage Report; family status as to employment and earnings; social workers investigations
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued and summary of case; grant authorizations
i.e. change of address, changes in amount to less income,
increases to maximum grant, change in family group, incorrect
address, letters of references; Hospital Dispensary Reports;
authorization as to turning over all financial and insurance (cont. on line 12)
7. Arrangement Alph. by names of clients
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Typed and handwritten on plain paper, printed heads
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
and on printed forms.
Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of file drawers 11 1/2" x 14" x 26 1/2" Average 175 cases per drawer,
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
average 15 papers per case.
11. Location by dates and quantities 1930-TO DATE - 7 file drawers on east wall
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
in record room (in cellar).
12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 6—held to the Department of Public Welfare;
Correspondence between Dept. of Public Welfare and out side sources
respecting clients' family status, residence, earnings, insurance etc.;
13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

(Old Age Records - Dead)

Continued from line 4 ~~~ list of file drawers

Ackman ~	Byrnes	}	steel file drawers
Cadell ~	Dyson		
Egan ~	Guy		
Hackett ~	Ivy		
Jackson ~	Lynch	}	cardboard transfer cases
McAllister ~	Owings		
Pankrath ~	Shulkrout		

Note: The above file drawers are not labeled.

THE VOLUMES FORM—Continued

10. Size
(Height, width, and thickness, and average number of pages, by uniform groups)

11. Location by dates and volume numbers
(Buildings and rooms or vaults)

12. Subtitle divisions by dates and volume numbers

13. Other information

SCOTT-KOVAKA
(Worker's full name)

12-20-38
(Date)

25
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND
Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 ST. PAUL PLACE
(Name of building, room number, street address)
RECORD ROOM - BASEMENT

1. Title (SEAMEN RECORD)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1938 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2- CARD-BOARD BOXES
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling BOXES LABELED WITH INCLUSIVE LETTERING } 1 BOX LABELED "A-K"
1 BOX LABELED "L-Z"
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINS RECORD OF SEAMEN ASSIGNED TO W.P.A. OR REFERRALS
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record.
TO THE W.P.A. ALSO OF SEAMEN WHO HAVE WORKED ON THE W.P.A. CARDS
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
SHOW DATE OF REFERRAL, NAME AND ADDRESS OF SEAMEN, RACE, CASE NUMBER,
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
NAME OF PERSON AVAILABLE FOR W.P.A., SOCIAL SECURITY NUMBER, DATE
RECEIVED, DATE ASSIGNED TO PROJECT, PROJECT NUMBER, CLASSIFICATION OF
WORK, DATE OF CUT-OFF AND REASON.-IN FRONT OF BOX CONTAINS CASES OF
ASSIGNMENTS PENDING OR CASES WHICH HAVE BEEN RETECTED.

6. Contents—continued _____

7. Arrangement ALPHABETICALLY BY NAME OF APPLICANTS
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPED ON PLAIN CARDS
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF CARD-BOARD BOXES 3 1/2 x 5 1/4 x 10" AVERAGE 800 CARDS PER BOX
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1938 TO DATE 2 - CARDBOARD BOXES, LOCATED ON NORTH WALL IN WEST CORNER OF RECORD ROOM IN BASEMENT.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information RECORDS AND CONTAINERS ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Kovaka - Scott
(Worker's full name)

12-16-38
(Date)

26 ✓
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland
Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place.
(Name of building, room number, street address)

1. Title "Street File"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1930--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 18 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling See addenda sheet - List of file drawers as labeled.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Record of clients residence; respecting
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,

persons receiving Old Age Pension, Assistance to Blind,
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by

Assistance to Dependent Children and persons in
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

Civilian Conservation Corps; cards show name of
street, house number, name of client, classification
of case and case number.

6. Contents—continued _____

7. Arrangement Alph. by names of clients
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on ruled cards
(Handwritten Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of file drawers 4 1/4" x 5 1/4" x 16" Average 2000 cards per drawer,
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1930-to DATE - 18 steel file drawers on west wall in record room in cellar.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

"Street File"

Continued from line 4 — List of steel file drawers
as labeled

Street File	Abbott - Bangor
"	" Bank - Bosworth
"	" Bouldin - Carlton
"	" Caroline - Clearview
"	" Clement - Druid Hill
"	" Druid Park - Eugene
"	" Eutaw - Franklin
"	" Franklinton - Grund
"	" Guilford - Hollins
"	" Homestead - Lawrence
"	" Leadenhill - Lynne
"	" Maccubbin - Mill Race
"	" Milton - Norwood
"	" Oak - Philadelphia
"	" Piedmont - Riverside
"	" Robb - Stirling
"	" Stockton - Whittier
"	" Wickes - Young and Numbered Streets.

WORKS PROGRESS ADMINISTRATION

SURVEY OF STATE AND LOCAL HISTORICAL RECORDS: 1936
HISTORICAL RECORDS SURVEY

(Name of State)

(Leave this space blank)

THE PAINTINGS AND STATUARY FORM

County City or town

Agency or department

Bureau

Name of other owner, if any

Name of building
(Street address)

1. Item or items
(Paintings, etchings, drawings, statues, etc.)

2. Title or subject

3.
(Number of items) (Date or dates) (Size or sizes)

4. Indicate by an (x) whether: Oil (), watercolor (), engraved (), crayon (), pen-and-ink (),
photostat (), mounted (), framed (), marble (), bronze ().

5. Condition of work

6. Artist
(Publisher or engraver) (Place of publication)

7. Location
(Rooms and vaults, corridors, parks, etc.)

8. Other information

SCOTT-KOVAKA
(Worker's full name)

12-15-38
(Date)

27 ✓
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 ST. PAUL PLACE
(Name of building, room number, street address)
RECORD ROOM - BASEMENT.

1. Title (STREET INDEX FILE - GENERAL PUBLIC ASSISTANCE)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1933 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 65 - STEEL FILE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling DRAWERS LABELED AS SHOWN ON ADDENDA SHEETS
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINING STREET INDEX FILE OF CLIENTS RECEIVING GENERAL PUBLIC ASSISTANCE, SHOWING STREET NAME, STREET NUMBER, CLIENT'S NAMES AND DATES OF REMOVALS.
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued _____

7. Arrangement ALPHABETICALLY BY STREET NAMES
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPED ON RULED CARDS
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWERS 4 1/4" X 5 1/4" X 16" AVERAGE 1500 CARDS
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
PER DRAWER (SIZE OF CARDS 3" X 5")

11. Location by dates and quantities 1933 TO DATE - 65 - STEEL FILE DRAWERS LOCATED
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
NEAR EAST WALL OF RECORD ROOM BASEMENT.

12. Other information RECORDS AND CONTAINERS ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

(STREET INDEX FILE)

40 STEEL FILE DRAWERS LABELED AS FOLLOWS:

- ABBINGTON AVENUE TO ANN STREET
- ANNABELLE AVENUE TO AVONDALE AVENUE
- BAKER STREET TO BARNEY STREET
- BARRE STREET TO BENSON AVENUE
- BENTALAU STREET TO BIDDLE STREET
- BINNEY STREET TO BOYLE STREET
- BRABANT ROAD TO BRUCE STREET
- BRUCE TERRACE TO CALVERT STREET
- CHURCH AVENUE TO COLLECTT STREET
- CABLE ROAD TO CARDIFF AVENUE
- CAREY STREET TO CARROLLTON AVENUE
- CARSDALE AVENUE TO CHAPEL GATE LANE
- CHARLES STREET TO CHRISTOPHER AVENUE
- COLLINGTON AVENUE TO CULVER STREET
- CUMBERLAND STREET TO DELMONT STREET
- DENMORE STREET TO DRUID HILL AVENUE
- DRUID PARK DRIVE TO EARECKSON PLACE
- EAST AVENUE TO EDMONISON AVENUE
- EDYTHE STREET TO ETHLAND AVENUE
- ETTING STREET TO FAIROAK AVENUE
- FAIRVIEW AVENUE TO FAYETTE STREET
- FEAR AVENUE TO FRANKFORD AVENUE
- FRANKLIN STREET TO FRONT STREET
- FULTON AVENUE TO GILMOR STREET
- GILMOR STREET TO GREENHILL AVENUE
- GREENMOUNT AVENUE TO HAMPDEN AVENUE
- HAMPUETT ROAD TO HAYS STREET
- HAYWARD AVENUE TO HIGHWOOD AVENUE
- HILL STREET TO HOPE STREET
- HOPEWELL STREET TO JAYNE STREET
- JEFFERSON STREET TO KESWICK ROAD
- KEY AVENUE TO LANSING AVENUE
- LANVALE STREET TO LELAND AVENUE
- LEMMON STREET TO LINA COURT
- LINCOLN AVENUE TO LORD STREET
- LORMAN STREET TO MADISON AVENUE
- MAEMPLE LANE TO MATTHEWS STREET
- MATTFELDT AVENUE TO MONTFORD AVENUE
- MONTGOMERY STREET TO MOTT STREET
- MOUNT STREET TO MULBERRY STREET

(STREET INDEX FILE)

25 STEEL FILE DRAWERS LABELED AS FOLLOWS:

MULLIKIN STREET	TO	MC ELJERRY STREET
MEHENRY STREET	TO	NORRIS STREET
NORTH AVENUE	TO	OLDHAM STREET
OLD YORK ROAD	TO	OXFORD STREET
PACA STREET	TO	PATON AVENUE
PATTERSON PARK AVENUE	TO	PERKINS AVENUE
PERLMAN PLACE	TO	PORT AVENUE
PORTLAND STREET	TO	PRESSMAN STREET
PRESTON STREET	TO	PURITAN STREET
QUAIL STREET	TO	QUINTON STREET
RACE STREET	TO	RIDGECROFT ROAD
RIDGEHILL AVENUE	TO	ROLAND HEIGHTS AVENUE
ROLLING ROAD	TO	RYAN STREET
ST. AMBROSE STREET	TO	SARAH ANN STREET
SARATOGA STREET	TO	SHERWOOD AVENUE
SHIELDS PLACE	TO	STERRETT PLACE
STEVENSON STREET	TO	SYCAMORE STREET.
TACOMA STREET	TO	TYSON STREET
UFFINGTON ROAD	TO	UTAH STREET.
VAIL AVENUE	TO	VONDERHORST LANE
WAESCHE STREET	TO	WESLEY AVENUE
WEST STREET	TO	WILSON AVENUE
WILTON HEIGHTS	TO	WYOMING STREET
Y. ALLEY	TO	YOUNGSTOWN AVENUE
FIRST STREET	TO	EIGHTY-FIRST STREET - "NUMBER STREETS"

TOTAL 65 - STEEL FILE DRAWER.

SCOTT-KOVAKA

(Worker's full name)

1-3-39

(Date)

28

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~DEPARTMENT OF~~ BALTIMORE CITY State MARYLAND
Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 ST. PAUL PLACE
(Name of building, room number, street address)
RECORD ROOM - BASEMENT

- Title "MAP OF BALTIMORE CITY - PREPARED BY THE BUREAU OF PLANS AND SURVEYS IN 1933"
(Give present full title in quotes: assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
- Dates 1933 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)
- Quantity 1 - MAP (PRINTED)
(Number of volumes: file drawers; file boxes; bundles; other)
- Labeling AS SHOWN ON LINE 1.
(Explain fully; years; numbers; letters; number of records so labeled)
- Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents POLITICAL MAP SHOWING WARDS AND DISTRICTS ARRANGED ACCORDING TO SOCIAL WORKERS ASSIGNMENTS OF CASE LOAD, INCLUDING CEMETERIES, CITY PROPERTIES, TUNNELS, SEMI-PUBLIC PROPERTIES, SCHOOLS, ENGINE HOUSES AND OTHER PROPERTIES OF THE MAYOR AND CITY COUNCIL OF BALTIMORE CITY, ALSO U.S. GOVERNMENT, STATE AND SEMI-PUBLIC BUILDINGS, STEAM AND ELECTRIC RAILWAYS.

NOTE: PRINTED MAP IS MARKED OFF IN CRAYON AND BORDERED WITH COLORED CORD DENOTING BOUNDARIES OF SOCIAL WORKERS TERRITORIES AND

6. Contents—continued ALSO CONTAINS THUMB-TACKS OF SOCIAL WORKERS IDENTIFICATION NUMBERS AND ASSIGNMENTS.

7. Arrangement NUMERICALLY BY SOCIAL WORKER'S IDENTIFICATION NUMBER.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing PRINTED MAP
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF PRINTED MAP 67" x 54" MOUNTED ON COMPOSITION BOARD AND ARRANGED AS TO SCALE OF 1" TO 1000 FEET.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1933 TO DATE - 1-PRINTED MAP LOCATED IN PRIVATE OFFICE OF THE MANAGER OF THE RECORD ROOM IN BASEMENT.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information RECORD IS IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

NOTE - B.E.R.C. - BLACK CORD - BALTIMORE EMERGENCY RELIEF COM.
F.W.A. - LIGHT BLUE CORD - FAMILY WELFARE ASSOCIATION.
D.P.W - RED CORD - DEPARTMENT OF PUBLIC WELFARE.

NOTE - THIS MAP IS USED IN CONJUNCTION WITH (INDEX OF ASSIGNMENTS TO SOCIAL WORKERS) SEE SERIAL # 5

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

Kovaka - Scott

(Worker's full name)

1-3-39

(Date)

29

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland
Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place (Registrar of Records Office)
(Name of building, room number, street address)

1. Title (General Correspondence)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1937--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Not labeled
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Correspondence to and from various relief organizations out of town pertaining to their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached
set up and functioning of the Department of Public Welfare, also information pertaining to set up of other relief organizations; correspondence regarding employment; bulletins pertaining to changes, rules and regulations in set up and operations in Department of Public Welfare; minutes

6. Contents—continued of committee and staff meetings; copies of probation reports from Supreme Bench respecting bastardy and non-support cases; personnel history records.

7. Arrangement Alph. by names of organizations or subjects.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by

title and identification number)

9. Writing Typed and handwritten on plain paper, printed heads and on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel file drawers 11 1/2" x 14" x 26" Average 3000 papers per drawer.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1937 to date, 2 drawers on south wall in Registrar's of Records Office—in cellar
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints
(Author) (Publisher)

(Place of publication)

(Date of publication)

Kovaka-Scott

(Worker's full name)

1-3-39

(Date)

30

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland

Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place (Registrar of Records Office)
(Name of building, room number, street address)

1. Title (Case History Records - Former relief clients now on staff, also persons on W.P.A. projects in Dept. of Public Welfare)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1937 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Not labeled
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Individual case history records include record out card (office record of workers taking out and return their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by of case papers); face sheet (identification record of client); Social Service Exchange Identification; application for relief; case history record; social workers investigations and summary of case; correspondence regarding employment; marriage report; dispensary report; references regarding

6. Contents—continued employment; authorization as to turning over all finances and insurance to Dept. of Public Welfare; employers reports; insurance reports; reports from State Industrial Accident Commission respecting injuries while employed; entry ticket for relief; employment entry ticket.

7. Arrangement Alph. by names of clients
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on plain paper, printed heads and printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of file drawers 11 1/4" x 14" x 26" Approx. 100 cases
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
(Average 25 papers per case)

11. Location by dates and quantities 1937 to date, 1 steel drawer on south wall in Registrar of Records Office - in cellar.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

** INDEX OF **
DEPARTMENT OF PUBLIC WELFARE-OUT-OF-TOWN INQUIRY OFFICE
No.331 St. Paul Place.

<u>SERIAL NO.</u>	<u>SERIAL DATES</u>	<u>S-U-B-J-E-C-T.</u>	<u>YEAR AFFECTED</u>
60	3-10-39	(Out-Of-Town Inquiries-Card Record)	1929 - -.
61	3-13-39	(Out-Of-Town Inquiries-Correspondence File-Completed Investigations of Cases)	1929 - -.
62	3-13-39	(Out-Of-Town Inquiries-Correspondence File-Awaiting Final Investigations) "Pending Inquiries"	1938 - -.
63	3-13-39	" Transportation"	1926 - -.
64	3-10-39	(Transportation and OUT-Of-Town Inquiries-Monthly Reports of Investigations)	1937 - -.
65	3-10-39	" Transient Bureau Records"	1933 - -.

Kovaka-Scott
(Worker's full name)

3-10-39
(Date)

60
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland
Name of agency or office Department of Public Welfare.
(Office of custody) (Office which made the record, if different)
Address of office of custody O.T.I. (Out of Town Inquiries) Office, 331 St. Paul Place.
(Name of building, room number, street address)

1. Title (Out of Town Inquiries - Card Record)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1929--.
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 11 Cardboard file boxes.
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling 10 boxes (1929--) labeled as follows (Continue on line 12)
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Out of Town Inquiries record kept for general reference purposes, respecting relief clients that have moved to and from Baltimore City, and used for investigation and information purposes; Card record shows month, date and year; name of party being investigated; color; legal residence of party (if any); classification of assistance being granted; name and place inquiry emanated of relief organization, institution or agency; reference as

6. Contents—continued to address or visit; social workers' name and date of completion of the investigation of case.
Note: Above record supports Correspondence file for reference purposes when re-inquiries are made of the party and involve investigations regarding Transportation, Old Age Pensions, Establishment of Residence, Non-Residents, (cont. on line 12)

7. Arrangement Alp. by names of parties being investigated.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on plain cards
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of cardboard box 4'x5'2"x16" Average 1000 cards per box
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
(3"x5" cards)

11. Location by dates and quantities 1929 to date, 11 cardboard boxes on table, on south wall in Out of Town Inquiry office.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and containers are in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
It is not known if records made prior to 1929.
(Whether record is known to have been kept earlier than dates shown in item 2)

Continued from line 4

A - Brov	G - Hi	Mi - P	W - Z
Brown - C	Ho - K	Q - Sme	1 box (1938 to date, pending investigations), not labeled.
D - F	L - Me	Smi - Y	

cont'd. from line 6 C.C., Aid to Dependent Children, General Public Assistance, History and Miscellaneous, W.P.A., Aid to Blind.

~~_____~~
(Author) (Publisher)
(Place of publication) (Date of publication)

Kovaka-Scott
(Worker's full name)

3-13-39
(Date)

61
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland
Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record) if different
Address of office of custody D.T.I. (Out of Town Inquiries Office) 331 St. Paul Place.
(Name of building, room number, street address)

1. Title (Out of Town Inquiries - Correspondence File -
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
Completed Investigations of Cases)
or both)
2. Dates. 1929--
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 11 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling See addenda sheet for list of drawers as labeled.
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another
record. Explain why records are missing, if possible)

6. Contents Correspondence to and from this office respecting
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
out of town inquiries of destitute persons having received aid
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
and transportation to their legal residence, also
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
information regarding classification and cost of
assistance; social workers investigation reports and
replies to inquirers; including marital status reports,
identifications, verifications of legal residence; letters stamped
showing dates received in this office; above records are used

6. Contents—continued for general reference purposes when a re-inquiry of case made. Records in four drawers labeled 1936, contain correspondence dating from Jan. 1929 to 1936.

7. Arrangement Folders arr. alph. by names of persons investigated.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing This record supports Out of Town Inquiries Card Record (serial #60)
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
Used as cross reference index to cards, arr. chron. by dates of corresp. recd. in this office.

9. Writing Typed and handwritten on printed heads, printed forms and plain paper.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel file drawer 11" x 14" x 26" Average 5000 papers per drawer.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
(Average 10 documents per case)

11. Location by dates and quantities 1929 to date (drawers labeled 1936 to date), 11 steel
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
file drawers on south wall in Out of Town Inquiries Office.

12. Other information Records and equipment are in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

(Out of Town Inquiries - Correspondence File)

Continued from line 4 ~~~

Drawers labeled as follows

O.T.I. A-Corr 1936

O.T.I. Cors - Harro 1936

O.T.I. Hart - Mez 1936

O.T.I. Mid. - sek 1936

O.T.I. Sel - Z 1936

O.T.I. A - J 1937

O.T.I. K - Z 1937

O.T.I. A - MCM 1938

O.T.I. M - Z 1938

O.T.I. A - MCM 1939

O.T.I. M - Z 1939

Kovaka - Scott
(Worker's full name)

3-13-39
(Date)

62
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland
Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)
Address of office of custody O.T.I. (Out of Town Inquiries Office) 331 St. Paul Place.
(Name of building, room number, street address)

1. Title (Out of Town Inquiries - Correspondence File - Awaiting Final Investigations) "Pending Inquiries"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1938 --
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Drawer labeled "Pending Inquiries"
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None.
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Correspondence awaiting final investigations respecting out of town inquiries of destitute persons seeking aid and transportation to their legal residence, also information regarding classification and cost of assistance; memoranda of social workers investigation and reply to inquirer, including marital status and identification reports; letters stamped showing dates received in this office; above records
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued are used for general reference purposes respecting prior inquiries and final investigations.

7. Arrangement Folders arr. alph. by names of persons being investigated.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing This record supports Out of Town Inquiries - Card Record (serial #60),
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
in regards to prior inquiries; indexed chron by dates correspondence received in this office.

9. Writing Typed and handwritten on printed heads, printed forms and plain paper.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.)
Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel file drawer 11" x 14" x 26" Approx. 1200 papers
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1938 to date, 1 steel file drawer on south wall in Out of Town Inquiries Office.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____ (Author) _____ (Publisher)

(Place of publication)

(Date of publication)

SCOTT-KOVAKA
(Worker's full name)

3-13-39
(Date)

63
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)

Address of office of custody 331 ST. PAUL PLACE
(Name of building, room number, street address)
O. T. I. OFFICE (OUT-OF-TOWN-INQUIRIES)

1. Title "TRANSPORTATION" (General Correspondence)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1926--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2- STEEL FILE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling AS SHOWN ON LINE 1, WITH INCLUSIVE LETTERING - CONT. ON LINE 12.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINING GENERAL CORRESPONDENCE TO AND FROM VARIOUS OUT-OF-TOWN SOCIAL AGENCIES AND SOCIETIES CONCERNING TRANSPORTATION OF CLIENT TO DESIRED DESTINATION, WITH AN APPLICATION BLANK OF CLIENT, SHOWING NAME OF APPLICANT, DATE OF APPLICATION, AGE, COLOR, SEX, MARITAL STATUS, PRESENT ADDRESS IN CITY, FORMER ADDRESS, INFORMATION AS TO WHETHER KNOWN TO OTHER CHARITIES IN THE CITY, WHERE TRANSPORTATION IS DESIRED TO, COST OF RAILROAD FARE OR OTHER TYPE OF TRANSPORTATION, MEALS, ETC. AND HISTORY OF CASE AS PREPARED BY VARIOUS OTHER AID SOCIETIES. RECORDS ALSO
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record. their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

SCOTT-KOVAKA
(Worker's full name)

3-10-39
(Date)

64
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)

Address of office of custody 331 ST. PAUL PLACE
(Name of building, room number, street address)
O.T.I. OFFICE (OUT-OF-TOWN-INQUIRIES)

1. Title (TRANSPORTATION AND OUT-OF-TOWN-INQUIRIES - MONTHLY REPORTS OF INVESTIGATIONS.)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1937 - -,
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 1 - BUNDLE (IN DESK DRAWER)
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling NOT LABELED.
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINING (OFFICE) COPIES OF MONTHLY REPORTS OF THE TOTAL NUMBER OF CASES INVESTIGATED, WITH A DIVISION AS TO THE NUMBER OF CASES HAVING BEEN INVESTIGATED BY EACH INDIVIDUAL WORKER AND/OR INVESTIGATOR AND INCLUDING A DIVISION AS TO THE NUMBER OF CASES IN THE VARIOUS CLASSIFICATIONS, I.E. (TRANSPORTATION - OLD-AGE PENSION - RESIDENCE ESTABLISHED - NON-RESIDENCE - CIVIL CONSERVATION CORPS - AID TO DEPENDENT CHILDREN - GENERAL PUBLIC ASSISTANCE - HISTORY AND MISCELLANEOUS - WORKS PROGRESS ADMINISTRATION AND AID TO THE BLIND), ALSO INVOLVING THE TOTAL NUMBER
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued OF CASES PENDING AND THE TOTAL NUMBER OF CASES HAVING BEEN COMPLETED BY EACH INDIVIDUAL WORKER AND/OR INVESTIGATOR.
NOTE: ORIGINAL COPIES OF REPORTS GO TO THE SUPERVISOR OF THE OUT-OF-TOWN-INQUIRY DEPARTMENT AND ARE USED FOR GENERAL REFERENCE PURPOSES AND FOR THE PREPARATION OF ANNUAL REPORTS.

7. Arrangement CHRONOLOGICALLY BY MONTHS OF REPORTS.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPED ON PLAIN PAPER.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF BUNDLE 11" x 8 1/2" x 1" APPROXIMATELY 26 PAPERS (MONTHLY)
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1937 TO DATE - 1 - BUNDLE, LOCATED IN DESK DRAWER ON NORTH WALL OF OUT-OF-TOWN INQUIRY OFFICE.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information RECORDS AND EQUIPMENT IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)

NOTE: WE WERE INFORMED BY PARTY IN CHARGE THAT TO THE BEST OF HER KNOWLEDGE THIS RECORD WAS ONLY INSTITUTED AND RETAINED SINCE SHE BECAME INVOLVED WITH THIS PARTICULAR DEPARTMENT IN THE YEAR 1937.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

SCOTT-KOVAKA
(Worker's full name)

3-10-39
(Date)

65
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)

Address of office of custody 331 ST. PAUL PLACE
(Name of building, room number, street address)
O.T.I. OFFICE (OUT-OF-TOWN INQUIRIES)

1. Title "TRANSIENT BUREAU RECORDS"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1933 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 5-STEEL FILE DRAWERS - 1-CARDBOARD FILE DRAWER
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling AS SHOWN ON LINE 1, WITH INCLUSIVE LETTERING - CONT. ON LINE 12.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINING CORRESPONDENCE TO AND FROM VARIOUS OUT-OF-TOWN
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,

SOCIAL AGENCIES AND SOCIETIES RELATIVE TO GENERAL RELIEF MATTERS;
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by

INFORMATION AS TO THE FAMILY OF THE CLIENT, RESIDENCE OF CLIENT'S FAMILY;
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

INDIVIDUAL RECORD OF RELIEF RENDERED, INFORMATION RESPECTING

INVESTIGATIONS AND PAYMENTS OF GAS AND ELECTRIC BILLS, INVENTORIES

OF FURNITURE IN THE HOME, EXTENT OF RELIEF GRANTED FOR FOOD, SHELTER,

CLOTHING AND OTHER PERSONAL AND HOUSEHOLD NECESSITIES, CAR-FARES, WORKERS

INVESTIGATION RECORDS, REFERENCES, MEMORANDUM OF CASE-WORKERS, CORRESPONDENCE

6. Contents—continued RELATING TO OUT-STANDING OPEN BILLS OF CLIENT, BILLS AND RECEIPTS FOR MEDICAL SERVICES RENDERED, ALSO TELEGRAMS WITH REGARD TO WORK AND DEATHS IN THE FAMILY, CLIENTS APPLICATION FOR RELIEF AND EMPLOYMENT STATUS CARD ON DAY OF REGISTRATION AND USED FOR GENERAL REFERENCE PURPOSES.

7. Arrangement ALPHABETICALLY BY NAMES OF CLIENTS.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN AND TYPED ON PRINTED HEADS - PRINTED FORMS - PRINTED CARDS AND PLAIN PAPER.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWERS 11" x 14" x 26" - OF CARDBOARD FILE BOX 10 1/2" x 12 1/2" x 24" AVERAGE 500 CASES TO EACH DRAWER OR BOX (EACH INDIVIDUAL FOLDER AVERAGES ABOUT 25 DOCUMENTS)
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1933 TO DATE 5-STEEL FILE DRAWERS AND 1-CARD-BOARD FILE BOX, LOCATED ON THE SOUTH WALL OF THE OUT-OF-TOWN INQUIRY OFFICE.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information RECORDS AND EQUIPMENT ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
CONTINUED FROM LINE 6: NOTE-THE TRANSIENT BUREAU PROPER WAS CLOSED IN FEBRUARY 1935, HOWEVER, DESTITUTE PERSONS ARE STILL RECEIVING AID TO THEIR LEGAL DESTINATION THROUGH THE DEPARTMENT OF PUBLIC WELFARE.

CONTINUED FROM LINE 4:

1- STEEL FILE DRAWER - LETTERED	"ACHESON-CARTER (LILLIAN)"	} THE HEADING ON EACH FOLDER GIVES "NAME OF CLIENT-COLOR-AGE AND CASE NUMBER".
1- " " " "	"CARTER (VAN)-GLOVER"	
1- " " " "	"GODAR - LEE (VERNON)"	
1- " " " "	"LEGAULT - QUARLES"	
1- " " " "	"T-Z"	
1- CARDBOARD FILE BOX	"R-S"	

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

DEPARTMENT OF PUBLIC WELFARE.

327 St Paul Place,

INDEX OF REPORTS.

80

Date Of Report.	Report Number.	TITLE OF RECORD. <i>FINANCIAL DIVISION</i>	Dates Of Record.
3/14/39	66	"(RETURN SLIPS-MEMORANDUMS)	Apr. 1938.
3/15/39	67	(PERSONAL RECORDS).....	1933--.
3/15/39	68	(GENERAL CORRESPONDENCE).....	1937--.
3/16/39	69	"HOLD TICKETS"(Pending cases against Payrolls).....	Mar. 1st, 1939--
3/16/39	70	(STATEMENTS AND ANNUAL REPORTS).....	1937.
3/21/39	71	(PERSONAL INDEX FILES).....	1935--.
3/21/39	72	"HOUSE OF GOOD SHEPHERD, White-Colored".....	1935--.
3/21/39	73	"MARYLAND TRAINING SCHOOL FOR COLORED GIRLS".....	1935--.
3/21/39	74	"STMARY'S INDUSTRIAL SCHOOL".....	1935--.
3/21/39	75	"ST VINCENT'S MALE," " ST VINCENTS INFANT", (St Mary's Female) (Asylums).....	1935--.
3/22/39	76	"MONTROSE-FLORENCE CRITTENTON"(Females).....	1935--.
3/22/39	77	"CHELTENHAM SCHOOL FOR BOYS"(Colored) (House of Reformation-Prior to 1937).....	1937--.
3/22/39	78A	"CHILDREN-MARYLAND SCHOOL FOR BLIND",,,,,,	1935--.
3/24/39	78B	" " " " " "	1935--
3/23/39	79	"STELIZABETH'S HOME-ST GABRIEL'S HOME, ST FRANCIS' ST MARY'S".....	1935--.
3/23/39	80	"HENRY WATSON CHILDREN'S AID SOCIETY".....	1935--.
3/23/39	81	"MARYLAND TRAINING SCHOOL FOR BOYS".....	1935 ..
3/24/39	82	"MARYLAND TRAINING SCHOOL FOR BOYS"..... (Reformatory Reports)	1938--
3/24/39	83	"BALTIMORE EASTERN DISPENSARY" (Memorandum record of cases handled by The Baltimore Eastern Dispensary)....	1939--

DEPARTMENT OF PUBLIC WELFARE.

327 St Paul Place,

INDEX OF REPORTS.

80

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3/15/39	68	(GENERAL CORRESPONDENCE).....	1937--.
3/16/39	69	"HOLD TICKETS"(Pending cases against Payrolls).....	Mar. 1st, 1939--
3/16/39	70	(STATEMENTS AND ANNUAL REPORTS).....	1937.
3/21/39	71	(PERSONAL INDEX FILES).....	1935--.
3/21/39	72	"HOUSE OF GOOD SHEPHERD, White-Colored".....	1935--.
3/21/39	73	"MARYLAND TRAINING SCHOOL FOR COLORED GIRLS".....	1935--.
3/21/39	74	"STMARY'S INDUSTRIAL SCHOOL".....	1935--.
3/21/39	75	"ST VINCENT'S MALE," " ST VINCENTS INFANT", (St Mary's Female) (Asylums).....	1935--.
3/22/39	76	"MONTROSE-FLORENCE CRITTENTON"(Females).....	1935--.
3/22/39	77	"CHELTENHAM SCHOOL FOR BOYS"(Colored) (House of Reformation-Prior to 1937).....	1937--.
3/22/39	78A	"CHILDREN-MARYLAND SCHOOL FOR BLIND",,,,,,	1935--.
3/24/39	78B	" " " " " "	1935--
3/23/39	79	"STELIZABETH'S HOME-ST GABRIEL'S HOME, ST FRANCIS' ST MARY'S".....	1935--.
3/23/39	80	"HENRY WATSON CHILDREN'S AID SOCIETY".....	1935--.
3/23/39	81	"MARYLAND TRAINING SCHOOL FOR BOYS".....	1935--.
3/24/39	82	"MARYLAND TRAINING SCHOOL FOR BOYS"..... (Reformatory Reports)	1938--
3/24/39	83	"BALTIMORE EASTERN DISPENSARY" (Memorandum record of cases handled by The Baltimore Eastern Dispensary)....	1939--

DEPARTMENT OF PUBLIC WELFARE.

327 StPaul Place,

INDEX OF REPORTS.

Date Of Report.	Report Number.	TITLE OF RECORD.	Dates Of Record.
3/24/39	84	"BALTIMORE GENERAL DISPENSARY," (Memorandum record of cases handled by the Baltimore General Dispensary).....	1939--.
4/28/39	85A	"CASH DEPOSIT SLIPS-To and from slips,Re: Deposit-Vouchers".....	1937--.
4/28/39	85B	"CASH DEPOSIT SLIPS-To and from slips,RE: Deposits-Vouchers".....	1939--.
4/28/39	85C	"CASH DEPOSIT SLIPS".....	Apr.1936- Dec.1938.
3/27/39	86	"ST MARY'S INDUSTRIAL SCHOOL"(Boys commitment Reports).....	1938--.
3/27/39	87	"MARYLAND TRAINING SCHOOL FOR COLORED GIRLS", (Committment Reports).....	1938--.
3/28/39	88	"CHELTENHAM SCHOOL FOR BOYS," (Committment Reports).....	1938--.
3/28/39	89	"MONTROSE-FLORENCE CRITTENTON,"(Reports) (Montrose school for girls-Florence Crittenton Mission).....	1938--.
3/28/39	90	"HOUSE OF GOOD SHEPHERD" (Reports).....	1938--.
3/29/39	91	(PERSONNEL ADDRESS RECORD).....	1935--.
3/30/39	92A	(PERSONNEL RECORD-ACTIVE).....	1936--.
3/24/39	92B	(PERSONNEL RECORD-INACTIVE) (Entry Transfer and cut off Tickets).....	1935--.
4/3/39	93A	"PURCHASE ORDERS-STOCK ORDERS-REQUISITION-1938", (Requisitions).....	1938--.
4/4/39	93B	"PURCHASE ORDERS- STOCK ORDERS- REQUISITIONS-1938", (Purchase Orders).....	1938--.
4/4/39	93C	"PURCHASE ORDERS-STOCK ORDERS- REQUISITIONS-1938", (Stock Requisitions).....	1938--.

DEPARTMENT OF PUBLIC WELFARE.
327 St Paul Place.

I N D E X O F R E P O R T S .

Date Of Report.	Report Number.	TITLE OF RECORD.	Dates Of Record.
4/3/39	94	(STATIONERY, OFFICE SUPPLIES-CARD RECORD).....	1935--.
4/4/39	95	"CORRESPONDENCE".....	1936--.
4/4/39	96	(RECORD OF RECOVERIES-INDIVIDUAL ACCOUNTS).....	1938--.
	97	(SEMI-MONTHLY EMERGENCY CASH PAYROLLS), "Petty Cash Records",.....	Dec.1938--.
	98	(REQUISITIONS).....	1939--.
	99	(CORRESPONDENCE).....	1939--.
4/11/39	100	(PATIENT'S REPORT'S FROM HOSPITALS), "Hospital accident short slips",.....	1937--.
	101A	(HOSPITAL ADMISSION PERMIT'S) (Closed Cases)....	1937--.
5/1/39	101B	"HOSPITAL ADMISSION PERMIT'S" (Closed cases)....	1937/1938.
4/19/39	101C	(HOSPITAL ADMISSION PERMITS) (Active Cases) "Current permits-A-Z",.....	1939--.
4/11/39	102A	"DAILY ATTENDANCE REPORTS", (Department of Public Welfare Employees).....	1938--.
4/26/39	102B	"DAILY ATTENDANCE REPORTS" (Department of Public welfare employees).....	Mar.1937- Aug.1938.
4/13/39	103	(INTERDIVISION CORRESPONDENCE).....	July, 1st 1938--
4/13/39	104A	(REPORTS FROM MEDICAL AGENCIES).....	1938--.
4/13/39	104B	"BILLS 1938-DESTITUTE AND NEGLECTED CHILDREN-HOSPITAL-PSYCHOPATHIC-MISCELLANEOUS", (Monthly Bills from Hospitals).....	1938--.
4/14/39	104C	(DEPARTMENT OF PUBLIC WELFARE SERVICE ORDERS)..	1938--.
4/11/39	105	"DELIVERY TICKETS", (Shipping orders from commodity distribution warehouses).....	1937--.
	106	"LEDGER CARDS"(Clients Ledger Cards).....	1935--.

D E P A R T M E N T O F P U B L I C W E L F A R E.
327 St Paul, Place.

I N D E X O F R E P O R T S.

Date Of Report.	Report Number.	TITLE OF RECORD.	Dates Of Record.
	107	"TELEPHONE SLIPS".....	July 1938--.
4/14/39	108	(OLD AGE ASSISTANCE GRANT-AUTHORIZATION TICKETS).....	1936--.
4/14/39	109A	(OLD AGE PENSION PAYROLL RECORD) (ACTIVE)...	1935--.
4/14/39	109B	"OLD AGE PENSION PAYROLL RECORD-CUT OFF"....	1935--
4/13/39	110	(OLD AGE PENSION ENTRY TICKETS-CHANGE TICKETS-CUT-OFF TICKETS).....	1937--.
	111	(G.P.A EMERGENCY ALLOWANCE TICKETS, GRANT AUTHORIZATION TICKETS, ENTRY TICKETS, CHANGE TICKETS, CUT-OFF TICKETS).....	Jan.1936- Dec.1937.
4/18/39	112	(GENERAL PUBLIC ASSISTANCE GRANT AUTHORIZATION TICKETS)" G.P.A. Form # 10",.....	Feb.1938--.
	113A	(G.P.A. Payroll Card Record).....	1935--.
4/17/39	113B	(G.P.A. GRANT AUTHORIZATION CARD RECORD) (ACTIVE CASES).....	1938--.
4/17/39	113C	(G.P.A. GRANT AUTHORIZATION CARD RECORD) (Closed Cases).....	1938--.
4/17/39	114A	(PAYROLL RECORD OF FUEL GRANTS) " Closed A.D.C. Fuel",.....	1938--.
4/17/39	114B	(PAYROLL RECORD OF FUEL GRANTS-ACTIVE) " Fuel A.D.C. 1938-1939".....	1938--.
4/27/39	114C	(Aid to DEP DEPENDENT CHILDREN GRANT AUTHORIZATION TICKETS).....	Jan.1937- Dec. 1937.
4/13/39	114D	(AID TO DEPENDENT CHILDREN GRANT AUTHORIZATION)	1938--.
4/14/39	115	(AID TO DEPENDENT CHILDREN PAYROLL RECORD)....	1936--.
4/12/39	116	(AID TO DEPENDENT CHILDREN ENTRY TICKETS-CHANGE TICKETS-CUT-OFF TICKETS).....	1936--.
4/26/39	117A	(ASSISTANCE TO BLIND GRANT AUTHORIZATION TICKETS-OLD AGE GRANT AUTHORIZATION TICKETS).....	1936-1937.

DEPARTMENT OF PUBLIC WELFARE.
327 St Paul, Place.

INDEX OF REPORTS.

Date Of Report.	Report Number.	T I T L E O F R E C O R D.	Dates Of Record.
4/27/39	117B	(ASSISTANCE TO BLIND GRANT AUTHORIZATION TICKETS).....	1938--.
4/14/39	118	(ASSISTANCE TO BLIND PAYROLL RECORD-CUT OFF'S)	1935--.
5/1/39	119A	(DISPENSARY VISIT SLIPS).....	1936.
4/27/39	119B	"DISPENSARY VISIT SLIPS" " Out-Visits".....	1937-1938.
5/3/39	120A	"PURCHASE ORDERS AND EMERGENCY CASH PAYROLLS" (Purchase Orders).....	1938.
5/4/39	120B	"PURCHASE ORDERS AND EMERGENCY CASH PAYROLLS" (Emergency cash payrolls).....	1938.
4/27/39	121	"CARD REPORTS OF JUVENILE COURT, MINORS"....	1937(inc)
5/2/39	122	"O.A.P SEMI-MONTHLY ALLOWANCE PAYROLLS"....	Oct.1st 1937- Dec 31st 1938.
4/27/39	123	"TIME CARDS OF EMPLOYEES ENGAGED ON DETACHED DUTY" (D.P.W.).....	July 1st 1938 Dec.31st 1938.
5/2/39	124	"A.T.B. SEMI-MONTHLY ALLOWANCE PAYROLLS".....	Jan.-Dec.1937.
5/2/39	125	" DAILY RECORD OF DIRECT RELIEF ALLOWANCES"..	Jan.May 1937.
5/2/39	126	(VOUCHER REGISTER).....	1936-1937.
5/1/39	127	(INTERDIVISION CORRESPONDENCE) (Closed Record)	Jan 1936- July 1st 1938.
5/13/39	128	(EQUIPMENT RECORD).....	1936--.
5/1/39	129	(CASH DISBURSEMENTS JOURNAL).....	1936-1937.
5/1/39	130	" HOSPITAL ACCOUNT LEDGER".....	1924-1935(inc)
4/26/39	131	(Paid BILLS OF CHARGE ACCOUNTS OF CITY PATIENTS IN HOSPITALS).....	1927-1935.
4/28/39	132	"DISPENSARY LEDGER".....	1926-1936.
4/28/39	133	"CHECK CANCELLATION NOTICES".....	Nov.1934- May 1936.

DEPARTMENT OF PUBLIC WELFARE.
327, St Paul, Place.

INDEX OF REPORTS.

Date Of Report.	Report Number.	TITLE OF RECORD.	Date Of Record.
4/28/39	134	(MISCELLANEOUS RECORDS).....	1931-1937-(inc)
4/28/39	135	"HOLD CHECK LISTS"-O.A.R-G.P.A.-A.D.C....	Jan.1938- June 1938.
4/25/39	136	"G.P.A. GRANT AUTHORIZATION TICKETS", (Original tickets prepared by case workers).....	June1st 1937- Dec.24th 1937.
4/26/39	137	"HOSPITAL REPORTS".....	1936-1938(inc)
5/12/39	138A	"PAID BILLS-FROM HOSPITALS-DESTITUTE AND NEGLECTED CHILDREN-REFORMATORIES-PSCHO- PATHIC HOSPITAL-MD. LEAGUE FOR CRIPPLED CHILDREN-MD. SCHOOL FOR BLIND-CITY MEDI- CAL AGENCY REPORTS". (PAID BILLS-HOSPITALS).....	1936-1937.
5/12/39	138B	"PAID BILLS-FROM HOSPITALS-DESTITUTE AND NEGLECTED CHILDREN-REFORMATORIES- PSCHOPATHIC HOSPITAL-MD. LEAGUE FOR CRIPPLED CHILDREN-MD. SCHOOL FOR BLIND- CITY MEDICAL AGENCY REPORTS". (PAID BILLS-DESTITUTE AND NEGLECTED CHILDREN).....	1936-1937.
5/15/39	138C	"PAID BILLS FROM HOSPITALS-DESTITUTE & NEGLECTED CHILDREN-REFORMATORIES- PSCHOPATHIC HOSPITAL-MD.LEAGUE FOR CRIPPLED CHILDREN-MD. SCHOOL FOR BLIND- CITY MEDICAL AGENCY REPORTS". (PAID BILLS-REFORMATORIES).....	1936-1937.
5/15/39	138D	"PAID BILLS-FROM HOSPITALS-DESTITUTE AND NEGLECTED CHILDREN-REFORMATORIES-PSCHO- PATHIC HOSPITALS-MD. LEAGUE FOR CRIPPLED CHILDREN-MD. SCHOOL FOR BLIND-CITY MEDI- CAL AGENCY REPORTS". (PAID BILLS-PSCHOPATHIC HOSPITALS).....	1936-1937.
	138E	"PAID BILLS-FROM HOSPITALS-DESTITUTE & NEGLECTED CHILDREN-REFORMATORIES- PSCHOPATHIC HOSPITAL-MD. LEAGUE FOR CRIPPLED CHILDREN-MD SCHOOL FOR BLIND- CITY MEDICAL AGENCY REPORTS". (PAID BILLS-MD. LEAGUE FOR CRIPPLED CHILDREN.	1936-1937.

DEPARTMENT OF PUBLIC WELFARE.
#327, St Paul, Place.

I N D E X O F R E P O R T S .

Date Of Report.	Report Number.	TITLE OF RECORD.	Date of Record.
	138 F	" PAID BILLS FROM HOSPITALS-DESTITUTE AND NEGLECTED CHILDREN-REFORMATORIES-PSCHOPATHIC HOSPITAL-MD LEAGUE FOR CRIPPLED CHILDREN-MD. SCHOOL FOR BLIND-CITY MEDICAL AGENCY REPORTS". (PAID BILLS-MARYLAND SCHOOL FOR BLIND).....	1936-1937.
	138G	"PAID BILLS-FROM HOSPITALS-DESTITUTE & NEGLECTED CHILDREN-REFORMATORIES-PSCHOPATHIC HOSPITALS-MD LEAGUE FOR CRIPPLED CHILDREN-MD. SCHOOL FOR BLIND-CITY MEDICAL AGENCY REPORTS).....	1936-1937.
5/4/39	139A	"SERVICE ORDERS-REQUISITIONS-PURCHASE ORDERS-CASH VOUCHERS-SURPLUS COMMODITY REPORTS-REFORMATORY REPORTS -CORRESPONDENCE-OLD AGE PENSION REPORTS-MOTHER'S RELIEF REPORTS". (SERVICE ORDERS).....	1937
5/5/39	139B	"SERVICE ORDERS-REQUISITIONS-PURCHASE ORDERS-CASH VOUCHERS-SURPLUS COMMODITY REPORTS-REFORMATORY REPORTS-CORRESPONDENCE-OLD AGE PENSION REPORTS-MOTHER'S RELIEF REPORTS". (REQUISITIONS).....	1937.
5/4/39	139C	"SERVICE ORDERS-REQUISITIONS-PURCHASE ORDERS-CASH VOUCHERS-SURPLUS COMMODITY REPORTS-REFORMATORY REPORTS-CORRESPONDENCE-OLD AGE PENSION REPORTS-MOTHER'S RELIEF REPORTS". (PURCHASE ORDERS).....	1937.
5/5/39	139D	"SERVICE ORDERS-REQUISITIONS-PURCHASE ORDERS-CASH VOUCHERS-SURPLUS COMMODITY REPORTS-REFORMATORY REPORTS-CORRESPONDENCE-OLD AGE PENSIONS REPORTS-MOTHER'S RELIEF REPORTS". (EMERGENCY CASH VOUCHERS)??.....	1937.
5/8/39	139E	"SERVICE ORDERS-REQUISITIONS-PURCHASE ORDERS-CASH VOUCHERS-SURPLUS COMMODITY REPORTS-CORRESPONDENCE OLD AGE PENSIONS REPORTS-MOTHER RELIEF REPORTS-REFORMATORY REPORTS". (SURPLUS COMMODITY REPORTS).....	1937.

DEPARTMENT OF PUBLIC WELFARE.
327 ST PAUL, PLACE.

I N D E X O F R E P O R T S .

Date of Report.	Report Number.	TITLE OF RECORD.	Date of Reocrd.
5/8/39	139 F	"SERVICE ORDERS-REQUISITIONS-PURCHASE ORDERS-CASH VOUCHER'S-SURPLUS COMMODITY REPORTS-REFORMATORY REPORTS-CORRESPONDENCE-OLD AGE PENSION REPORTS-MOTHERS RELIEF REPORTS"..... (Old reformatory reports).....	1937
5/8/39	139G	"SERVICE ORDERS-REQUISITIONS-PURCHASE ORDERS-CASH VOUCHERS-SURPLUS COMMODITY REPORTS-REFORMATORY REPORTS CORRESPONDENCE-OLD AGE PENSION REPORTS-MOTHER'S RELIEF REPORTS". (CORRESPONDENCE).....	1937.
5/8/39	139H	"SERVICE ORDERS-REQUISITIONS-PURCHASE ORDERS-CASH VOUCHERS-SURPLUS COMMODITY REPORTS-REFORMATORY REPORTS-CORRESPONDENCE-OLD AGE PENSION REPORTS-MOTHER'S RELIEF REPORTS." (OLD AGE PENSION REPORTS).....	1932-1938.
5/8/39	139-I	"SERVICE ORDERS-REQUISITIONS-PURCHASE ORDERS-CASH VOUCHERS-SURPLUS COMMODITY REPORTS-CORRESPONDENCE-OLD AGE PENSION REPORTS-MOTHER'S RELIEF REPORTS". (MOTHER'S RELIEF REPORTS).....	1937.
5/8/39	140	(PAID BILLS-HOSPITALS).....	1927_1935(inc)
5/10/39	141A	" PAID BILLS-REQUISITIONS-SERVICE ORDERS-PURCHASE ORDERS" (REQUISITIONS & PUCHASE ORDERS).....	1936.
5/11/39	141B	"PAID BILLS-REQUISITIONS-SERVICE ORDERS-PURCHASE ORDERS". (SERVICE ORDERS)	Jan 1936- June 1936.
5/16/39	141C	"PAID BILLS-REQUISITIONS-SERVICE ORDERS ¹ . PURCHASE ORDERS." (PAID BILLS-PSCHOPATHIC HOSPITAL).....	1933-1935(Inc)
5/16/39	141D	"PAID BILLS-REQUISITIONS-SERVICE ORDERS-PURCHASE ORDERS". (PAID BILLS-CHILDREN'S INSTITUTIONS)..	1933-1935(inc)
5/17/39	141E	"PAID BILLS-REQUISITIONS-SERVICE ORDERS-PURCHASE ORDERS". (PAID BILLS-BLIND, (Workshop) Blind (School).....	1933-1935(inc)

SCOTT-KOVAKA
(Worker's full name)

3-14-39
(Date)

66
(Form Identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

Country BALTIMORE CITY State MARYLAND
Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 ST. PAUL STREET
(Name of building, room number, street address)
FINANCIAL DIVISION - ROOM 209

1. Title (RETURN SLIPS - MEMORANDUMS)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates APRIL 1938 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 2 - STEEL FILE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling DRAWERS NOT LABELED
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents RETURN SLIPS MEMORANDUMS ARE USED FOR THE PURPOSE OF CORRECTIONS, AGAINST ERRORS OR CHANGES, AFFECTING PAYROLL.
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
SLIPS SHOW IDENTIFICATION NUMBER, DATE OF RETURN SLIP ISSUANCE, SOCIAL WORKER'S NAME, CHECK MARK NOTED AGAINST ITEMS OF ERROR OR CHANGE, I.E. INCORRECT PAYROLL NUMBER, ENTRY, ETC., INCORRECT NAME AND ADDRESS OF CLIENT, INCORRECT AMOUNT PER MONTH, INCORRECT OLD GRANT, INCORRECT FAMILY GROUP, INCORRECT EFFECTIVE DATE, NO REASON GIVEN FOR FIRST TIME EMERGENCY, INCORRECT AMOUNT OF DAYS OF RELIEF ASSISTANCE GRANTED,

6. Contents—continued INCORRECT CLOTHING ORDER NUMBER AND REASON OF ISSUANCE THEREOF; CLARIFICATION OF REMARKS RESPECTING CERTAIN ITEMS; NO FINAL APPROVAL BY SUPERVISOR; ALSO COMMENTS OF THE PARTICULAR SOCIAL WORKER UNDER CAPTION "REMARKS" RESPECTING SUCH ERRORS OR CHANGES.

7. Arrangement NUMERICALLY BY RETURN SLIP NUMBERS.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN ON MIMEOGRAPH FORMS
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWERS 5" x 6 1/2" x 16" } AVERAGE 3500 MEMORANDUM
(Of record or container. Height, width, thickness or depth. Average number of pages or documents) } SLIPS PER DRAWER.

11. Location by dates and quantities APRIL, 1938 TO DATE - 2 STEEL FILE DRAWERS, LOCATED ON EAST WALL OF FINANCIAL SUPERVISOR'S OFFICE. (ROOM 209)
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information RECORDS AND EQUIPMENT ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

NOTE: - THE FINANCIAL DEPARTMENT ONLY SET-UP THIS SYSTEM IN APRIL 1938 - THEREFORE NO PRIOR RECORDS.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

NO. - 4295 DATE

RETURN TO:
SOCIAL WORKERS
NAME

COPY

1	No - Incorrect Numbers
2	No Block Checked (Entry, etc.)
3	Incorrect Name - Address
4	No - Incorrect Amount Per month
5	Incorrect Old Grant
6	Incorrect Family Group
7	Incorrect Effective Date
8	No Reason - One Time Emergency
9	Incorrect R/A Days - Amount
10	Incorrect C/O Number -(Reason)
11	Remarks Not Clear - See Item No.
12	No Final Approval

REMARKS: SOCIAL WORKERS COMMENTS

RETURN THIS TICKET WITH CORRECTED OR NEW SET OF FORM 10 TO FINANCIAL DIVISION

Kovaka-Scott
(Worker's full name)

3-15-39
(Date)

67
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland
Name of agency or office Department of Public Welfare (Financial Division)
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place (Room # 209)
(Name of building, room number, street address)

1. Title (Personnel Records)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1933--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 20 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling See addenda sheet for list of drawers as labeled.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Individual folders showing name of employee and classification of position, containing employment their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by record of each person, kept for general reference each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached purposes, consists of correspondence to and from various social agencies and from other previous employment respecting ability and character reference; history of employment; correspondence and telegrams concerning acceptance of position;

6. Contents—continued entry ticket; cut off ticket; transfer ticket; personnel requisition; record of rating; application for position (classification stated on form); also correspondence respecting sick leave and other periods of absence.

7. Arrangement Alph. by names of employees.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on printed heads, printed forms and on plain paper.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel file drawer 11"X14 1/2"X26" Average 400 folders per drawer
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
(Average 10 documents per folder)

11. Location by dates and quantities 1933 to date, 20 steel file drawers on east wall in Financial Supervisor's office, Room #209.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
The above records are kept since the organization of The Baltimore Emergency Relief Commission in 1933.
(Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

(Personnel Records)

continued from line 4

Drawers labeled as follows

A complete B-Ban

Bar - Boz

Bra - Byrne

C - Con

Con - Dew

Dis - Fer

Fi - Gn

Go - Ha

He - Hy

I complete

J complete } 1 drawer

K - Kit

Ko - Li

Ll - Ma

Me - Ne

Ni - O - P - Q

R complete

S - Sl

Sm - Sw

T - U - V W - Wals

Walter - X - Z.

1 Drawer not labeled (A-Z), eventually will be filed with the above records, represent persons employed since organization of Dept. of Public Welfare.

Kovaka-Scott
(Worker's full name)3-15-39
(Date)68
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland
Name of agency or office Department of Public Welfare-Financial Division
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place. (Room #209)
(Name of building, room number, street address)

1. Title (General Correspondence)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1937--
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 3 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling 1937, 1 drawer not labeled; 1 drawer labeled "1938"; 1 drawer "1939"
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents General correspondence and miscellaneous records to and from the Dept. of Public Welfare concerning official business conducted by the financial division of the Department of Public Welfare and used for general reference purposes; records respecting subjects as titled on each folder consists of Board of Estimates correspondence relative to salary estimates of personnel, estimates and rental of properties used by
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued Charitable institutions, payment receipts for new and repairs of office equipment; payroll closing notices; hold check requests; Central Payroll Bureau correspondence relative to checks returned; correspondence respecting cash disbursements; memorandums of cash (Cont. on addenda sheet)

7. Arrangement Arranged in no particular order, other than subjects listed on folders. (Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on printed heads, printed forms, plain paper also mimeographed bulletins.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel drawers 11" x 14 1/2" x 26" (Average 5000 documents per drawer.)
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1937 to date, 3 steel file drawers on east wall in Financial Supervisors Office, Room #209.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication)

(Date of publication)

continued from line 6

refunds; correspondence to Central Payroll Bureau respecting open items of petty cash refunds; correspondence relative to frauds, refunds and overpayments, also reports of frauds; correspondence to and from Central Payroll Bureau relative to salary changes, set up of payrolls and subjects relative to checks held up, transfer of employees, classification, etc.; correspondence from employees, relief clients and others concerning stop payment of checks due to forged endorsements, checks lost, deceased; payment receipts for payroll binders; Payroll exceptions respecting illness of persons employed in the Dept. of Public Welfare; correspondence and lists of changes of addresses of personnel; correspondence respecting telephone service, in-correct addresses of telephone booths, installation of signs; duplicate checks of payments for funeral expenses of old age pension cases; requests for new telephone directories; correspondence relative to costs and modes of transportation out of state; correspondence regarding checks not due for reason of sick leaves; Motor Vehicle Commission correspondence respecting license tags for automobiles belonging to relief clients; correspondence relative to hospitalization of insane persons; Salvation Army monthly shelter, food and laundry statements; monthly records of workers' grant authorization returned for corrections;

(Continue on sheet 2)

Continued from sheet 2 ———

Daily records of checks delivered to relief clients; monthly maturity lists of persons becoming of age; semi-annual inventories of stock of office supplies; monthly Financial Division bulletins; inter-departmental memorandums relative to new rules and regulations, also to fraud cases, meetings of workers in Dept. of Public Welfare, payments of funeral bills pending issuance of cut off tickets, office equipment; lists of persons having been returned to legal and authorized residences by various aid societies; employees' monthly expense accounts and payment receipts; employees' supper money receipts; minutes of staff meetings respecting relief client ownership of automobiles, return of clothing that does not fit relief clients, disciplinary cut offs from W.P.A.; insurance adjustments, house rentals, discussions concerning emergencies; approving out going letters to various agencies relative to assistance given to relief clients, closing of cases under fraud procedure, reports of status of old age investigations; approvals for various emergencies as needed by clients; Semi-monthly salary check lists, also correspondence relative to sick leaves; inter-departmental correspondence relative to duties and office routine; resignations of the personnel; weekly reports of intake and

(continue on sheet 4)

continued from sheet 3

statistical departments; correspondence to and from W.P.A. projects relative to placements and operations; monthly statements of refunds from relief clients; monthly reconciliation of clients' deposit accounts; monthly statements of payments to hospitals; monthly lists of old age assistance cases residing outside of Baltimore City (in state of Md.); detail cost statements; monthly and quarterly estimates of State Aid and Charities; correspondence to and from Board of State Aid and Charities respecting old age cases, also salaries in personnel; bulletins relative to Board of State Aid and Charities manual changes; correspondence to and from banks relative to stop payment on checks, applying to relief clients' checks; certifications to appointing officers from Baltimore City Service Commission; Reports of separations and new positions, requests for certifications, requests for and grants of authority.

Kovack-Scott

(Worker's full name)

3-16-39

(Date)

69

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare-Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place. (Room #209)
(Name of building, room number, street address)

1. Title "Hold Tickets" (Pending Cases Against Payrolls)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates March 1, 1939--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Drawer labeled "Hold Tickets"
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Containing workers orders to hold checks resulting from assignments on W.P.A. projects, secured their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by employment, pending further investigation, fraud, eligibility not established, death, unknown address, hospital case; kept for office reference relative to payroll adjustments; tickets headed Inter-Division Correspondence, showing name of clerk checking payroll number and name and address
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued of client; name of chief clerk in the financial department; name of social worker from whom received; subject (hold check); social worker's district; date of order; classification of assistance; Central Payroll Bureau number; Department (cont. on line 12)

7. Arrangement Numerically by payroll numbers.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on printed form.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.)

10. Size of steel drawer 6'4" x 8'2" x 18" Approx. 450 documents.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities Mar. 1, 1939, 1 steel file drawer on top of desk on west wall in Financial Supervisor's office, Room # 209.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)
Continued from line 6
of Public Welfare number; name and address of client; comments of social worker relating reason for check to be held.

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

SCOTT-KOVAKA
(Worker's full name)

3-16-39
(Date)

70
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~BALTIMORE CITY~~ State **MARYLAND**
Name of agency or office **DEPARTMENT OF PUBLIC WELFARE**
(Office of custody) (Office which made the record, if different)
Address of office of custody **327 ST. PAUL PLACE**
(Name of building, room number, street address)
FINANCIAL DIVISION - ROOM 209

1. Title **(STATEMENTS AND ANNUAL REPORTS)**
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates **1937**
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity **1- STEEL FILE DRAWER**
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling **NOT LABELED**
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records **NONE**
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents **STATEMENTS AND ANNUAL REPORTS COVERING THE OPERATIONS OF THE DEPARTMENT OF PUBLIC WELFARE FOR THE YEAR 1937, KEPT FOR REFERENCE PURPOSES. - RECORD CONTAINS YEARLY SUMMARY OF COST OF PUBLIC ASSISTANCE EXTENDED IN BALTIMORE AND STATEMENTS OF ADMINISTRATIVE COSTS, ALSO STATEMENTS CONCERNING THE NUMBER OF PATIENTS REFERRED TO THE CITY HOSPITAL, OPERATIONS OF THE PERSONNEL AND FINANCIAL CONDITION AS EXISTED DURING THE YEAR, CHARTS SHOWING THE NUMBER OF PERSONS PLACED IN THE VARIOUS TRAINING SCHOOLS,**
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued INDUSTRIAL SCHOOLS, REFORMATORIES AND MISSIONS
AND NUMBER RECEIVED THROUGH COMMITMENTS, REMANDS, PAROLE VIOLATIONS,
ADJUSTMENTS, ETC., NUMBER OF DISCHARGES, PAROLES, ESCAPES, ETC. AND TOTAL
NUMBER OF CHILDREN IN CARE OF SAID INSTITUTIONS AT END OF THE YEAR,
PERSONNEL AND SALARY REPORTS, STATEMENT OF DISBURSEMENTS TO } CONT. ON LINE 12.
7. Arrangement ARRANGED IN NO PARTICULAR ORDER. (IN FOLDER)
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing HANDWRITTEN AND TYPED ON PLAIN PAPER.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF STEEL FILE DRAWER 11" x 14 1/2" x 26 APPROXIMATELY 50 PAPERS
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities 1937 - 1 STEEL FILE DRAWER LOCATED ON THE
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
EAST WALL OF FINANCIAL SUPERVISOR'S OFFICE.
12. Other information RECORD AND CONTAINER IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
CONTINUED FROM LINE 6; - VARIOUS INSTITUTIONS, YEARLY STATEMENT OF THE
Whether record is known to have been kept earlier than dates shown in item 2)
NUMBER OF PATIENTS HANDLED BY THE VARIOUS HOSPITALS AND DISPENSARIES
AND SHOWING THE NUMBER OF CASES AS TO CLASSIFICATION OF ILLNESS, ALSO
AMOUNTS EXPENDED FOR PRIVATE HOSPITALS, YEARLY REPORT OF DISPENSARY CASES
HANDLED BY CITY MEDICAL AGENCIES AND SHOWING DISTRICTS AND THE NUMBER
OF PATIENTS HAVING RECEIVED TREATMENTS WITH A DIVISION AS TO THE NUMBER
OF WHITE AND COLORED CASES, ALSO GRAND TOTALS OF CASES FOR THE YEAR.
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)
(Place of publication) (Date of publication)

SCOTT-KOVAKA

(Worker's full name)

3-21-39

(Date)

71

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~SCOTT~~ BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 ST. PAUL PLACE
(Name of building, room number, street address)
FINANCIAL DIVISION - ROOM 209

1. Title (PERSONNEL INDEX FILE)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1935--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1-WOODEN FILE BOX
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling NOT LABELED.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

(READY REFERENCE)

6. Contents CONTAINING AN ACTIVE PERSONNEL RECORD OF EACH INDIVIDUAL
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record.

EMPLOYEE ON THE STAFF OF THE DEPARTMENT OF PUBLIC WELFARE, KEPT
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by

FOR GENERAL OFFICE REFERENCE PURPOSES, RESPECTING THE TRANSFER
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

OF EMPLOYEES, RECLASSIFICATION OF EMPLOYEES, PROMOTIONS, SALARY

CLASSIFICATIONS, ALSO A RECORD OF TEMPORARY EMPLOYEES. - CARDS

SHOW CENTRAL PAYROLL BUREAU NUMBER, CLASSIFICATION OF POSITION HELD,

DEPARTMENT CLASSIFICATION, DATE AND YEAR OF OFFICIAL APPOINTMENT

By THE BOARD OF ESTIMATES, DATE AND YEAR OF ACTUAL PLACEMENT ON

6. Contents—continued THE STAFF, NAME OF EMPLOYEE AND ADDRESS, DATE AND YEAR RELEASED FROM THE STAFF.

7. Arrangement ALPHABETICALLY BY NAME OF EMPLOYEE-UNDER HEADINGS OF POSITION
(Chronologically—by what? Numerically—by what? Alphabetically—by what?) CLASSIFICATIONS.

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPED ON RULED CARDS
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF WOODEN FILE BOX 4 1/2" x 5 1/2" x 8 1/4" AVERAGE 315 CARDS.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1935-TO DATE-1- WOODEN FILE BOX, LOCATED ON DESK ON THE NORTH WALL OF THE FINANCIAL SUPERVISORS OFFICE ROOM No. 209.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information RECORDS AND CONTAINER IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)

NOTE: A DIVISION IS MADE AS TO EMPLOYEES OF THE PRESENT DEPARTMENT OF PUBLIC WELFARE AND FORMER EMPLOYEES OF THE EMERGENCY CHARITY ASSOCIATION. - CERTAIN OF THE CARDS ALSO BEAR COLORED TABS INDICATING THOSE EMPLOYEES ON STAFF WHICH ARE RECEIVING A LOWER RATE OF WAGE THAN FORMERLY PAID THEIR PREDECESSORS.

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

Kovand-Scott
(Worker's full name)

3-21-39
(Date)

72
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place. (Room #211)
(Name of building, room number, street address)

1. Title "House of Good Shepherd White-Colored"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1935--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 steel file drawer.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line 1.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Record of Juvenile Court Minors in the House of
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
Good Shepherd, in front of drawer records of white girls
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
and in back of drawer records of colored girls, kept for the
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
purpose of checking against quarterly statements
rendered by the institution, of girls confined there-in,
for which the Department of Public Welfare assumes a
portion of the expenses for maintenance and support; individual
cards show name and address of minor; birth date;

6. Contents—continued Reason committed; parents or guardian's names and addresses; date committed to institution; date and name of institution transferred from; date paroled with name and address of party with whom placed in custody; date discharged from institution.

7. Arrangement Alph. by names of minors under classifications as noted on line 12.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on plain cards.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel drawer $3\frac{3}{4} \times 5\frac{1}{4} \times 17$ " Approx. 350 cards. (white)
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
Approx. 250 cards. (colored)

11. Location by dates and quantities 1935 to date, 1 steel drawer on north wall in Senior Clerks' office, Financial Division, Room 211.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

Note: Above records filed in drawer as follows, active cases (minors in institution at present; paroled and discharged.)

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

Kovaka-Scott
(Worker's full name)

3-21-39
(Date)

73
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare-Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place (Room # 211)
(Name of building, room number, street address)

1. Title "Maryland Training School For Colored Girls"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1935--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line 1.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Record of colored girls in the Maryland Training School kept for the purpose of checking against quarterly their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by statements rendered by the institution, of colored girls confined there-in, for which the Department of Public Welfare assumes a portion of the expenses for for maintenance and support; individual cards show name and address of minor; birth date; reason committed; parents names and addresses; name of institution and date committed;

6. Contents—continued date escaped and date returned; names of other institutions and dates of transfers; name of mental institution transferred to and date of transfer; date paroled and name and address of person with whom placed in custody; date discharged from institution.

7. Arrangement Alph. by names of minors under classification as noted ^{on line 12.}
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on plain cards.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel drawer 33 3/4 x 5 1/4 x 17" Approx. 250 cards.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1935 to date, 1 steel file drawer on north wall in Senior Clerk's Office, Financial Division, Room 211.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

Note: Above records filed in drawer under classifications as follows; active cases (minors in school at present); paroled; escapes; closed.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Kouka-Scott
(Worker's full name)

3-21-39
(Date)

74
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place (Room #211)
(Name of building, room number, street address)

1. Title "St. Mary's Industrial School"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1935--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line 1.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Record of boys in St. Mary's Industrial School
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,

kept for the purpose of checking against quarterly their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by

statements rendered by the institution, of boys each should be given. Unless contents of these records are described by other Forms 12-18HR, such forms should be filled out and attached)

confined there-in for which the Department of Public

Welfare assumes a portion of the expenses for maintenance and

support; individual cards show name and address of

minor; birth date; reason committed; parents names

and addresses; name of institution and date committed;

6. Contents—continued date escaped and date returned; names of other institutions and dates of transfers; date paroled with name and address of person with whom placed in custody; date discharged from institution.

7. Arrangement Alph. by names of minors under classifications as noted on line 12.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on plain cards
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel drawer 3³/₄ x 5¹/₄ x 17" Approx. 1600 cards.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1935 to date, 1 steel drawer on north wall in Senior Clerk's office, Financial Division, Room 211.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)

Note: Above records filed in drawer under classifications as follows, active cases (minors in school at present); paroled; escapes; closed.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

SCOTT-KOVAKA
(Worker's full name)

3-21-39
(Date)

75
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 ST. PAUL PLACE
(Name of building, room number, street address)
FINANCIAL DIVISION - ROOM 211.

1. Title "ST. VINCENT'S MALE"
"ST. VINCENT'S INFANT" (ASYLUM)
"ST. MARY'S FEMALE"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1935--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1- STEEL FILE DRAWER
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling AS SHOWN ON LINE 1.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINING A RECORD OF CHILDREN IN THE ABOVE INSTITUTIONS, KEPT FOR
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
THE PURPOSE OF A CHECK AGAINST THE QUARTERLY STATEMENTS RENDERED BY THE
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
SAID INSTITUTIONS AND RESPECTING THOSE CHILDREN FOR WHICH THE DEPARTMENT
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
OF PUBLIC WELFARE HAVE AGREED TO ASSUME RESPONSIBILITY AND TO CONTRIBUTE A PORTION
OF THE EXPENSES GROWING OUT OF THEIR MAINTENANCE AND SUPPORT. - CARDS SHOW
NAME OF THE CHILD (ALSO ASSUMED NAME) COLOR, BIRTH DATE, PARENTS NAME AND ADDRESS,
AND DATES OF BIRTH, ALSO IF DECEASED, TYPE OF APPLICATION (AS TO CATEGORY "ADC"
AID TO DEPENDENT CHILDREN - "D.P.W." - DEPARTMENT OF PUBLIC WELFARE, ETC), DATE OF

6. Contents—continued APPLICATION, NAME OF APPLICANT, DATE COMMITTED TO THE INSTITUTION, INCLUDING TRANSFERS FROM OTHER INSTITUTIONS, ALSO CASES WHICH HAVE BEEN CLOSED INDICATE WHETHER DISCHARGED TO CARE OF PARENTS, FOSTER PARENTS, RELATIVES, FOR ADOPTION OR PLACED IN A WAGE HOME (PRIVATE HOME) AND WHEN DEATH OCCURS.

7. Arrangement ALPHABETICALLY BY NAMES OF CHILDREN.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPED ON PLAIN CARDS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWER 33/4" x 5 1/4" x 17" AVERAGE 400 CARDS
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1935 TO DATE 1 - STEEL FILE DRAWER, LOCATED ON THE NORTH WALL OF THE FINANCIAL DIVISION - SENIOR CLERK'S OFFICE - ROOM 211
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information RECORD AND CONTAINER IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

NOTE: THE FOLLOWING IS THE FULL TITLE OF THE INSTITUTIONS REFERRED TO :-

- ST. VINCENT'S MALE ORPHAN ASYLUM (AVERAGE 150 CASES)
- ST. VINCENT'S INFANT ASYLUM (MALE & FEMALE) (AVERAGE 50 CASES)
- ST. MARY'S INFANT ORPHAN ASYLUM (AVERAGE 200 CASES)

NOTE :- THESE ARE DESTITUTE CHILDREN - FOUNDLINGS - AND SUCH CHILDREN NOT CONSIDERED RECEIVING PROPER CARE IN OWN PARENTS HOME.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Kovaka-Scott
(Worker's full name)

3-22-39
(Date)

76
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland
Name of agency or office Department of Public Welfare—Financial Division
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place. (Room # 211)
(Name of building, room number, street address)

1. Title "Montrose - Florence Crittenton" (Females)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1925 --
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 1 Steel file drawer.
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling As shown on line 1.
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Records of minors placed in Montrose School for Girls in front of drawer, Florence Crittenton Mission in back of drawer; kept for the purpose of checking against quarterly statements rendered by the institutions, of minors confined there-in, for which the Department of Public Welfare assumes a portion of the expenses for maintenance and support; individual cards show name and address of minor; birth date; reason committed;
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued parents or guardian's names and addresses;
date committed; date and name of institution
transferred from; date paroled with name and
address of party with whom placed in custody; date
discharged from the institution.

7. Arrangement Alph. by names of minors under classifications as noted on line 12
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on plain cards.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel drawer 37 1/2" x 5'4" x 17" Approx. 350 cards (Montrose
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
Approx. 150 cards (Florence Crittenton)

11. Location by dates and quantities 1935 to date, 1 steel drawer on north wall
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
in Senior Clerk's office, Financial Division Room 211

12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

Note: Above records filed in drawer separately for each
institution as follows, active cases (minors in
institution at present); paroled and discharged.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Kovaka-Scott

(Worker's full name)

3-22-39

(Date)

77

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare—Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place (Room #211)
(Name of building, room number, street address)

1. Title "Cheltenham School For Boys" (Colored)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
(House of Reformation—Prior to 1937)
2. Dates 1937--
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling As shown on line 1.
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records Prior to 1937 City Institution known as the
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)
House of Reformation and no records kept, except boys on parole; became State institution in 1937 and renamed to Cheltenham School For Colored Boys.
6. Contents Records of minors (colored boys), placed in
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
Cheltenham School kept for the purpose of checking against quarterly statements rendered by the institution, of minors confined there-in, for which the Department of Public Welfare assumes a portion of the expenses for maintenance and support; individual cards show name and address of minor; birth date; reason committed; parents' and guardians' names and addresses; date committed;

6. Contents—continued date and name of institution transferred from; date escaped and date returned; date paroled with name and address of party with whom placed in custody; date discharged from institution.

Records of boys on parole include boys that were (Cont. on line 12)

7. Arrangement Alph. by names of minors under classifications as noted on line 12
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by

title and identification number).

9. Writing Typed on plain cards
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel drawer 3 $\frac{3}{4}$ " x 5 $\frac{1}{4}$ " x 17" Approx. 1000 cards.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1937 to date, 1 steel drawer on north wall
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
in Senior Clerk's office, Financial Division, Room 211

12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

continued from line 6

paroled from the House of Reformation prior to 1937, no other records kept prior to 1937.

Note: Above records filed in drawer as follows, active cases (minors in institution at present); Paroled; Discharges.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication)

(Date of publication)

Kovaka-Scott
(Worker's full name)

3-23-39
(Date)

78 A
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place. (Room #211)
(Name of building, room number, street address)

1. Title "Children - Maryland School For Blind"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1935--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line 1.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Records of infants placed in Jewish Children Society, Bureau of Catholic Charities, Children's Home of Baltimore, Florence Crittenton Mission, Nursery and Childs Hospital, St. Barbara Home, pending such time as they become of certain age, then are placed in various institutions that support older children; above records are filed in front of drawer; kept for the purpose of checking against quarterly statements
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued rendered by the above institutions for maintenance and support of children confined there-in, for which the Department of Public Welfare assumes a portion of the expenses; individual cards show name of child; color; birth date; (cont. on line 12)

7. Arrangement Alph. by names of children separately under each institution.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on plain cards
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of drawer 37 1/4 x 5 1/4 x 17" Approx. 50 cards F. Crittenton Mission
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
Approx. 260 cards Jewish Child Soc. " 50 " Nursery + Childs Hosp.
" 2 " Bur. of Cath. Charities.
" 10 " Childrens Home " 3 " St. Barbara Home

11. Location by dates and quantities 1935 to date, 1 steel drawer on north wall in Senior Clerk's office - Financial Division, Room 211
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and containers in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 6 parents names with birth dates; date of application; name of applicant; date placed on list for contribution by the Department of Public Welfare; discharged cases show child returned to parents, self supporting, of sufficient age, adopted, placed in free boarding house.

~~43. (Records in Florida) Early imprints~~ Note: Record of Pupils in Maryland School for Blind filed in back of drawer; see serial #
(Author) (Publisher)
(Place of publication) (Date of publication)

Kovaka - Scott
(Worker's full name)

3-24-39
(Date)

78 B
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place. (Room #211)
(Name of building, room number, street address)

1. Title "Children - Maryland School For Blind"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1935--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line 1.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible).

6. Contents Record of pupils in the Maryland School For Blind, kept for the purpose of checking against their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by quarterly statements rendered by the institution each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached for maintenance, support and education for which the Department of Public Welfare assumes a portion of the expenses; individual cards show name and address of pupil; condition of blindness; parents and guardians names and addresses; birth date of pupil; date entered

6. Contents—continued school; discharged cases also show date dropped from roll; date received certificate, completed course of instruction.

7. Arrangement Alph. by names of pupils separately in active and discharged cases.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on plain cards.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

10. Size of drawer 3 3/4" x 5 1/4" x 17" Approx. 125 cards.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1935 to date, 1 drawer on north wall in senior clerks office - Financial Division, Room 211
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

Note: In front of drawer records of infants placed in institutions (see report # A); above records are contained in back of same drawer.

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

Kovaka-Scott
(Worker's full name)

3-23-39
(Date)

79
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place (Room #211)
(Name of building, room number, street address)

1. Title "St. Elizabeth's Home - St. Gabriel's Home -
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
St. Francis Home - St. Mary's."
or both)

2. Dates 1935--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line 1.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another
record. Explain why records are missing, if possible)

6. Contents Records of destitute children - foundlings and
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
children that have not received proper care while in
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
custody of parents, placed in St. Elizabeth's Home for colored
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
boys and girls, St. Gabriel's Home for white boys and girls,
St. Francis Home for colored girls and St. Mary's for
colored boys; kept for the purpose of checking
against quarterly statements rendered by the above
institutions for maintenance and support of children in

6. Contents—continued said institutions for which the Dept. of Public Welfare assumes a portion of the expenses; individual cards show name of the child (also assumed name); color; birth date; parents names and addresses with birth dates; by whom application made, including (cont. on line 12)

7. Arrangement Alph. by names of children - under each institution.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on plain cards.
(Handwritten, Handwritten printed form, Handwritten printed head, Typed, Typed printed form, Typed printed head.

10. Size of steel drawer 3³/₄" x 5¹/₄" x 17" Approx. 150 cards St. Elizabeth's
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
" 25 " St. Gabriel's
" 12 " St. Francis
" 80 " St. Mary's.
Total 267 cards in drawer.

11. Location by dates and quantities 1935 to date, 1 steel drawer on north wall in Senior Clerk's office, Financial Division - Room 211
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 6 ~~under~~ category of case by the Department of Public Welfare; date of application; date committed to the institution also date and name of other institutions transferred from; date discharged from the institution and name of party with whom placed in custody for adoption, wage home,

13. ~~(By St. Elizabeth's ~~St. Elizabeth's~~ parent or other relatives.~~
(Author) (Publisher)

(Place of publication)

(Date of publication)

Kouka-Scott
(Worker's full name)

3-23-39
(Date)

80
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place. (Room # 211)
(Name of building, room number, street address)

1. Title "Henry Watson Children's Aid Society"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1935--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line 1.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Record of destitute children (city wards); foundlings and children that have not received proper care while in their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by custody of parents, kept for the purpose of checking each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached) against quarterly statements rendered by the institution for maintenance and support of children in said institution for which the Department of Public Welfare assumes a portion of the expenses; individual cards show name of the child (also assumed name); color; birth date;

6. Contents—continued parents names and addresses with birth dates; by whom application made, including category of case by the Department of Public Welfare; date of application; date admitted also date and name of other institutions transferred from; date discharged from the institution (cont. on line 12)

7. Arrangement Alph. by names of children separately under (Active cases and Discharged Cases.)
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on plain cards.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel file drawer 37 1/2 x 5 1/4 x 17" Approx. 1000 cards.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1935 to date, 1 steel drawer on north wall in Senior Clerk's office, Financial Division—Room 211
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 6 and name of party with whom placed in custody for adoption, wage home, parent or other relatives.

Note: These children are kept in the institution up to time children become of age, or up to such time as placed in wage home or adopted.

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

Kovaka - Scott
(Worker's full name)

3-23-39
(Date)

81
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore County State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place. (Room #211)
(Name of building, room number, street address)

1. Title "Maryland Training School For Boys"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities)

or both)

2. Dates 1935 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line 1.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Record of boys in the Maryland Training School,
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
kept for the purpose of checking against quarterly
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
statements rendered by institution respecting
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
maintenance and support of the boys during confine-
ment, for which the Department of Public Welfare
assumes a portion of the expenses; individual cards
show name and address of minor; date of birth; names
and addresses of parents; date committed; date escaped

6. Contents—continued and date returned; reason committed; date paroled and name and address of party with whom placed in custody; date discharged from the institution.

7. Arrangement Alph. by names of minors under classifications as noted on ^{line 12.}
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on plain cards.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel drawer 3 3/4 x 5 1/4 x 17" Approx. 800 cards.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1935 to date, 1 steel drawer on north wall in Senior Clerk's office, Financial Division - Room 211.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and container in excellent condition
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

Note: Records filed in drawer as follows, active cases (minors in institution at present); paroled; escapes; refusals (cases that are questionable as to city or State also whether or not the Department of Public Welfare should pay a portion of the expenses for maintenance and support); closed cases.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Kovako-Scott
(Worker's full name)

3-24-39
(Date)

82
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare—Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place. (Room #211)
(Name of building, room number, street address)

1. Title "Maryland Training School For Boys"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
(Reformatory Reports)

2. Dates 1938--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line 1.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Reports are prepared by the institution at the time of commitment and forwarded to the Department of Public Welfare to be recorded for the purpose of contributing Welfare Dept. share of expenses entailed in supporting the boys while confined; individual cards show name and address of boy; age and birth date; date received; term of confinement; nature of offense; check mark opposite discharged, paroled, released,
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued hospital or escaped; name and address of party or institution released or returned to; date released or returned; opposite side of card shows name and address of parents; name and address of nearest kin; name of person held as state witness; name of person (cont. on line 12)

7. Arrangement Alph. by names of boys for each quarter of year.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on printed cards
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed: Photostat. Other. Give months and years covered by each kind of writing)

10. Size of drawer 3 3/4 x 5 1/4 x 17" Approx. 450 cards
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
(3 1/2 x 5" cards)

11. Location by dates and quantities 1938 to date, 1 drawer on north wall in Senior Clerks office - Financial Division, Room 211.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and container in excellent condition
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)
Continued from line 6 — held as vagrant; signature of officer and the name of institution

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

SCOTT-KOVAKA
(Worker's full name)

3-24-39
(Date)

83
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~SCOTT~~ BALTIMORE CITY State MARYLAND
Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 ST. PAUL PLACE (Room #211)
(Name of building, room number, street address)
FINANCIAL DIVISION

1. Title "BALTIMORE EASTERN DISPENSARY" (MEMORANDUM RECORD OF CASES HANDLED BY THE BALTIMORE EASTERN DISPENSARY)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1939--
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 1-STEEL FILE DRAWER
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling AS SHOWN ON LINE 1.
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINING MEMORANDUM SLIPS OF CASES HANDLED DIRECTLY IN THE DISPENSARY AS WELL AS CASES WHICH WERE VISITED AT THE HOME AND RECORD KEPT FOR THE PURPOSE OF SUBSTANTIATING THE ANNUAL CONTRIBUTION AS MADE BY THE DEPARTMENT OF PUBLIC WELFARE-THE DEPARTMENT OF PUBLIC WELFARE HAVE AN ARRANGEMENT WITH THE SAID DISPENSARY WHEREBY IT AGREES TO PAY A FIXED YEARLY SUM IRRESPECTIVE OF THE NUMBER OF CASES HANDLED DURING THE YEAR-DISPENSARY SLIPS SHOW NAME AND ADDRESS OF
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record. their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued PATIENT, RACE, SEX, DATE OF TREATMENT, NAME OF THE DISPENSARY, DIAGNOSIS OF CASE. - OUT VISIT SLIPS SHOW NAME AND ADDRESS OF PATIENT, COLOR, NAME OF APPLICANT REQUESTING VISIT I.E. DEPARTMENT OF PUBLIC WELFARE - SUPERVISOR CITY CHARITIES DATES OF VISITS, NUMBER OF PRESCRIPTIONS FILLED. } CONT. ON LINE 12.

7. Arrangement CHRONOLOGICALLY BY DATES OF TREATMENTS AND VISITS.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWER - 33/4" x 5/4" x 17" AVERAGE 118 OUT VISIT SLIPS - 1195 DISPENSARY SLIPS (IN BUNDLES REPRESENTING EACH QUARTER).
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1939 TO DATE - 1- STEEL FILE DRAWER, LOCATED ON THE NORTH WALL OF FINANCIAL DIVISION SENIOR CLERKS OFFICE ROOM 211.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information RECORDS AND EQUIPMENT IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
Whether record is known to have been kept earlier than dates shown in item 2)
CONTINUED FROM LINE 6: - DIAGNOSIS OF CASE.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

SCOTT-KOVAKA
(Worker's full name)

3-24-39
(Date)

84
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND
Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 ST. PAUL PLACE. (Room # 211)
(Name of building, room number, street address)
FINANCIAL DIVISION.

1. Title "BALTIMORE GENERAL DISPENSARY" (MEMORANDUM RECORD
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
OF CASES HANDLED BY THE BALTIMORE GENERAL DISPENSARY)
or both)
2. Dates 1939 --
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 1-STEEL FILE DRAWER
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling AS SHOWN ON LINE 1.
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another
record. Explain why records are missing, if possible)

6. Contents CONTAINING MEMORANDUM SLIPS OF CASES HANDLED DIRECTLY IN
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
THE DISPENSARY AS WELL AS CASES WHICH WERE VISITED AT THE HOME AND RECORD
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
KEPT FOR THE PURPOSE OF SUBSTANTIATING THE ANNUAL CONTRIBUTION AS
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
MADE BY THE DEPARTMENT OF PUBLIC WELFARE. - THE DEPARTMENT OF
PUBLIC WELFARE HAVE AN ARRANGEMENT WITH THE SAID DISPENSARY
WHEREBY IT AGREES TO PAY A FIXED YEARLY SUM IRRESPECTIVE OF THE NUMBER
OF CASES HANDLED DURING THE YEAR. - DISPENSARY SLIPS SHOW NAME AND
ADDRESS OF PATIENT, RACE, SEX, DATE OF TREATMENT, NAME OF THE DISPENSARY

6. Contents—continued DIAGNOSIS OF CASE, - OUT VISIT SLIPS SHOW NAME AND ADDRESS OF PATIENT; COLOR, NAME OF APPLICANT REQUESTING VISIT U.C. DEPARTMENT OF PUBLIC WELFARE - SUPERVISOR CITY CHARITIES. DATE OF VISITS, NUMBER OF PRESCRIPTIONS FILLED, DIAGNOSIS OF CASE.

7. Arrangement CHRONOLOGICALLY BY DATES OF TREATMENTS AND VISITS.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWER - 3 3/4" x 5 1/4" x 17" AVERAGE 30% OUT VISIT SLIPS - 961 DISPENSARY SLIPS (IN BUNDLES REPRESENTING EACH QUARTER)
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1939 TO DATE - 1 STEEL FILE DRAWER, LOCATED ON THE NORTH WALL OF FINANCIAL DIVISION SENIOR CLERKS OFFICE - ROOM 211.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information RECORDS AND EQUIPMENT IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

Kovacka-Niedentohl

(Worker's full name)

5-9-39

(Date)

85-A

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland

Name of agency or office Department of Public Welfare-Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place (Room 211)
(Name of building, room number, street address)

1. Title "Cash Deposit Slips - To / From Slips
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
or both)
Re: Deposits-Vouchers" (Emergency Cash Vouchers)

2. Dates 1938 --
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line one.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Financial Division copies of Emergency Cash Vouchers
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
for emergency needs (Vouchers show amounts up to \$5.00);
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
kept for purpose of adjusting payroll, which amounts are
deducted from original check and is then reimbursed
to the Dept. of Public Welfare by the Central Payroll Bureau;
show voucher number, date cash received, particulars
relating receipt from the Dept. of Public Welfare, sum of

6. Contents—continued money (amount shown), in cash for emergency need, also squares provided for check mark opposite A.D.C. and G.P.A., the category of relief referred for; signature of Investigator by whom requested; signature of Field Supervisor by whom approved; signature of Assistant Director by (cont. on line 12)

7. Arrangement Alph. by names of clients
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Handwritten on printed forms
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of drawer 6'x8'4"x17"v Approx. 1400
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1938 to date, 1 drawer on north wall in Senior Clerk's Office - Room #211
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

continued from line 6 ——— whom approved; name and address of client also signature of client upon receipt of cash. Above records are filed in same drawer containing Cash Deposit Slips and To/From Slips (Inter-Division Correspondence).

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication)

(Date of publication)

Kovaha-Niedentohl
(Worker's full name)

5-2-39
(Date)

85 B
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland

Name of agency or office Department of Public Welfare-Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place
(Name of building, room number, street address)

1. Title "Cash Deposit Slips - To/From Slips"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
Re: Deposits-Vouchers" (To/From Slips)

2. Dates 1938 --
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line 1.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None.
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Inter-Division correspondence (To/From Slips),
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
respecting relief case adjustments, sent from the Estate Division of the Department of Public Welfare, cover funds growing out of the redemption of insurance policies and funds emanating from the surrender of bank deposits or other personal cash, and which are applied against relief case payments; filed in same drawer containing Cash

6. Contents—continued Deposit Slips and Cash Vouchers; kept as an office record of funds recovered; correspondence shows the name Financial Division, sent to; the name Estate Division, from whom received; date of letter; Central Payroll Bureau number, Dept. of Public Welfare number; (cont. on line 12)
7. Arrangement Alph. by names of clients
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form, by title and identification number)
9. Writing Typed — printed head.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of drawer 6" x 8 1/4" x 17 1/2" Approx. 1400
(Of record or container. Height, width, thickness or depth. Average number of ~~pages~~ documents)
11. Location by dates and quantities 1938 to date, 1 drawer (Cash deposit slips in some drawer), on north wall in Senior Clerk's office, Room #211.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
- Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 6 ~~~~~ name and address of client; date of death; date of cut off; particulars respecting check attached also name of insurance company and amount involved; instructions concerning amounts to be applied for funeral expenses and recovery account; cash deposit slip number; cash voucher number; transfer voucher number; service order number; reverse side of letter, stamped, date received in Financial Division - Dept. of Public Welfare.
(Place of publication) (Date of publication)

Kovaka-Niedentohl
(Worker's full name)

4-28-39
(Date)

85-C
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place.
(Name of building, room number, street address)

1. Title "Cash Deposit Slips - To/From Slips
Re: Deposits - Vouchers" (Cash Deposit Slips)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1938--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line 1.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records _____
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Cash deposit slips filed in same drawer
containing Inter-Division Correspondence kept in file
for office record of deposits made; Cash deposits slips
prepared by the Financial Division, deposit made in
Bureau of Receipts of funds emanating from insurance
adjustments, or other recoveries as result through
deaths of relief clients; show the name of bureau (The
Department of Public Welfare); cash slip number; date
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms F2-13HR, such forms should be filled out and attached)

6. Contents—continued of cash slip; name and address of client involved; Central Payroll Bureau number; Dept. of Public Welfare number; category of relief recovery resulted from; description of recovery (insurance adjustments, pension fund, court claim, etc.); name and address of payee; check number; credit (cont on line 12)
7. Arrangement Chron. by dates of deposits
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Typed on printed form
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of drawer 6'x 8'4"x 17 1/2" Approx 1000
(Of record or container. Height, width, thickness or depth. Average number of ~~pages~~ documents)
11. Location by dates and quantities 1938 to date, 1 drawer (Inter-Division correspondence and Cash Vouchers in same drawer), on north wall in Senior Clerk's Office, Room #211.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 6 ~~~~~ account number; service order number; cost account number and amount involved; signature of Senior Clerk in Financial Division by whom issued; also a perforation across the slip stating City Collector - Paid, with date of payment.
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)
(Place of publication) (Date of publication)

Kovaka-Niedentahl
(Worker's full name)

4-28-39
(Date)

85-D
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland
Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place
(Name of building, room number, street address)

1. Title "Cash Deposit Slips"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates April 1936 - December 1938
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 1 Cardboard box
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling Labeled Financial Division - Cash Deposit Slips 1936-1937-1938
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)
6. Contents Cash deposit slips prepared by the Financial Division, deposit made in the Bureau of Receipts of funds emanating from insurance adjustments or other recoveries as result through death of relief client; kept in file for office record of deposits made; deposit slip shows the name of the bureau (Dept. of Public Welfare); cash slip number; date of cash slip, name and address of client involved; Central Payroll
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc.) If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued bureau number, Dept. of Public Welfare number; category of relief recovery resulted from; description of recovery (insurance adjustments; pension fund; court claim; etc.); name and address of payee; check number, credit account number; service order number; cost ^(cont. on line 12)
7. Arrangement Chron. by date of deposit.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Typed on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of box 9'4" x 6'2" x 15'5" Approx. 2000 in box
(Of record or container: Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities Apr. 1936 - Dec. 1938, 1 Cardboard box on east wall in Storage Room #206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 6
account number and amount involved; signature of Senior Clerk in Financial Division by whom issued; also a perforation across the slip stating City Collector - Paid with date of payment.
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)
(Place of publication) (Date of publication)

Kovaka-Scott
(Worker's full name)

3-27-39
(Date)

86
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place - (Room # 211)
(Name of building, room number, street address)

1. Title "St. Mary's Industrial School" (Boys
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
Commitment Reports)
or both)

2. Dates 1938--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Reports are prepared by the institution at the time
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
of commitment and forwarded to the Department of Public
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
Welfare to be recorded for the purpose of contributing Welfare
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
Dept. share of expenses entailed in supporting the
boys while confined; individual cards show name and
address of boy; age and birth date, date received;
nature of offense; check mark opposite discharged, paroled,

6. Contents—continued released, hospital or escaped; name and address of institution or party released to, or returned to; date released or returned; opposite side of card shows name and address of parents; name and address of nearest kin; name of person held as state witness; name of person (cont. on line 12)

7. Arrangement Alph. by names of boys for each quarter of year. (Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None (Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on printed cards. (Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of drawer 3 3/4 x 5 1/4 x 17" Approx. 750 cards. (Of record or container. Height, width, thickness or depth. Average number of pages or documents) (3 x 5" Cards)

11. Location by dates and quantities 1938 to date, 1 drawer on north wall in senior clerk's office, Financial Division, Room 211 (Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and container in excellent condition. (Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2) continued from line 6 held as vagrant; signature of officer and the name of institution.

13. (For use in Florida.) Early imprints (Author) (Publisher) (Place of publication) (Date of publication)

Koudka-Scott
(Worker's full name)

3-27-39
(Date)

87
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland
Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place. (Room # 211)
(Name of building, room number, street address)

1. Title "Maryland Training School For Colored Girls" (Commitment Reports)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1938--
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling As shown on line 1.
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)
6. Contents Reports are prepared by the institution at the time of commitment and forwarded to the Department of Public Welfare to be recorded for the purpose of contributing Welfare Dept. share of expenses entailed in supporting the girls while confined; individual cards show name and address of girl; age and birth date; date received; nature of offense; check mark opposite discharged, paroled, released, hospital or escaped; name and address of institution or party released

6. Contents—continued to, or returned to; date released or returned; opposite side of card shows name and address of parents; name and address of nearest kin; name of person held as state witness; name of person held as vagrant; signature of officer and the name of institution.

7. Arrangement Alph. by names of girls for each quarter of year.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form, by title and identification number)

9. Writing Typed and handwritten on printed cards
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of drawer 3³/₄ x 5¹/₄ x 17" Approx. 75 cards.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1938 to date, 1 drawer on north wall in senior clerk's office, financial division, Room 211
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Kovaka-Scott
(Worker's full name)

3-28-39
(Date)

88
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place. (Room #206)
(Name of building, room number, street address)

1. Title "Cheltenham School For Boys"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
(Commitment Reports)

2. Dates 1938--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line 1.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Reports are prepared by the institution at the time of commitment and forwarded to the Department of Public Welfare to be recorded for the purpose of contributing Welfare Department share of expenses entailed in supporting the boys while confined; individual cards show name and address of boy; age and birth date; date received; nature of offense; check mark opposite discharged, paroled, released, hospital, or escaped; name and address of

6. Contents—continued institution or party released to, or returned to; date released or returned; opposite side of card shows name and address of parents; name and address of nearest kin; name of person held as state witness; name of person held as vagrant; signature of officer and the name of institution.

7. Arrangement Alph. by names of boys for each quarter of year.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on printed cards.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.)

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of drawer 3 $\frac{3}{4}$ "x5 $\frac{1}{4}$ "x17" Approx. 250 Cards.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
(3"x5" Cards)

11. Location by dates and quantities 1938 to date 1 drawer on north wall in Senior Clerks office - Financial Division, Room 211.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication)

(Date of publication)

SCOTT-KOVAKA
(Worker's full name)

3-28-39
(Date)

89
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~_____~~ **BALTIMORE CITY** State **MARYLAND**
Name of agency or office **DEPARTMENT OF PUBLIC WELFARE**
(Office of custody) (Office which made the record, if different)
Address of office of custody **327 ST. PAUL PLACE (Room # 211)**
(Name of building, room number, street address)
FINANCIAL DIVISION.

- Title **"MONTROSE - FLORENCE CRITTENTON" (REPORTS)**
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
(MONTROSE SCHOOL FOR GIRLS - FLORENCE CRITTENTON MISSION)
- Dates **1938 --**,
(Earliest and latest dates; missing dates. Show exact date of breaks)
- Quantity **1-STEEL FILE DRAWER**
(Number of volumes; file drawers; file boxes; bundles; other)
- Labeling **AS SHOWN ON LINE 1.**
(Explain fully; years; numbers; letters; number of records so labeled)
- Discontinued and missing records **NONE**
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents **REPORTS ARE PREPARED BY THE INSTITUTION AT THE TIME OF COMMITMENT AND FORWARDED TO THE DEPARTMENT OF PUBLIC WELFARE TO BE RECORDED FOR**
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
Welfare Dept.
THE PURPOSE OF CONTRIBUTING A SHARE OF EXPENSES ENTAILLED IN SUPPORTING THE GIRLS WHILE CONFINED. INDIVIDUAL CARDS SHOW NAME AND ADDRESS OF GIRL, AGE AND BIRTH DATE, DATE RECEIVED, NATURE OF OFFENSE, CHECK MARK OPPOSITE DISCHARGED, PAROLED, RELEASED, HOSPITAL OR ESCAPED, NAME AND ADDRESS OF INSTITUTION OR PARTY RELEASED TO OR RETURNED TO, DATE RELEASED OR RETURNED, OPPOSITE SIDE OF CARDS SHOW NAME AND ADDRESS

6. Contents—continued OF PARENTS, NAME AND ADDRESS OF NEAREST KIN, NAME OF PERSON HELD AS STATE WITNESS, NAME OF PERSON HELD AS VAGRANT, SIGNATURE OF OFFICER AND THE NAME OF INSTITUTION.

7. Arrangement ALPHABETICALLY BY NAMES OF GIRLS CONFINED FOR EACH QUARTER OF YEAR
(Chronologically—by what? Numerically—by what? Alphabetically—by what?) PER EACH INSTITUTION.

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPED AND HANDWRITTEN ON PRINTED CARDS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF DRAWER 3 3/4" x 5 1/4" x 17" AVG. 175 CARDS - MONTROSE SCHOOL
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
AVG. 100 CARDS - FLORENCE CRITTENTON.

11. Location by dates and quantities 1938 TO DATE, 1-DRAWER ON NORTH WALL IN SENIOR CLERK'S OFFICE - FINANCIAL DIVISION - ROOM 211
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information RECORD AND CONTAINER IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)

NOTE - GIRLS ARE CONFINED FROM AGE 10 - UP TO EXPIRATION OF TERM OF COMMITMENT OR PERMANENTLY UNTIL REACHING AGE.

THIS RECORD IS REVISÉD @ QUARTERLY.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Kouka-Scott
(Worker's full name)

3-28-39
(Date)

90
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place (Room #211)
(Name of building, room number, street address)

1. Title "House of Good Shepherd" (Reports)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1938 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line 1
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Reports are prepared by the institution at the time of commitment and forwarded to the Department of Public Welfare to be recorded for the purpose of contributing Welfare Dept. share of expenses entailed in supporting the girls while confined; individual cards show name and address of girl; age and date of birth; date received; nature of offense; check mark opposite discharged, paroled, released, hospital, or escaped; name and address of
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued institution or party released to, or returned to, date released or returned; opposite side of card shows name and address of parents; name and address of nearest kin; name of person held as state witness; name of person held as vagrant; signature of officer and the name of institution.

7. Arrangement Alph. by names of girls for each quarter of year.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on printed cards.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of drawer 3 3/4 x 5 1/4 x 17" Approx. 400 cards
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
(3" x 5" cards)

11. Location by dates and quantities 1938 to date, 1 drawer on north wall in Senior Clerk's Office - Financial Division - Room 211.
(Room, vault, wall—N, E, S, W., section, bin, shelf, cabinet, on floor)

12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Kovako-Scott
(Worker's full name)

3-29-39
(Date)

91
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place (Room #211)
(Name of building, room number, street address)

1. Title (Personnel Address Record)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1935--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Wooden file box
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Not labeled
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Address record of Department of Public Welfare employees, kept for office reference purposes respecting employees changes of addresses for payroll purposes, record also used by office for telephone communications to employees when needed for over time work, etc.; individual cards show employee's identification number; classification of employment; name of employee; telephone
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued number; old address and date of entry
on payroll, also new address and date of entry on
payroll.

7. Arrangement Alph. by names of employees.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by
title and identification number)

9. Writing Typed and handwritten on plain cards.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of box 4 1/2" x 5 1/2" x 8 1/2" Approx. 275 cards.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1935 to date, 1 Wooden file box
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
on desk near north wall in Senior Clerk's Office,
Room # 211.

12. Other information Records and container in excellent
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
condition.
Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

SCOTT-KOVAKA
(Worker's full name)

3-30-39
(Date)

92-A
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 ST. PAUL PLACE (Room #211)
FINANCIAL DIVISION.
(Name of building, room number, street address)

1. Title (PERSONNEL RECORD - ACTIVE)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1936--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 6 - STEEL FILE TRAYS
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling NOT LABELED
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS ACTIVE PERSONNEL CARD RECORD OF ALL EMPLOYEES
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
ON STAFF KEPT FOR PURPOSES OF PAYROLL AND GENERAL OFFICE REFERENCE
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
AND SHOWING NAME OF EMPLOYEE, DATE APPOINTED ON STAFF, DATE DISCHARGED,
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
DATE RESIGNED, DATE REAPPOINTED ON STAFF, TRANSFERRED AND CHANGED,
CLASSIFICATION, DEPARTMENT, SALARY PER YEAR, SUMMARY OF DAYS ABSENT
(YEAR-SICK-VACATION-ABSENT WITH PAY-ABSENT WITHOUT PAY) DATE BORN, MARRIED,
SINGLE, WHITE, COLORED, PHONE, MALE, FEMALE, HOUSE NUMBER, ADDRESS, EFFICIENCY
RECORD, ALSO STATISTICAL CARDS COVERING AN EIGHT YEAR PERIOD, ARRANGED

6. Contents—continued AS TO DAYS AND MONTHS AND SHOWING THE CAUSE OF ABSENCE,
L.C. SICKNESS - VACATIONS, ETC. IDENTIFICATION NUMBER, NAME AND CLASSIFICATION.

7. Arrangement NUMERICALLY BY PAYROLL NUMBERS AND BY CLASSIFICATIONS.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN AND TYPED ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE TRAYS 1" X 9" X 24" AVERAGE 50 CARDS PER TRAY
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1936 TO DATE - 6 STEEL FILE TRAYS ON DESK NEAR
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
NORTH WALL OF SENIOR CLERK'S OFFICE - ROOM 211 - FINANCIAL DIVISION.

12. Other information RECORDS AND CONTAINERS ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

NOTE: - THIS IS A REMINGTON RAND - KARDEX FILE.

NOTE: - SEE SERIAL NO. B - FOR INACTIVE PERSONAL FILE RECORD.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

SCOTT KOVAKA
(Worker's full name)

3-24-39.
(Date)

92-B
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 ST. PAUL PLACE (Room #211)
(Name of building, room number, street address)
FINANCIAL DIVISION

1. Title (PERSONNEL RECORD - INACTIVE)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
(ENTRY - TRANSFER AND CUT-OFF TICKETS)
or both)

2. Dates 1935 --
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 - STEEL FILE DRAWER
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling NOT LABELED
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another
record. Explain why records are missing, if possible)

6. Contents FRONT OF DRAWER CONTAINS A RECORD OF ENTRY TICKETS, TRANSFER
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
TICKETS AND CUT-OFF TICKETS OF ALL PERSONS EMPLOYED IN THE
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
DEPARTMENT OF PUBLIC WELFARE SINCE BEING PLACED UNDER THE REGULATIONS
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
PRESCRIBED BY THE CITY SERVICE COMMISSION - BACK OF DRAWER CONTAINS AN INACTIVE
PERSONNEL CARD RECORD OF EMPLOYEES HAVING BEEN DISCHARGED, RESIGNED, DEATH, ETC. AND SHOWS
NAME, SUMMARY OF DAYS ABSENT (YEAR, SICK, VACATION, ABSENT WITH AND ABSENT
WITHOUT PAY), DATE APPOINTED ON STAFF, DATE DISCHARGED, DATE
RESIGNED, DATE REAPPOINTED ON STAFF, TRANSFERRED AND CHANGED,

6. Contents—continued CLASSIFICATION, DEPARTMENT, SALARY PER YEAR, DATE
BORN, WHITE, COLORED, MALE, FEMALE, MARRIED, SINGLE, PHONE, HOUSE NUMBER,
ADDRESS, EFFICIENCY RECORD, ALSO A STATISTICAL CARD COVERING AN
ARRANGED AS TO DAYS AND MONTHS
EIGHT YEAR PERIOD, AND SHOWING THE CAUSE OF ABSENCE, I.E. SICKNESS,
VACATION, ETC., IDENTIFICATION NUMBER, NAME AND CLASSIFICATION.

7. Arrangement ALPHABETICALLY BY NAMES OF EMPLOYEES.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by
title and identification number)

9. Writing TYPED AND HANDWRITTEN ON PRINTED FORMS AND CARDS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWER 6" x 8 1/4" x 17 1/2" AVERAGE 1300 TICKETS AND
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
AVERAGE 350 DOUBLE CARDS.

11. Location by dates and quantities 1935 TO DATE - 1 - STEEL FILE DRAWER, LOCATED ON
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
THE NORTH WALL OF FINANCIAL DIVISION SENIOR CLERKS OFFICE
ROOM 211.

12. Other information RECORDS AND CONTAINERS ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)

NOTE: - THESE RECORDS ARE KEPT FOR GENERAL OFFICE REFERENCE PURPOSES.

NOTE: - SEE SERIAL NO. A-FOR ACTIVE PERSONNEL FILE RECORD.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

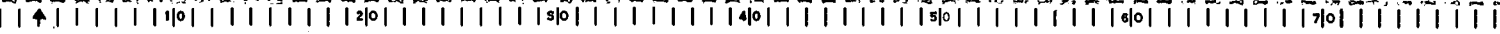
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No. _____ NAME _____ CLASSIFICATION _____



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TYPIST PLEASE NOTE—THIS SCALE CORRESPONDS TO TYPEWRITER (PICA) SCALE—SET PAPER GUIDES SO THAT CARD SCALE WILL REGISTER WITH MACHINE SCALE WHEN CARD IS TURNED INTO WRITING POSITION. START INDEX THREE (3) POINTS FROM LEFT EDGE OF CARD. USE OTHER POINTS OF SCALE FOR OTHER DIVISIONS OF VISIBLE TITLE, SET TABULATORS TO INSURE PERFECT ALIGNMENT OF EACH DIVISION OF INFORMATION. FOLD BACK OR REMOVE STUB AFTER TYPING. USE NEW TYPEWRITER RIBBON.
KARDEX VISIBLE DIVISION BP.9917*^T 886-240-22320AB-37 REMINGTON RAND INC.—13 Printed in U.S.A.

19	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
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TYPYST PLEASE NOTE—THIS SCALE CORRESPONDS TO TYPEWRITER (PICA) SCALE—SET PAPER GUIDES SO THAT CARD SCALE WILL REGISTER WITH MACHINE SCALE WHEN CARD IS TURNED INTO WRITING POSITION. START INDEX THREE (3) POINTS FROM LEFT EDGE OF CARD. USE OTHER POINTS OF SCALE FOR OTHER DIVISIONS OF VISIBLE TITLE. SET TABULATORS TO INSURE PERFECT ALIGNMENT OF EACH DIVISION OF INFORMATION. FOLD BACK OR REMOVE STUB AFTER TYPING. USE NEW TYPEWRITER RIBBON.

NAME

SIGNATURE

92 0

SUMMARY OF DAYS ABSENT					DATE	APTO.	OIS.	RES.	RE- APTD.	TRANS.	CHG.	CLASSIFICATION	DEPT.	SALARY	PER
YEAR	SICK	VACATION	ABSENT WITH PAY	ABSENT W/O PAY											

BORN	WHITE	MALE	EFFICIENCY RECORD	1		2		1		2		1		2		1		2		SALARY PER ANNUM
				1	2	1	2	1	2	1	2	1	2	1	2					
MARRIED	COLORED	FEMALE	PERSONAL																	
SINGLE	PHONE		PHYSICAL																	
NUMBER	ADDRESS		APTITUDE																	
			INITIATIVE																	
			CO-OPERATION																	
			RELIABLE																	
			QUANTITY																	
			QUALITY																	
			KNOWLEDGE																	
			LEADERSHIP																	

Kovaka-Niedentohl
(Worker's full name)

4-3-39
(Date)

931 A
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place. (Room #215)
(Name of building, room number, street address)

1. Title "Purchase Orders - Stock Orders - Requisitions - 1938" (Requisitions)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1938 --
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line 1.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents In front of drawer requisitions for office
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,

supplies, equipment, medicinal supplies and equipment
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by

purchased by the Department of Public Welfare for use in
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

all departments, except hospitals; kept for the purpose of

checking against current purchases; requisitions show

the name of department, division or the address, date of

requisition, requisition number, comptroller's symbol,

confirmation; quantity of articles, description of

6. Contents—continued articles, unit price, vendor's name and date
of delivery, order number, cost account numbers;
by whom ordered and address delivered to; also
signature of approving officer (Bureau Head or Dept. Head)

7. Arrangement Numerically by requisition numbers.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on printed forms.
Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel drawer 11" x 13 1/2" x 2 1/2" 199 documents.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1938 to date, 1 drawer on south wall
in room # 215.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)



CITY OF BALTIMORE

REQUISITION

DEPARTMENT *✓*

DATE *✓*

DIVISION *or address ✓*

REQ. NO. *✓*

COMPTROLLER'S SYMBOL *✓*

CLASSIFICATION NUMBER

CONFIRMING *Yes or no ✓*

YES OR NO

QUANTITY

DESCRIPTION

UNIT PRICE

VENDOR

ORDER NUMBER

COST ACCOUNT

✓

✓

✓

*Vendor name
also date Rec'd.*

✓

✓

ORDERED BY

Dept of Park Welfare

DELIVER TO

Room 11

APPROVED

✓

BUREAU HEAD

APPROVED

DATE

DEPARTMENT HEAD

BUREAU CONTROL & ACCOUNTS

Kovaka-Niedentohl
(Worker's full name)

4-4-39
(Date)

93 B
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place. (Room #215)
(Name of building, room number, street address)

1. Title "Purchase Orders - Stock Orders - Requisitions - 1938" (Purchase Orders)
(Give present full title in quotes: assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1938 --
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line 1.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents In center of drawer purchase orders from the office of purchasing agent for office supplies, equipment, medicinal supplies and equipment purchased for the Department of Public Welfare, for use in all divisions except in city hospitals, kept for the purpose of checking against costs of current purchases; showing name and address of vendor, date of purchase order, name of
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued department where delivery is to be made, date delivery promised; purchase order number, department number, requisition number, comptroller's symbol, cost account numbers, work order number; quantity, unit and description of articles (cont. on line 12)

7. Arrangement Numerically by Purchase Order numbers.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on printed forms
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of drawer 11" x 13 1/2" x 26" Approx. 300 documents.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1938 to date, 1 drawer on south wall in room 215.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

continued from line 6 price per unit; at bottom of sheet, date and quantity of material received, description of articles, date receiving notice forwarded, remarks respecting condition of material when received.

13. (For use in Florida.) Early imprints
(Author) (Publisher)

(Place of publication)

(Date of publication)

Kovaka-Niedentohl
(Worker's full name)

4-4-39
(Date)

93c
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place. (Room # 215)
(Name of building, room number, street address)

1. Title "Purchase Orders - Stock Orders - Requisitions - 1938" (Stock Requisitions)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1938 --
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line 1.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents In back of drawer stock requisition from Bureau of Stores (City Store) for supplies and equipment kept for the purpose of checking against previous shipments; showing stock order number, department number, requisition number, comptroller's symbol, cost account number, name and address of store, date of order, quantity, units and description of material; date received and name of recipient.
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued

7. Arrangement Numerically by stock order number.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on printed form.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of drawer 11" x 13 1/2" x 26" 1 document
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities March 1939 to date, 1 drawer on south wall in room 215.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Record and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

KOVAKA - NIEDENTOHL. 4-3-39

(Worker's full name)

(Date)

94

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE - FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE. (Rooms #211-215)
(Name of building, room number, street address)

1. Title (STATIONERY, OFFICE SUPPLIES - CARD RECORD)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1935 - - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1, STEEL FILE DRAWER & 1 WOODEN BOX.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling DRAWER, LABELED, "COMPLETE STOCK AND (CONT. ON LINE 12)
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CARD RECORD OF STATIONERY AND OFFICE SUPPLIES KEPT FOR THE PURPOSE OF CHECKING AGAINST their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by REQUISITIONS ALSO DISTRIBUTION AND COSTS OF ITEMS each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached) FOR EACH DEPARTMENT. THE CARD SHOWS STOCK CARD NUMBER, DESCRIPTION OF ARTICLES, UNITS, SIZE, FORM NUMBER, DATE OF PURCHASE, REQUISITION NUMBER, FROM WHOM PURCHASED, QUANTITY RECEIVED, UNIT COST, TO WHOM ISSUED, DATE OF ISSUANCE,

6. Contents—continued DR. ACCOUNT, QUANTITY AND COST OF SUPPLIES ON HAND.

CONTINUED TO ITEM

7. Arrangement IN FRONT OF CONTAINERS, RECORDS MARKED - 7 #12
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPED ON PRINTED CARDS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL DRAWER; 7 1/4" X 9 1/2" X 17" APPROX. 2,000 CARDS.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
SIZE OF WOODEN BOX; 6 1/2" X 6 1/2" X 8 1/2", APPROX. 300 CARDS.
OR APPROX. 1,300 CARDS IN ALL.

11. Location by dates and quantities 1 STEEL FILE DRAWER, AGAINST S. WALL, IN ROOM #215; 1 WOODEN BOX, ON TOP OF DESK, AGAINST EAST WALL OF ROOM #211 (AUDITING CLERK)
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information CONDITION OF RECORDS. GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

CONTINUED FROM LINE 4 - STATIONERY CARDS; WOODEN BOX NOT LABELED.

CONTINUED FROM LINE 7 - GENERAL SUPPLIES, ARRANGED ALPHA. BY NAME OF SUPPLY, IN REAR, RECORDS, ARRANGED IN NO PARTICULAR ORDER, OTHER THAN NAME OF DEPARTMENT, OR NAME AND NUMBER

13. (~~For use in Florida.~~) Early imprints OF FORMS.
(Author) (Publisher)

NOTE: RECORDS IN WOODEN BOX ARE ACTIVE THOSE IN STEEL DRAWER ARE CLOSED.
(Place of publication) (Date of publication)

KOVAKA - NIEDENTOHLE, 4-4-39

(Worker's full name)

(Date)

95.

(Form Identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

BALTIMORE CITY State **MARYLAND.**

Name of agency or office **DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.**
(Office of custody) (Office which made the record, if different)

Address of office of custody **# 327 ST. PAUL PLACE. (Room # 215)**
(Name of building, room number, street address)

1. Title **"CORRESPONDENCE"**
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities)

or both)

2. Dates **1936 - - .**
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity **1, STEEL FILE DRAWER.**
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling **CORRESPONDENCE-1936-1937-1938.**
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records **NONE.**
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents **THE RECORD IS KEPT FOR GENERAL PURPOSES RESPECTING EXPENDITURES OF THE DEPARTMENT OF PUBLIC WELFARE. CORRESPONDENCE TO AND FROM THIS OFFICE INCLUDING THE FOLLOWING: ABSENTEE'S REPORTS, (ABSENCE FOR REASONS OTHER THAN PERSONAL SICKNESS) BILLS AND CORRESPONDENCE FROM CITY MEDICAL AGENCIES, COST STATEMENTS FOR OPERATING EXPENSES OF THE D.W.P. FOR EACH**
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued MONTH, CORRESPONDENCE FROM CITY LISTS, HOSPITAL EXPENSE STATEMENTS, INSTRUCTIVE VISITING NURSE ASSOCIATION MONTHLY STATEMENTS, FOR SERVICES RENDERED, MISCELLANEOUS BILLS FOR ICE AND TRANSPORTATION, CORRESPONDENCE
[CONTINUED TO ITEM #12]
7. Arrangement ALPHA, BY SUBJECT OR NAME OF AGENCIES
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing HANDWRITTEN AND TYPED ON PLAIN PAPER AND PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF STEEL DRAWER; 11" X 13½" X 26", APPROX. 2,000 SHEETS IN DRAWER.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities IN STEEL DRAWER, AGAINST SOUTH WALL OF ROOM #215. (FINANCIAL DIVISION).
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information CONDITION OF RECORD & EQUIPMENT, GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
(CONTINUED FROM ITEM #6).—RESPECTING PAYMENTS FOR OBLIGATIONS OF D.M.P. TOWARDS BUDGETS, MUNICIPAL TELEPHONE EXCHANGE BILLS, MISCELLANEOUS CORRESPONDENCE AND REPORTS FROM REFORMATORIES, INVOICES FROM MUNICIPAL DUPLICATING BUREAU; FOR OFFICE SUPPLIES, TRANSPORTATION ORDERS; FOR RELIEF CLIENTS, CORRESPONDENCE RESPECTING AGREEMENT WITH
13. (For use in Florida.)—Early imprints DISPENSARIES AND LEASES FOR PROPERTIES.
(Author) (Publisher)
(Place of publication) (Date of publication)

KOVAKA-NIEDENTOHL.

4-4-39

96

(Worker's full name)

(Date)

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE. State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody # 327 ST. PAUL PLACE. (Room 215)
(Name of building, room number, street address)

1. Title (RECORDS OF RECOVERIES-INDIVIDUAL ACCOUNTS)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1938- -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2, LOOSE LEAF BINDERS, (1 BINDER 1938) (1 BINDER 1939).
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling NONE
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents THESE RECORDS ARE KEPT FOR THE PURPOSE
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
OF CHECKING AGAINST D. P. W. PAY ROLLS, ALSO USED
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
BY THE BOARD OF STATE AID AND CHARITIES, TO
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
CHECK THEIR RECORD AGAINST THIS ACCOUNT, AT VAR-
IOUS INTERVALS. INDIVIDUAL ACCOUNTS HEADED
"RECORD OF RECOVERIES," GROWING OUT OF DEATHS OF
CLIENTS THAT ARE INSURED. (INSURANCE TURNED
OVER TO D. P. W.) INDIVIDUAL ACCOUNT, SHOWS

6. Contents—continued CENTRAL PAY ROLL NUMBER, CASE NUMBER,
NAME AND ADDRESS OF CLIENT, DATE CHECK WAS RE-
CEIVED, DESCRIPTION OF ACCOUNT, SHOWS NAME OF
INSURANCE CO. AND REASON FOR PAYMENT, AMOUNT
OF RECEIPTS, CHECK NUMBERS AND AMOUNT OF — ✓
(CONTINUED TO ITEM #12)
7. Arrangement CHRONO., BY DATE CHECK WAS RECEIVED.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing TYPED ON MINEOGRAPHED FORM.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF BINDERS: 11"X13½"X26"; APPROX. 350 SHEETS IN
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
1938 BINDER, APPROX. 75 SHEETS IN 1939 BINDER, OR
APPROX. 425 SHEETS IN ALL.
11. Location by dates and quantities IN 1, STEEL DRAWER, LABELED
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
"PETTY CASH RECORDS," AGAINST SOUTH WALL OF
ROOM #215. (AUDITING CLERK).
12. Other information CONDITION OF RECORDS, GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
(CONTINUED FROM ITEM #6). RECEIPTS, CHECK NUMBERS
Whether record is known to have been kept earlier than dates shown in item 2)
AND AMOUNT OF DISBURSEMENTS, ALSO BALANCE.
BOTTOM OF SHEET SHOWS ASSISTANCE GRANTED PRIOR
TO JUNE 1935; JUNE 1935; JUNE 1935-FEB. 1, -1936;
FEB. 1, -1936 - - AND TOTAL. ALSO DISTRIBUTION OF
NET RECOVERY SHOWING AMOUNTS FOR LOCAL,
STATE AND FEDERAL AND TOTAL.
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)
(Place of publication) (Date of publication)

Blank

COUNTY WELFARE BOARD

RECORD OF RECOVERIES
INDIVIDUAL ACCOUNT

C PB-No. _____

Case No. _____

Name _____

Address _____

1	2	3	4	5	6
Date	Description	Receipts	Disbursements		Balance
			Check #	Amount	
✓	Name of Ins. Co. (for funeral, etc.) ✓	✓			

Assistance Granted:

Prior to June 1, 1935 \$ _____
June 1, 1935 to Feb. 1, 1936 _____
Feb. 1, 1936 to date _____
Total \$ _____

Distribution of Net Recovery:

Local \$ _____
State _____
Federal _____
Total \$ _____

KOVAKA-NIEDENTOHLE

(Worker's full name)

(Date)

97

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE (Room 215)
(Name of building, room number, street address)

1. Title (SEMI-MONTHLY EMERGENCY CASH PAY ROLLS)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
"Petty Cash Record"
or both)

2. Dates DEC. 1938 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1, STEEL FILE DRAWER (10 ENVELOPES)
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling DRAWER LABELED "PETTY CASH RECORD"
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINS ENVELOPES MARKED ON OUTSIDE WITH INCLUSIVE DATES OF PAY ROLLS AND CLASSIFICATION OF RELIEF AND AMOUNTS; KEPT FOR RECORD AND FILE ALSO FOR FUTURE REFERENCE PURPOSES; CONTENTS OF ENVELOPES CONSISTS OF PAID EMERGENCY CASH VOUCHERS, RECORD OF REQUEST, COPY OF VOUCHER FOR PETTY CASH REIMBURSEMENTS AND D.P.W PAY ROLLS. THEY ARE SEPARATE FOR EACH
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued CATEGORY OF RELIEF.

7. Arrangement CHRONO. BY DATE OF PAYROLL PERIODS.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN AND TYPED ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL DRAWER: 11" X 13 1/2" X 26" (10 ENVELOPES)
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
APPROX. 300 SHEETS IN ENVELOPE OR APPROX. 3,000 SHEETS IN ALL.

11. Location by dates and quantities IN STEEL FILE DRAWER, AGAINST
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
SOUTH WALL, IN ROOM # 215. (FINANCIAL DIVISION).

12. Other information CONDITION OF RECORD & EQUIPMENT GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

KOVAKA-NIEDENTOHL.

(Worker's full name)

(Date)

98

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL-DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE. (Room # 211)
(Name of building, room number, street address)

1. Title (REQUISITIONS)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1939 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 WOODEN DESK DRAWER.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling NONE.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents IN FRONT OF DRAWER ARE ACTIVE RECORDS
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,

CONSISTING OF STOCK REQUISITIONS, THE PUR-
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by

POSE OF THIS RECORD IS TO CHECK AGAINST STOCK
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

CARD FOR EACH DEPARTMENT OF D.P.W., FOR STA-

TIONERY AND OFFICE SUPPLIES. STOCK REQUIS-

TIONS SHOW REQUISITION NUMBER, NAME OF

BUREAU (D.P.W.), DATE OF REQUISITION, DIVISION

AND ACCOUNT NUMBERS, QUANTITY AND

6. Contents—continued DESCRIPTION OF SUPPLIES, UNIT COST, AND TOTAL, TOTAL COST, BY WHOM ORDERED, TO WHOM DELIVERED, BY WHOM ISSUED, BY WHOM APPROVED, AND OFFICE RECEIVING SUPPLIES.

7. Arrangement ALPHA. BY NAME OF DIVISION OR PROJECT.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by

title and identification number)

9. Writing HANDWRITTEN ON PRINTED FORM.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF WOODEN DRAWER; 11 1/2" X 11 1/2" X 26", APPROX.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
1,500 SHEETS IN DRAWER.

11. Location by dates and quantities IN DESK DRAWER OF AUDITING
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
CLERK'S DESK, AGAINST EAST WALL OF ROOM #211.

12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

NOTE: THIS RECORD IS FILED IN SAME DRAWER WITH "CORRESPONDENCE," SEE REPORT # 99

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication)

(Date of publication)

KOVANA-NIEDENTOHLE

(Worker's full name)

(Date)

99

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE - FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE (Room #211)
(Name of building, room number, street address)

1. Title (CORRESPONDENCE)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1939 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1, WOODEN DESK DRAWER
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling NONE
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents IN BACK OF DRAWER ARE ACTIVE RECORDS
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,

CONSISTING OF MISCELLANEOUS CORRESPOND-
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
ENCE. THE RECORD IS KEPT FOR GENERAL OFFICE
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
PURPOSES, RESPECTING CHECKING AMOUNT OF STOCK
ISSUED TO VARIOUS DEPARTMENTS. MISCELLANEOUS
CORRESPONDENCE CONSISTS OF STATEMENTS
FOR GAS & ELECTRIC, LIST OF SUPPLIES FOR
DYE CLEANERS, TAILORS AND LAUNDRIES,

6. Contents—continued IN SEWING AND HOUSEHOLD TRAINING PROJECTS, RECORDS OF STATIONERY ISSUED FROM STOCK, DEPARTMENT OF FINANCE, RESPECTING REPLENISHMENT OF SUPPLIES, BULLETINS RESPECTING DATES OF PAY ROLLS, LETTERS TO-
[CONTINUED TO ITEM #12]
7. Arrangement CHRONO. BY DATE FILED.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing HANDWRITTEN & TYPED ON PRINTED FORMS,
(Handwritten. Handwritten printed form. Handwritten printed head. Typed: Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
PRINTED HEADS AND ON PLAIN PAPER.
10. Size OF WOODEN DRAWER; 11½" X 11½" X 26", APPROX.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
1,000 SHEETS
11. Location by dates and quantities IN DESK DRAWER OF AUDITING,
(Room. vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
CLERK'S DESK, AGAINST EAST WALL OF ROOM #211.
12. Other information CONDITION OF RECORDS & EQUIPMENT GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
(CONTINUED FROM ITEM #6) — COMMISSIONER OF VEHICLES
Whether record is known to have been kept earlier than dates shown in item 2)
FROM THIS DEPARTMENT REGARDING AUTOMOBILES LICENSING, FOR CLIENTS, LIST OF CHANGES OF CASES FOR EACH MONTH, INTERDIVISION CORRESPONDENCE RESPECTING PAY ROLL, MONTHLY STOCK INVENTORIES OF STATIONERY AND OFFICE SUPPLIES, INTERDEPARTMENTAL CORRESPONDENCE, RESPECTING CASH REDUCT-
13. ~~(For use in Florida.)~~ Early imprints IONS ON EMERGENCY CASH VOUCHERS
(Author) (Publisher)
INCLUDING LIST OF NAMES OF PERSONS RECEIVING -
(Place of publication) (Date of publication)

NOTE: FOR CONTINUANCE OF CONTENTS (ITEM #6)
 SEE ATTACHED ADDENDA SHEET.

CONTENTS (ITEM #6) CONTINUED FROM SERIAL # ADDENDA.

— EMERGENCY ORDERS PENDING INVESTI-
GATIONS. ESTIMATES FOR YEAR OF STATI-
ONERY AND SUPPLIES REQUIRED. PURCHASE
ORDERS FOR STATIONERY AND SUPPLIES FOR
D.P.W. WITH DELIVERY SLIPS ATTACHED SHOW-
ING AMOUNT OF PARTIAL SHIPMENTS.

Kavaka-Niedentohl

(Worker's full name)

4-11-39

(Date)

100

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County: Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division.
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place. (Rooms #206 - #215)
(Name of building, room number, street address)

1. Title (Patients' Reports From Hospitals)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
"Hospital Accident Short Slips"
or both)

2. Dates 1937 --
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Bundle; 1 Cardboard box; 1 Steel file drawer.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling 1 Cardboard box. Labeled Financial Division - (Cont. on line 12)
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Semi-monthly reports from the Maryland General
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
Franklin Square, Mercy, Provident, St. Agnes, St. Joseph,
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
South Baltimore General, University and West
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
Baltimore hospitals of relief clients receiving
treatments; kept for the purpose of checking against
hospital admission permits also monthly bills
received from the hospitals; show name of
hospital, names of patients, dates admitted,

6. Contents—continued dates discharged from hospital
also signature of Medical Doctor.

7. Arrangement Chron. by dates admitted, under each hospital.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by

9. Writing Handwritten on printed form
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of drawer 5 1/2" x 6" x 17 1/2" Approx. 300 reports.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
" of box 3 1/4" x 5 1/2" x 9 3/4" Approx. 800 reports.
" of bundle 3 3/4" x 5 3/4" x 3" Approx 400 reports.

11. Location by dates and quantities 1937, 1 Bundle, 1938, 1 Cardboard box on west wall
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
in storage room #206; Jan. 1939. to date, 1 File drawer.
on west wall in room #215.

12. Other information Records and containers in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 4
Accident Short Slips-1938; 1 Bundle labeled Hospital
Short Slips 1937; 1 Steel file drawer (covering 1939
to date.); not labeled.

Note: for prior records see report #137.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

KOVAKA - NIEDENTOHL.

(Worker's full name)

(Date)

101-A

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~City~~ BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE - FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE. (Room #215)
(Name of building, room number, street address)

1. Title ("HOSPITAL ADMISSION PERMITS")
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
(CLOSED CASES)
or both)

2. Dates 1937 - - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 6, STEEL FILE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling SEE ADDENDA SHEETS FOR LIST OF DRAWERS AS LABELED
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another
record. Explain why records are missing, if possible)

6. Contents CONTAINS COPIES OF HOSPITAL ADMISSION PER-
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
MITS AND ARE USED FOR PURPOSE OF CHECKING
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
AGAINST BILLS RECEIVED FROM HOSPITALS FOR
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
TREATMENT OF RELIEF CLIENTS; THE PERMIT
SHOWS DATE ISSUED, PERMIT NUMBER, NAME OF HOS-
PITAL, AUTHORIZATION WITH NAME OF PATIENT,
DATE ADMITTED, DATE DISCHARGED, TOTAL DAYS,
AND NAME OF CERTIFYING OFFICER.

6. Contents—continued

7. Arrangement CHRONO. BY DATE OF ADMISSION UNDER EACH HOSTPITAL.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL DRAWER; 5 1/2" X 6 1/2" X 17"; APPROX.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
4,200 PERMITS IN EACH DRAWER, OR APPROX.
25,200 PERMITS IN ALL.

11. Location by dates and quantities IN STEEL CABINET, AGAINST WEST
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
WALL OF ROOM #215. (SENIOR CLERK, FINANCIAL
DIVISION).

12. Other information CONDITION OF RECORDS & EQUIPMENT GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

NOTE: THE ABOVE ARE CLOSED CASES, OF RE-
LIEF CLIENTS WHO HAVE RECEIVED TREAT-
MENTS IN HOSPITALS. - SEE SERIAL #101-B.
FOR ACTIVE CASES.

13. (For use in Florida.) Early imprints (Author) (Publisher)

(Place of publication)

(Date of publication)

(HOSPITAL ADMISSION PERMITS). ① 101-A

(LABELING ITEM #4, CONTINUED).

ADDENDA.

1, DRAWER LABELED - "DISCHARGED STATE SANITORIUM TO WEST BALTIMORE," CONTAINS PERMITS FOR STATE SANITORIUM, UNION MEMORIAL, UNIVERSITY HOSPITAL AND WEST BALTIMORE GENERAL HOSPITAL.

1, DRAWER LABELED - "DISCHARGED, ST. JOSEPHS TO SOUTH BALTIMORE" - CONTAINS PERMITS FOR SINAI HOSPITAL AND SOUTH BALTIMORE GENERAL HOSPITAL.

1, DRAWER LABELED - "DISCHARGED, JOHNS HOPKINS & KERNANS," CONTAINS PERMITS FOR JOHNS HOPKINS AND KERNAN HOSPITALS.

1, DRAWER LABELED - "PROVIDENT TO ST. JOSEPH," CONTAINS PERMITS FOR PROVIDENT, ST. AGNES AND ST. JOSEPHS HOSPITALS.

1, DRAWER LABELED - "BALTIMORE EYE, EAR & THROAT TO HOPKINS," CONTAINS PERMITS FOR BALTO. EYE, EAR & THROAT, CHILDRENS, FRANKLIN SQUARE, HOSPITALS AND EUDWOOD SANITARIUM.

(HOSPITAL ADMISSION PERMITS).

②
101-A

(LABELING, ITEM #4 CONTINUED)

ADDENDA.

1, DRAWER LABELED - "MARYLAND GENERAL TO MT. PLEASANT," CONTAINS PERMITS FOR MARYLAND GENERAL, MERCY HOSPITALS AND MT. PLEASANT SANITORIUM.

Kovaka-Niedentohl

(Worker's full name)

5-1-39

(Date)

101-B

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland

Name of agency or office Department of Public Welfare-Financial Division.
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place, (Room #206)
(Name of building, room number, street address)

1. Title "Hospital Admission Permits" (Closed Cases)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1937-1938
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 6 Cardboard boxes
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling See addenda sheet for labeling.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Office copies of Hospital Admission Permits
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,

that have been checked against Hospital bills, retained their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by as office record future reference purposes; show date of permit; permit number; name of hospital; authorization from Department of Public Welfare for patients' admittance; with name of patient; date admitted; date discharged; total days; name of certifying officer.

6. Contents—continued _____

7. Arrangement Alph. by names of patients.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Handwritten on printed form.
(Handwritten. Handwritten-printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of box 4" x 6 1/2" x 12" Average 3000 per box.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1937-1938, 6 boxes on east wall
in storage room #206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and containers are in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

"Hospital Admission Permits"
continued from line 4 Addenda sheet

Cardboard boxes labeled as follows

- 1 box, 1937 not labeled
- 1 " Hospital Permits - 1937 - Baltimore City
Hospital - Spring Grove - Springfield - Rosewood -
Crownsville - Municipal T.B.
- 1 " 1938 Baltimore City Hospitals
- 1 " 1938 Baltimore Eye, Ear and Throat -
Crownsville to Eudowood.
- 1 " 1938 Franklin Square to Maryland General.
- 1 " 1938 Mercy to State Sanatorium.

KOVAKA-NIEDENTOML. 4-19-39.

(Worker's full name)

(Date)

101-C

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~City~~ BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE, (Room #211)
(Name of building, room number, street address)

1. Title (HOSPITAL ADMISSION PERMITS) (ACTIVE CASES).
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

"CURRENT PERMITS - A-Z"

or both)

2. Dates 1939 - - -

(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1, STEEL FILE DRAWER.

(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling "CURRENT PERMITS - A-Z"

(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.

(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS COPIES OF HOSPITAL ADMISSION

(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,

PERMITS FOR ACTIVE CASES AND ARE USED FOR
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by

CHECKING AGAINST BILLS RECEIVED FROM HOSPITALS
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

FOR TREATMENT OF RELIEF CLIENTS. THE PERMIT SHOWS

DATE ISSUED, PERMIT NUMBER, NAME OF HOSPITAL,

AUTHORIZATION WITH NAME OF PATIENT, DATE AD-

MITTED, DATE DISCHARGED, TOTAL DAYS, AND NAME

OF CERTIFYING OFFICER.

6. Contents—continued _____

7. Arrangement ALPHA, BY NAME OF PATIENT.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN ON PRINTED FORM.
(Handwritten, Handwritten printed form, Handwritten printed head, Typed, Typed printed form, Typed printed head, Printed, Photostat, Other. Give months and years covered by each kind of writing)

10. Size OF DRAWER; 5 1/2" X 6 1/2" X 16", APPROX. 1500 PERMITS
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
IN DRAWER.

11. Location by dates and quantities ON TOP OF DESK, AGAINST WEST
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
WALL OF ROOM #211. (SENIOR CLERK, FINANCIAL DIVISION).

12. Other information CONDITION OF RECORDS & EQUIPMENT GOOD
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)
NOTE: THE ABOVE ARE ACTIVE CASES, (CURRENT) OF RELIEF CLIENTS RECEIVING TREATMENT IN HOSPITALS. — SEE SERIAL # 101-A FOR CLOSED CASES

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Kovaka - Niedentohl

(Worker's full name)

4-11-39

(Date)

102-A

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division.
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place. (Room #215)
(Name of building, room number, street address)

1. Title "Daily Attendance Reports"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
(Department of Public Welfare - Employees Daily Attendance Reports)

2. Dates 1938 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line 1 (1 drawer Sept. - Dec. 1938; 1 drawer Jan. 1938 - -)
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Daily attendance reports from various divisions of the Department of Public Welfare; used for the purpose of posting absentees on personell record also as a check against payrolls; show division of the Dept. of Public Welfare, date of report, employee's payroll numbers, employee's names, symbols signifying sickness or absence with out pay, reasons for absence, signature of supervisor
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued of the division.

7. Arrangement Clasped sheets arranged chron. by dates of reports.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of drawer 6" x 8 1/4" x 17 1/2" Average 200 Dept. reports per drawer.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
(Average 26 reports clasped together daily.)

11. Location by dates and quantities 1938 to date, 2 drawers on west wall
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
in room # 215

12. Other information Records and containers in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

KOVAKA-NIEDENTOHL, 4-26-39.

(Worker's full name)

(Date)

102-B

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~_____~~ BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE. (Room 206)
(Name of building, room number, street address)

1. Title "DAILY ATTENDANCE REPORTS."
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
(DEPARTMENT OF PUBLIC WELFARE EMPLOYEES).

2. Dates MAR. 1937 TO AUG. 1938, INC.
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2, TRANSFER CASES.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling FOR LABELING SEE ITEM #12.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents DAILY ATTENDANCE REPORTS FROM VARIOUS DIVISIONS OF THE DEPARTMENT OF PUBLIC WELFARE, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by THAT HAVE BEEN USED FOR THE PURPOSE OF POSTING ABSENTEES, ON PERSONELL RECORD ALSO HAS BEEN USED AS A CHECK AGAINST PAYROLLS. THE RECORD IS NOW KEPT FOR FUTURE OFFICE REFERENCE. REPORTS SHOW DIVISION OF DEPT. OF PUBLIC WELFARE, DATE OF REPORT, EMPLOYEE'S PAYROLL

6. Contents—continued NUMBERS, EMPLOYEE'S NAMES, SYMBOLS SIGNIFYING SICKNESS OR ABSENCE WITHOUT PAY, REASONS FOR ABSENCE, SIGNATURE OF SUPERVISOR OF THE DIVISION.

7. Arrangement CLASPED SHEETS, ARRANGED CHRONO. BY DATE OF REPORTS.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF TRANSFER CASE: 6" X 9 1/2" X 25". AVERAGE 72 DEPT. REPORTS PER CASE. (AVERAGE 26, REPORTS CLASPED TOGETHER DAILY) OR APPROX. 149 DEPT. REPORTS (3,749 SHEETS) IN ALL.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities ON WOODEN SHELF, AGAINST EAST WALL, OF RECORD STORAGE ROOM, ROOM # 206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information CONDITION OF RECORD & EQUIPMENT, GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
(CONTINUED FROM ITEM # 4).
Whether record is known to have been kept earlier than dates shown in item 2)

1, TRANSFER CASE LABELED - "DAILY ATTENDANCE REPORTS. FROM JAN. 1ST 1938 TO AUG. 1938."

1, " " " - "ATTENDANCE REPORTS, 3-1-37 TO 12-31-37."

13. (For use in Florida.)—Early imprints NOTE. THIS RECORD DEALS WITH IN ACTIVE REPORTS ONLY. SEE SERIAL 102 FOR ACTIVE REPORTS.
(Author) (Publisher)
(Place of publication) (Date of publication)

KOVAKA - NIEDENTOHLE

(Worker's full name)

4-13-39

(Date)

#103

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE - FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody # 327 ST. PAUL PLACE.
(Name of building, room number, street address) (Room 215.)

1. Title (INTERDIVISION CORRESPONDENCE)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates JULY 1ST, 1938 - - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 5, STEEL FILE DRAWERS.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling SEE ITEM #12.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS INTERDIVISION CORRESPONDENCE FROM FINANCIAL TO CENTRAL PAY ROLL BUREAU RESPECTING CANCELLATION AND RELEASE OF CHECKS, CHANGES IN ADDRESSES, HOLD CHECK NOTICES, INCORRECT ADDRESSES, KEPT FOR PURPOSE OF CHECKING AGAINST CHANGE TICKETS, GRANT AUTHORIZATION TICKETS AND PAY ROLL; CORRESPONDENCE SHOWS NAMES OF DEPARTMENTS COMMUNICATING
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued (U.F.) TO CENTRAL PAY ROLL BUREAU FROM FINANCIAL DIVISION; SUBJECT; SOCIAL WORKER'S DISTRICT; CATEGORY OF RELIEF; DATE OF CORRESPONDENCE; C.P.B. NUMBER; D.P.W. NUMBER; NAME AND ADDRESS OF RELIEF CLIENT —

7. Arrangement ALPHA., BY NAME OF RELIEF CLIENT. (CONTINUED TO ITEM #12)
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN AND TYPED ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF FILE DRAWER; 6 1/4" X 9" X 17 1/2", APPROX. 1,700
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
 SLIPS PER DRAWER OR APPROX. 8,500 IN ALL.

11. Location by dates and quantities IN STEEL CABINET AGAINST WEST WALL OF ROOM # 215 (FINANCIAL DIVISION).
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
 (CONTINUED FROM ITEM #6) DESCRIPTION AND REASON FOR HOLD CHECKS, CANCELLATION ETC.; INITIALS OF CLERK AND DATE OF CHECKING IN THIS DEPARTMENT.

LABELING (CONTINUED FROM ITEM #4, BELOW)
 1 DRAWER LABELED A-FR; CONTAINS NAMES FROM A-FR.

1	"	"	- C-HU;	"	"	"	G-LO.
1	"	"	- I-LY;	"	"	"	MC-Q.
1	"	"	- MC-O	"	"	"	R-TH.
1	"	"	- P-SC	"	"	"	TO-Z.

Note: C.P.B. denotes Central Payroll Bureau
 D.P.W. " Department of Public Welfare.
 for prior records see report #127.

CITY OF BALTIMORE
DEPARTMENT OF PUBLIC WELFARE
INTER-DIVISION CORRESPONDENCE

From:

To:

193

Subject:

ADC

OAP

ATB

GPA

CPB No. _____ NAME _____

DPW No. _____ ADDRESS _____

NOTE: ON ALL COMMUNICATIONS RELATIVE TO PENSIONERS PLEASE GIVE BOTH NUMBERS, NAME AND ADDRESS.

Kovack-Niedentahl
(Worker's full name)

4-13-39
(Date)

104-A
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City _____ State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place (Room #215)
(Name of building, room number, street address)

1. Title "Bills-1938- Destitute and Neglected Children - Hospitals - Psychopathic - Miscellaneous" (Paid Bills - Destitute and Neglected Children)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities)
2. Dates 1938--
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 2 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling Drawer labeled Bills 1938 - Destitute and Neglected Children - (cont. on line 12)
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Quarterly statements for Destitute and Neglected Children's Institutions in Baltimore City of city charges for board, etc.; filed in same drawers containing statements to Hospitals, Psychopathic Hospital, Miscellaneous; checked against institution reports for accuracy then filed for office record respecting the distribution of funds; statements headed The Mayor and City Council of Baltimore show name and address of institution; date ending of
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued quarter with year numbers; number of days and rate, also total amount of bill; certification by Financial Supervisor as to correction also certification by Assistant Director respecting persons accepted as proper subjects of municipal aid; list of children, showing identification ^(cont. on line 12) _{institution}

7. Arrangement Numerically by quarter of year under name of
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on printed forms
(Handwritten, Handwritten printed form, Handwritten printed head, Typed, Typed printed form, Typed printed head, Printed, Photostat, Other. Give months and years covered by each kind of writing)

10. Size of drawer 11" x 13 1/2" x 2 1/2" Approx 150 documents
(Of record or container. Height, width, thickness or depth. Average number of ~~pages~~ documents)
(Average 6 sheets per statement)

11. Location by dates and quantities 1938 to date, 2 drawers on south wall in room # 215.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and containers are in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Line 4 continued from line four — Hospitals - Psychopathic - Miscellaneous; 1 drawer, 1939 not labeled.
(Whether record is known to have been kept earlier than dates shown in item 2)

Line 6 continued from line six — numbers, names of children, check marks (as checked against reports), dates accepted, dates left, number of days of each child; remarks relating how committed also in whose custody placed when child discharged from institution.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Kovaka-Niedentohl
(Worker's full name)

5-18-39
(Date)

104-13
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland
Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place (Room #215)
(Name of building, room number, street address)

1. Title "Bills - 1938 - Destitute and Neglected Children - Hospitals - Psychopathic - Miscellaneous" (Monthly statements - Hospitals)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1938 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 2 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling 1 drawer labeled Bills - 1938 - Destitute and Neglected (cont. on line 12)
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Monthly statements to various hospitals in city of charge accounts for board, also medical services rendered to their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by patients certified by the Department of Public Welfare; filed in same drawers containing statements to Destitute and Neglected Children Institutions, Psychopathic Hospital; Department of Public Welfare Service Orders and Reports from Medical Agencies (the latter two records titled on name card - Miscellaneous; statements checked against Hospital
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record. Each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued Admission Permits and Hospital Reports; show name and address of hospital, total days billed, total days added, total days deducted, number of adjusted days, total days allowed, rate per day, total amount of bill; certification of Assistant Director respecting persons accepted as proper subjects of municipal aid; (cont. on line 12)

7. Arrangement Chron. by month of statement under name of hospital.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of drawer 11" x 13 1/2" x 26" Approx 350 statements.
(Of record or container. Height, width, thickness or depth. Average number of ~~pages~~ documents)
(Average 6 sheets per statement)

11. Location by dates and quantities 1938 to date, 2 drawers on south wall in room # 215.
(Room, vault, wall, N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and containers are in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)
continued from line four ~ Children - Hospitals - Psychopathic - Miscellaneous; 1 drawer, 1939 not labeled.
continued from line six ~ including names of patient, diseases, dates admitted, dates discharged, number of days of each patient in hospital; certification of Financial Supervisor as to bill being correct; attached to statement a summary showing name of hospital, month, number of patients received and discharged each day, number of

13. (For use in Florida) Early imprints of patients left in hospital at close of each day with totals at bottom of sheet.
(Author) (Publisher)
(Place of publication) (Date of publication)

KOVAKA-NIEDENTOHLE, 5-18-39.

(Worker's full name)

(Date)

104-C
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~██████~~ BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE (ROOM 206).
(Name of building, room number, street address)

1. Title "BILLS-1938-DESTITUTE AND NEGLECTED CHILDREN-
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
HOSPITALS-PSYCHOPATHIC-MISCELLANEOUS;" (BILLS PYS-
or both)

2. Dates 1938- - CHOPATHIC HOSPITAL).
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2 STEEL FILE DRAWERS.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling 1 DRAWER LABELED "BILLS 1938-DESTITUTE AND (CONT. ON
LINE #12)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents MONTHLY STATEMENTS FROM PSYCHOPATHIC HOSPITAL.
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,

OF CHARGE ACCOUNTS FOR BOARD AND MEDICAL SERVICE MEN
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by

DERIVED TO PATIENTS CERTIFIED BY THE D.P.W.; PERTAINING
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

OFFICE RECORD RESPECTING DISTRIBUTION OF EXPENDI-
TURES FROM FUNDS. STATEMENT SHOWS NAME AND ADDRESS
OF HOSPITAL; TOTAL DAYS BILLED, TOTAL DAYS ADDED, TOTAL
DAYS DEDUCTED, NUMBER OF DEDUCTED DAYS, TOTAL DAYS AL-
LOWED, RATE PER DAY, TOTAL AMOUNT OF BILL, CERTIFICATION

6. Contents—continued OF OFFICER IN HOSPITAL RESPECTING PERSONS
ACCEPTED AS PROPER SUBJECTS FOR MUNICIPAL AID. ALSO
SHOWS NAMES OF PATIENTS, DISEASES, DATES ADMITTED, DATES
DISCHARGED, NUMBER OF DAYS IN HOSPITAL AND SIGNATURE
OF PRINCIPAL CLERK; A SUMMARY SHEET IS ATTACHED TO—
 (CONTINUED TO LINE #12)
7. Arrangement CHRONO. BY MONTH OF STATEMENT UNDER NAME—
 (Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE (OF HOSPITAL.)
 (Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by
 title and identification number)
9. Writing TYPED ON PRINTED FORMS.
 (Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
 Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF DRAWER; 11" X 13 1/2" X 26"; APPROX 16 DOCUMENTS
 (Of record or container. Height, width, thickness or depth. Average number of pages or documents)
AVERAGE 6 SHEETS PER DOCUMENT.
11. Location by dates and quantities 1938 --; IN STEEL CABINET ON SOUTH
 (Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
WALL IN ROOM # 215.
12. Other information CONDITION OF RECORDS & CONTAINER EXCELLENT.
 (Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
(CONTINUED FROM LINE #4) -- NEGLECTED CHILDREN-HOS-
 (Whether record is known to have been kept earlier than dates shown in item 2)
PITAL-PSYCHOPATHIC-MISCELLANEOUS"; 1 DRAWER
NOT LABELED.
(CONTINUED FROM LINE #6) -- STATEMENTS SHOWING NAME OF HOSPITAL
MONTH, NUMBER OF PATIENTS ADMITTED, NUMBER DISCHARGED EACH
DAY, NUMBER OF PATIENTS LEFT IN HOSPITAL AT CLOSE OF EACH DAY;
STATEMENT ALSO BEARS PERFORMANCES PAID, WITH DATE RE-
13. (For use in Florida.) Early imprints CEIVED IN BUREAU OF MISDEMEANORMENTS
 (Author) (Publisher)
AND VOUCHER NUMBER OF PAYMENT.
 (Place of publication) (Date of publication)

NOTE: THE ABOVE RECORDS ARE FILED IN SAME DRAWERS WITH BILLS-DESTITUTE AND NEGLECTED CHILDREN-HOSPITALS-MISCELLANEOUS.

Kovaka-Niedentohl
(Worker's full name)

4-13-39
(Date)

104-D
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland

Name of agency or office Department of Public Welfare-Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place (Room # 215)
(Name of building, room number, street address)

1. Title "Bills - 1938 - Destitute and Neglected Children - Hospitals -
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
Psychopathic - Miscellaneous" (Reports from Medical Agencies)
or both)

2. Dates 1938 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling 1 drawer labeled Bills 1938 - Destitute and Neglected (cont. on line 12)
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Monthly reports from Medical Agencies, kept in
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
this office for record of number of persons receiving
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
treatments also used in preparing annual reports
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
for the Director of the Department of Public Welfare;
show district, month; number of applicants registered
for treatments this year under respective headings of color, men
and women; color, children; number registered first time; number
of applicants registered in previous year;

6. Contents—continued number of treatments given at agency; number of visits made to applicants' homes; number of cases referred to charitable agencies; number of cases sent to Baltimore City Hospital, to other hospitals and special dispensaries; (cont. on line 12)

7. Arrangement Chron. by month of report
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Handwritten on printed form.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of drawer 11" x 13 1/2" x 26" Approx. 90 reports
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
(Average 6 reports per month)

11. Location by dates and quantities In steel cabinet on south wall in room 215.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

continued from line 4 — Children - Hospital - Psychopathic - Miscellaneous; 1 drawer 1939 not labeled.

continued from line 6 — number of prescriptions issued; signature of physician in charge.

Note: The above records are filed in same drawer with Bills

13. (~~Florida~~) ~~Early~~ prints
(Author) (Publisher)

(Place of publication)

(Date of publication)

Kovaka-Niedentohl

(Worker's full name)

4-14-39

(Date)

104-E

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place.
(Name of building, room number, street address)

1. Title (Department of Public Welfare Service Orders)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1938--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling 1 drawer labeled Bills 1938 - Destitute and Neglected (cont. on line 12)
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Office copies of Service Orders sent to this office for checking errors against requisitions and purchase orders, also kept for future reference; covering expenditures from all the divisions of the Department of Public Welfare; show name of department, name and address of vendor; date of service order; service order number; appropriation account number; other account number; description of order; delivery address; name of head of department by whom ordered.
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued _____

7. Arrangement Alph. by names of Vendors.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on printed form
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of drawer 11" x 13 1/2" x 26" 2400 per drawer.
(Of record or container. Height, width, thickness or depth. Average number of ~~pages~~ documents)

11. Location by dates and quantities 1938 to date, 2 drawers on on south wall in room #215.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and containers in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 4 ~~under~~ Children-Hospital-Psychopathic-Reformatories-Miscellaneous; 1 drawer 1939 not labeled.

Note: The above records are filed in same drawer containing Reports from Medical Agencies-report # 104-A and Monthly Bills from Hospitals-report # 104-B.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Kovaka-Niedentahl
(Worker's full name)

4-11-39
(Date)

105
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland
Name of agency or office Department of Public Welfare-Financial Division
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place
(Name of building, room number, street address)

1. Title "Delivery Tickets" (Shipping Orders from
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
Commodity Distribution Warehouses)
or both)
2. Dates 1937--
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 2 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling Drawers labeled "Delivery Tickets - Northern Motors" (cont. on
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another
record. Explain why records are missing, if possible)

6. Contents Shipping orders from the Commodity
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record.
Distribution Warehouses kept in this office for the
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
purpose of checking against Service Orders from
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
the Department of Public Welfare and the articles
delivered by the carriers; attached to shipping
orders, memorandums showing dates of service
orders and clerk's initials signifying that shipping
order has been checked; shipping orders show

6. Contents—continued shipping order number, date of order, name of consignee, location of warehouse, location of consignee, quantity of commodities, package contents, total units, description of commodities, weights; at bottom of order, rate per cwt. and
7. Arrangement Chron. by dates of service orders.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Typed on printed form
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of drawer 6" x 8" x 17 1/2" Average 1200 documents per drawer.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities 1937 to date, 2 steel drawers on west wall in room #215.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information Records and containers in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
 continued from line 4 mm "Delivery Tickets - Davidson"
 continued from line 6 mm total weight of order; also certification by carrier as to condition of articles when delivered, date and signature of recipient for Department of Public Welfare.
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

KOVAKA-NIEDENTOHL

(Worker's full name)

(Date)

106

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title "LEDGER CARDS." (CLIENT'S LEDGER CARDS).
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities)

or both)

2. Dates 1935 - - .
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1, STEEL FILE DRAWER
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling AS TITLED.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents THE RECORD CONSISTS OF OLD AGE PENSION, LEDGER
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
ACCOUNTS, DESTITUTE AND NEGLECTED CHILDREN, (JUV-
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
ENILE COURT COMMITMENTS), AID TO DEPENDENT
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
CHILDREN, AID TO BLIND, AND PSYCHOPATHIC AC-
COUNTS. THE ABOVE ACCOUNTS EXCEPTING, DESTI-
TUTE AND NEGLECTED CHILDREN'S ACCOUNTS, ARE
TURNED OVER TO CITY. THE DESTITUTE ACCOUNTS
ARE RETAINED UNTILL CHILD BECOMES OF AGE.

6. Contents—continued THESE RECORDS ARE KEPT FOR CHECKING AGAINST RECOVERY ACCOUNTS OF EACH INDIVIDUAL. CARDS SHOW NAME OF CLIENT, CATEGORY OF RELIEF, CENTRAL PAY ROLL BUREAU NUMBER, D. P. W. CASE NUMBER, DATE OF RECORD, REFERENCE TO RECEIPTS—
(CONTINUED TO ITEM #12)
7. Arrangement ALPHA. BY NAME OF CLIENT IN ERCH CATEGORY
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing HANDWRITTEN ON PRINTED CARDS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF STEEL FILE DRAWER; 5" X 6 1/2" X 17", APPROX. 880 CARDS IN DRAWER, IN FRONT OF DRAWER, APPROX 440 CARDS, (ACTIVE CASES) DEVIDED AS FOLLOVS, 2 CARDS, A.T.B. 15-G. P.A.—
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
(CONTINUED TO ITEM #12)
11. Location by dates and quantities IN STEEL CABINET AGAINST WEST WALL IN ROOM # 215 (SENIOR CLERK FINANCIAL DIVISION).
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
(CONTINUED FROM ITEM #10). — 250 CARDS, O.A.P., 12, D.&N. CHILDREN, 75-PSYCHO-PATHIC, NOTE: 440 CARDS, IN FRONT OF DRAWER, REPRESENT ACTIVE RECORDS, APPROX. 440 CARDS, IN REAR OF DRAWER REPRESENT CLOSED CASES. (CONTINUED FROM ITEM #6) — (WHETHER BY CASH OR OTHERWISE). AMOUNT OF ACCOUNT ALSO DATE OF WITH-DRAWALS.
Whether record is known to have been kept earlier than dates shown in item 2)
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)
(Place of publication) (Date of publication)

KOVAKA-NIEDENTOHL.

(Worker's full name)

(Date)

107

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL-DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #377 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title "TELEPHONE SLIPS."
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates JULY, 1938 - - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1, STEEL FILE DRAWER.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling AS TITLED.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONSISTS OF RECORD OF TELEPHONE TOLL
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
SLIPS, VARIOUS WORKERS MAKING CALLS FOR RE-
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
REFERENCE PURPOSES, AND THESE SLIPS ARE CHECK-
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
ED AGAINST TELEPHONE BILL. THE SLIP SHOWS
DATE OF CALL, TIME CALLED, CHARGES, EXTENSION
NUMBER, DEPARTMENT CALLED, CALLING PARTY,
TELEPHONE NUMBER CALLED, PLACE CALLED,
PERSON CALLED, DISCONNECTED TIME, CON-

6. Contents—continued NECTION TIME, AND REMARKS, RE-
SPECTING PURPOSE OF CALL.

7. Arrangement CHRONO. BY DATE OF CALL IN MONTHLY BUNDLES.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by
title and identification number)

9. Writing HANDWRITTEN ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL DRAWER; 5" X 6 1/2" X 17", APPROX. 2,400
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
SLIPS IN DRAWER.

11. Location by dates and quantities IN STEEL CABINET AGAINST WEST
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
WALL, IN ROOM # 215. (SENIOR CLERK, FINANCIAL
DIVISION.)

12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication)

(Date of publication)

Kovaks - Niedentohl

4-14-39

108

(Worker's full name)

(Date)

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place
(Name of building, room number, street address)

1. Title (Old Age Assistance Grant Authorization
Tickets)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1936 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Cardboard transfer case; 3 steel file drawers; 1 bundle.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling See line 12 for labeling
(Explain fully: years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Grant authorization prepared on four copies sent to this
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
office to check for accuracy, after checking, proper copies are sent to Central Payroll Bureau, Dept of Public Welfare records file, Auditing Dept. one copy retained in this office for future reference; show payroll number, welfare number, check mark in squares opposite Entry, Change, Supplementary, cut-off; name and address of client during original grant; name and address in new grant; amounts of original grant and new grant; amount of one time emergency payment; number in family and name

6. Contents—continued of case worker during original grant also number in family and name of case worker in new grant; date of birth, race, religion; date requested and date effective; remarks relative to changes in family status; approvals of case worker and case (Continue on line 12)

7. Arrangement Numerically by Central Payroll Bureau numbers.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Handwritten on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of drawer 6 1/4 x 9 x 17 1/2" Average 3400 per drawer
(Of record or container. Height, width, thickness or depth. Average number of documents)
" " transfer case 6" x 9 1/4" x 25" Approx.

11. Location by dates and quantities 1936-1937, 1 Card board transfer case
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
and 1 bundle on west wall in storage room # 206; 1938 to date, 3 drawers on west wall in room # 215;

12. Other information Records and containers in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 6 ~~~~~ supervisor also initials of Assistant Director; descriptions of old grant and new grant.

Continued from line 4 ~~~~~ labeled as follows
Transfer case "C.P.B. Numbers 8101-8990 } Drawers - 1 for 1938 to date,
in Package Old Age Grant Authorizations } O.A.P. 1-4599
1936-1937, Numbers 14-8100 } O.A.P. 5000-7999
R.G. Shanklin - Financial Division" } O.A.P. 8000-10199

~~13. (Transfer Case)~~ Bundle labeled Old Age Grant Authorizations -
(Author) (Publisher)
1936-1937 - C.P.B. Nos. 8101-8990. Assistance To Blind Grant Authorizations -
(Place of publication) (Date of publication)
1936-1937 C.P.B. Nos. 3-563. (See report # 117-A for description of A.T.B Grants in this bundle.)

Note: O.A.P. denotes Old Age Pensions

GRANT AUTHORIZATION DEPARTMENT OF PUBLIC WELFARE

108 ~~XXXXXXXXXX~~

PAYROLL NO.	WELFARE NO.	OLD AGE ASSISTANCE
-------------	-------------	--------------------

ENTRY	CHANGE	EMERGENCY	SUPPLEMENTARY	CUT OFF
-------	--------	-----------	---------------	---------

NAME (PRINT)
 ADDRESS (PRINT)

TO
 NAME (PRINT)
 ADDRESS (PRINT)

SEMI-MONTHLY	MONTHLY	TO	SEMI-MONTHLY	MONTHLY
\$	\$		\$	\$

CENTRAL PAYROLL BUREAU VERIFICATION

ONE TIME EMERGENCY PAYMENT

OLD

NUMBER IN FAMILY
 WORKER

TO
 NUMBER IN FAMILY
 WORKER

DATE OF BIRTH

RACE

RELIGION

DATE REQUESTED

DATE EFFECTIVE

REMARKS

NEW

APPROVED:

 CASE WORKER

CASE SUPERVISOR

ASST. DIRECTOR

 INITIALS

KOVAKA-NIEDENTOHLE 4-19-'39 109-A
(Worker's full name) (Date) (Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE
(Name of building, room number, street address)

1. Title (OLD AGE PENSION PAYROLL RECORD - Active)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1935 - - .
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 6 STEEL FILE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling FOR LABELING SEE ITEM #13
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS OLD AGE PENSION RECORD CARDS, THESE CARDS ARE USED FOR PURPOSE OF CHECKING their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by AGAINST GRANT AUTHORIZATIONS, COVERING each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached) CHANGE OF ADDRESS, DATES EFFECTIVE AND NEW AMOUNTS. THE CARD SHOWS CATEGORY OF RELIEF, CENTRAL PAY ROLL NUMBER, DEPARTMENT OF PUBLIC WELFARE NUMBER, NAME AND ADDRESS OF CLIENT, ENTRY DATE, ORIGINAL

6. Contents—continued SEMI-MONTHLY AMOUNT, NEW AD-DRESSES, DATES EFFECTIVE AND NEW AMOUNTS.

7. Arrangement ALPHA, BY NAME OF CLIENT.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPED ON PRINTED CARDS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF FILE DRAWER; 9" X 5 1/2" X 22", APPROX. 4,600 CARDS PER DRAWER, OR APPROX. 27,600 CARDS IN ALL.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities ON TOP OF DESK, IN CENTER OF ROOM # 215. (O.A.P. CLERK'S DESK.)
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information CONDITION OF RECORDS & EQUIPMENT GOOD (CONTINUED FROM ITEM #4).
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)

- 1, DRAWER LABELED - O.A.P. - A TO B.
- 1, " " - O.A.P. - C TO F.
- 1, " " - O.A.P. - G TO J.
- 1, " " - O.A.P. - K - N.
- 1, " " - O.A.P. - O - S.
- 1, " " - O.A.P. - ST - Z.

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

Kovaka-Niedentohl
(Worker's full name)

4-14-39
(Date)

109-13
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland
Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place
(Name of building, room number, street address)

1. Title "Old Age Pension Payroll Record - Cut-Off"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles list them with dates or quantities or both)
2. Dates 1935 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 3 Steel file drawers.
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling As shown on line one.
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None.
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Card record used in checking against grant authorization ticket respecting cut-off from assistance and their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached
for checking when persons are re assigned some payroll numbers of former client; show category of assistance, Central Payroll Bureau number, Department of Public Welfare number, name and address of pensioner, entry date and amount of semi-monthly grant, new addresses and dates

6. Contents—continued effective; amount of last grant, also stamped Cut-Off with date.

7. Arrangement Alph. by names of pensioners
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on plain and on printed cards
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of drawer 4" X 5 1/2" X 22" Average 2000 cards per drawer.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1935 to date, 3 steel drawers on top of desk in center of room #215.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and containers in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Kovaka-Niedentohl
(Worker's full name)

4-13-39
(Date)

110
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland

Name of agency or office Department of Public Welfare-Financial Division.
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place.
(Name of building, room number, street address)

1. Title (Old-Age Pension Entry Tickets - Change Tickets -
Cut-Off Tickets)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1937 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 6 Steel file drawers.
(Number of volumes; file drawers; file boxes; bundles (other))
4. Labeling Drawers labeled Old Age, with incl. lettering (See addenda sheet for list of drawers as labeled)
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Copies of entry tickets, change tickets and cut-off tickets sent to this office and Central Payroll Bureau; Financial Division copies are checked against grant authorizations, errors and filed for future reference; entry ticket shows Central Payroll Bureau number, Department of Public Welfare number, name and address of pensioner, amount of semi-monthly grant, number of persons in family, amount of

6. Contents—continued monthly grant, race and date of birth, name of investigator, date effective; remarks respecting requirements to receive assistance, date approved and signature of Director of the Department of Public Welfare; date of Central Payroll Bureau verification; (cont. on line 12)
7. Arrangement Alph. by names of pensioners
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Handwritten on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of drawer 6"4"x9"x17 1/2" Average 3500 per drawer.
(Of record or container. Height, width, thickness or depth. Average number of ~~pages~~ documents)
11. Location by dates and quantities 1937 to date, 6 drawers on west wall in room #215.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information Records and containers in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
continued from line 6 ~~change~~ change ticket shows Central Payroll Bureau number, Department of Public Welfare number, name and present address of pensioner, former address; semi-monthly and monthly amounts of old grant, also semi-monthly and monthly amounts of new grant; race and number in family, including number during original grant and new grant; name of investigator;
Whether record is known to have been kept earlier than dates shown in item 3)
13. (For use in Florida.) Early imprints _____ (continue on addenda sheet)
(Author) (Publisher)
(Place of publication) (Date of publication)

OLD-AGE PENSION CHANGE TICKET

110

CENTRAL PAYROLL BUREAU: The old-age pension for the person herein indicated has been changed in accordance with the requirements of this department and is hereby certified correct for payroll purposes until further notice.

C. P. B. No. **NAME**

..... **FORMER ADDRESS**

D. P. W. No. **ADDRESS**

OLD GRANT	NEW GRANT
SEMI-MONTHLY	SEMI-MONTHLY
\$	\$
PER MONTH	PER MONTH
\$	\$

REMARKS:

.....

.....

.....

.....

RACE **No. in Family: From** **to**

APPROVED:

INVESTIGATOR

..... 19

DATE EFFECTIVE

(Director Department of Public Welfare)

NOTE: This change ticket is to be promptly executed in duplicate by the Department of Public Welfare. The original forwarded to the Central Payroll Bureau, and the duplicate retained for record and file.

Central Payroll Bureau Verification

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OLD-AGE PENSION ENTRY TICKET

110

CENTRAL PAYROLL BUREAU: The person herein indicated has met the requirements of this department relative to old-age assistance which is hereby certified correct for payroll purposes until further notice.

C. P. B. No.....NAME.....

REMARKS:.....

D. P. W. No.....ADDRESS.....

SEMI-MONTHLY GRANT.....\$.....

No. IN FAMILY.....

MONTHLY GRANT.....\$.....

RACE.....DATE OF BIRTH.....

APPROVED:.....

INVESTIGATOR.....

.....19.....

DATE EFFECTIVE.....

(Director Department of Public Welfare)

NOTE: This entry ticket is to be promptly executed in duplicate by the Department of Public Welfare. The original forwarded to the Central Payroll Bureau, and the duplicate retained for record and file.

Central Payroll Bureau Verification

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Case Worker No.....Name.....

DEPARTMENT OF PUBLIC WELFARE

OLD - AGE PENSION
CUT - OFF TICKET

110

CENTRAL PAYROLL BUREAU: The old-age pension for the person herein indicated has been discontinued in accordance with the records of this department.

C. P. B. No.....NAME.....

D. P. W. No.....ADDRESS.....

No. IN FAMILY.....

SEMI-MONTHLY RATE..... \$.....

PER ANNUM ALLOWANCE..... \$.....

RACE.....

DATE EFFECTIVE.....

REMARKS
HOW SEPARATED }

APPROVED:

19.....

(Director Department Public Welfare)

Central Payroll Bureau Verification

NOTE: This cut-off ticket is to be promptly executed in duplicate by the Department of Public Welfare. The original forwarded to the Central Payroll Bureau, and the duplicate retained for record and file.

KOVAKA-NIEDENTOHL.

(Worker's full name)

(Date)

111

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title G.P.A. EMERGENCY ALLOWANCE TICKETS, GRANT AUTHORIZATION TICKETS, ENTRY TICKETS, CHANGE TICKETS, OUT-OFF-TICKETS
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates JAN. 1936 - DEC. 31ST. 1937.
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 3, STEEL TRANSFER CASES.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling "G.P.A. GRANT AUTHORIZATION TICKETS."
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS COPIES OF G.P.A. EMERGENCY ALLOWANCE TICKETS, COPIES OF GRANT AUTHORIZATION TICKETS FOR G.P.A., COPIES OF G.P.A. ENTRY TICKETS, COPIES OF G.P.A. CHANGE TICKETS AND COPIES OF G.P.A. OUT-OFF TICKETS. G.P.A. EMERGENCY ALLOWANCE TICKET SHOWS, NAME OF INVESTIGATOR, CERTIFICATION BY D.P.W. TO CENTRAL PAY ROLL BUREAU, THAT CLIENT NAMED BELOW ON FORM HAS MET ALL REQUIREMENTS OF D.P.W. AND IS
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

OVER,

6. Contents—continued ELIGIBLE FOR RELIEF, C.P.B. NUMBER,
D.P.N. NUMBER, NAME AND ADDRESS OF CLIENT, RACE,
NUMBER OF PERSONS IN FAMILY GROUP, AMOUNT OF
SEMI-MONTHLY GRANT, EFFECTED DATE OF GRANT,
REASON FOR EMERGENCY ALLOWANCE, DATES OF
(CONTINUED TO ITEM #12)
7. Arrangement ALPHA, BY NAME OF CLIENT.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing HANDWRITTEN ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF TRANSFER CASE; 6" X 9 1/4" X 25"; APPROX 7,500
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
IN CASE OR APPROX. 22,500 IN ALL.
11. Location by dates and quantities ON WOODEN SHELF AGAINST WEST
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
WALL OF RECORD STORE ROOM, # 206.
12. Other information CONDITION OF RECORD & EQUIPMENT, GOOD
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
(CONTINUED FROM ITEM #6) ENTRY ON
Whether record is known to have been kept earlier than dates shown in item 2)
EMERGENCY PAY ROLL, AMOUNTS OF EMERGENCY AL-
LOWANCE GRANTED BY STATE AND CITY AND TOTAL, ALSO
REMARKS, AND DATE APPROVED AND SIGNATURE OF
FINANCIAL DIVISION EMPLOYEE. GRANT AUTHORI-
ZATION TICKETS FOR G.P.A. SHOW PAY ROLL NUMBER
WELFARE NUMBER, CHECK MARK IN SPACES PROVIDED
13. ~~(For use in Florida.)~~ Early imprints OPPOSITE ENTRY, CHANGE EMERGENCY,
(Author) (Publisher)
FUEL, ICE, CUT OFF, NAME OF CLIENT AND FORMER ADDRESS.
(Place of publication) (Date of publication)

111 ①

"G.P.A. EMERGENCY ALLOWANCE TICKETS, GRANT AUTHORIZATION TICKETS, ENTRY TICKETS, CHANGE TICKETS, CUT-OFF TICKETS."

(CONTENTS ITEM #68#12 CONTINUED). ADDENDA.

— ALSO NAME OF CLIENT AND NEW ADDRESS, AMOUNTS OF FORMER GRANT AND NEW GRANT, AMOUNT OF ONE TIME EMERGENCY PAYMENT, NUMBER IN FAMILY BEFORE CHANGE, ALSO NUMBER IN FAMILY IN NEW GRANT, DATE OF BIRTH, RACE, RELIGION, DATE ISSUED, DATE EFFECTIVE, REMARKS RELATIVE TO CHANGES IN FAMILY, STATUS, APPROVALS OF FIELD SUPERVISOR AND ASSISTANT DIRECTOR, ALSO INITIALS OF FINANCIAL SUPERVISOR, DESCRIPTIONS OF OLD GRANT AND NEW GRANT. G.P.A. ENTRY TICKET, SHOWS NAME OF INVESTIGATOR, CERTIFICATION BY D.P.W. TO CENTRAL PAY ROLL BUREAU THAT CLIENT NAMED BELOW ON FORM HAS MET ALL REQUIREMENTS OF D.P.W. AND IS ELIGIBLE FOR RELIEF, C.P.B. NUMBER, D.P.W. NUMBER, NAME AND ADDRESS OF CLIENT, AMOUNTS OF SEMI-MONTHLY AND MONTHLY GRANTS BY CITY AND STATE AND TOTALS, NUMBER IN FAMILY, RACE, DATE OF BIRTH, DATE EFFECTIVE, REMARKS, DATE APPROVED AND SIGNATURE OF FINANCIAL DIVISION EMPLOYEE. G.P.A. CHANGE TICKET, SHOWS NAME OF INVESTIGATOR CERTIFICATION BY D.P.W. TO CENTRAL PAY ROLL BUREAU THAT THE G.P.A. ALLOWANCE FOR THE CLIENT, BELOW ON FORM, HAS BEEN CHANGED IN ACCORDANCE WITH REQUIREMENTS OF D.P.W. AND CERTIFIED TO BE CORRECT, C.P.B. NUMBER, D.P.W. NUMBER, SPACE PROVIDED ON FORM, FOR AMOUNTS OF SEMI-MONTHLY AND MONTHLY GRANTS UNDER OLD GRANT. STATE AND CITY ALLOTMENT

G.P.A. EMERGENCY ALLOWANCE TICKETS, GRANT AUTHORIZATION
TICKETS, ENTRY TICKETS, CHANGE TICKETS, CUT-OFF TICKETS.

(CONTENTS, ITEM #6 & #12 CONTINUED)

ADDENDA.

TO OLD GRANT AND TOTAL ALSO AMOUNTS OF SEMI-MONTHLY AND MONTHLY NEW GRANT, STATE AND CITY ALLOTMENT TO NEW GRANT AND TOTAL, NAME AND ADDRESS OF CLIENT, FORMER ADDRESS, RACE, NUMBER IN FAMILY (FROM NUMBER OF PERSONS FORMERLY IN FAMILY TO PRESENT NUMBER IN FAMILY.) DATE EFFECTIVE, REMARKS, DATE APPROVED AND SIGNATURE OF FINANCIAL DIVISION EMPLOYEE. G.P.A. CUT-OFF TICKET SHOWS CERTIFICATION BY D.P.W. TO CENTRAL PAYROLL BUREAU THAT THE G.P.A. ALLOWANCE TO THE CLIENT NAMED BELOW ON FORM, HAS BEEN DISCONTINUED IN ACCORDANCE WITH THE RECORD OF THIS DEPARTMENT, C.P.B. NUMBER D.P.W. NUMBER, NAME AND ADDRESS OF CLIENT, AMOUNT OF SEMI-MONTHLY AND MONTHLY GRANT, STATE AND CITY ALLOTMENT TO GRANT AND TOTAL, RACE NAME OF INVESTIGATOR, INCLUSIVE DATE EFFECTIVE, REMARKS, DATE APPROVED AND SIGNATURE OF FINANCIAL DIVISION EMPLOYEE. THESE RECORDS ARE KEPT FOR FUTURE REFERENCE AND CHECKING PURPOSES.

DEPARTMENT OF PUBLIC WELFARE
GENERAL PUBLIC ASSISTANCE
EMERGENCY ALLOWANCE

CENTRAL PAYROLL BUREAU: THE PERSON HEREIN INDICATED HAS MET THE REQUIREMENTS OF THIS DEPARTMENT RELATIVE TO A GENERAL PUBLIC ASSISTANCE EMERGENCY ALLOWANCE, WHICH IS HEREBY CERTIFIED CORRECT FOR PAYROLL PURPOSES.

C. P. B. NO. _____ NAME _____

D. P. W. NO. _____ ADDRESS _____

RACE _____ FAMILY GROUP _____

SEMI-MONTHLY GRANT _____ \$ _____

EFFECTIVE DATE SEMI-MONTHLY GRANT _____

REASON FOR EMERGENCY ALLOWANCE _____

date of
ENTRY ON EMERGENCY PAYROLL ENDING _____

Amount of
EMERGENCY ALLOWANCE

STATE	CITY	TOTAL
1.85	3.25	5.10

REMARKS _____

APPROVED _____

19 _____

FINANCIAL DIVISION

NOTE: THIS EMERGENCY ALLOWANCE TICKET IS TO BE PROMPTLY EXECUTED IN DUPLICATE BY THE DEPARTMENT OF PUBLIC WELFARE. THE ORIGINAL FORWARDED TO THE CENTRAL PAYROLL BUREAU, AND THE DUPLICATE RETAINED FOR RECORD AND FILE.

50.50

2

100.

4/2

~~100~~
~~50~~

$$\begin{array}{r}
 140 \overline{) 101.00} \quad \left(\frac{72}{\quad} \right) \\
 \underline{98.0} \\
 300 \\
 \underline{280} \\
 20 \\
 \underline{140}
 \end{array}$$

50.

100

151

72

DEPARTMENT OF PUBLIC WELFARE

GENERAL PUBLIC ASSISTANCE ENTRY TICKET

CENTRAL PAYROLL BUREAU: The person herein indicated has met the requirements of this department relative to general public assistance allowance which is hereby certified correct for payroll purposes until further notice.

C. P. B. No.....NAME.....

REMARKS:.....

D. P. W. No.....ADDRESS.....

SEMI-MONTHLY GRANT.....STATE \$.....CITY \$.....

No. IN FAMILY.....TOTAL \$.....

MONTHLY GRANT.....\$.....

APPROVED:.....

RACE.....DATE OF BIRTH.....

19.....

DATE EFFECTIVE

(Director Department of Public Welfare)

NOTE: This entry ticket is to be promptly executed in duplicate by the Department of Public Welfare. The original forwarded to the Central Payroll Bureau, and the duplicate retained for record and file.

Central Payroll Bureau Verification

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DEPARTMENT OF PUBLIC WELFARE
**GENERAL PUBLIC ASSISTANCE
CHANGE TICKET**

CENTRAL PAYROLL BUREAU: The general public assistance allowance for the person herein indicated has been changed in accordance with the requirements of this department and is hereby certified correct for payroll purposes until further notice.

	OLD GRANT		NEW GRANT	
	SEMI-MONTHLY		SEMI-MONTHLY	
C. P. B. No.....	STATE \$	CITY \$	STATE \$	CITY \$
D. P. W. No.....	MONTHLY	TOTAL \$	MONTHLY	TOTAL \$
	\$		\$	

NAME.....
NEW ADDRESS.....
FORMER ADDRESS.....
RACE..... No. in Family: From..... to.....
DATE EFFECTIVE.....

REMARKS:.....
.....
.....
APPROVED:..... 19.....

(Director Department of Public Welfare)
Central Payroll Bureau Verification

NOTE: This change ticket is to be promptly executed in duplicate by the Department of Public Welfare. The original forwarded to the Central Payroll Bureau, and the duplicate retained for record and file.

GENERAL PUBLIC ASSISTANCE CUT-OFF TICKET

CENTRAL PAYROLL BUREAU: The general public assistance allowance for the person herein indicated has been discontinued in accordance with the records of this department.

C. P. B. No.....NAME.....	REMARKS HOW SEPARATED }		
D. P. W. No.....ADDRESS.....			
SEMI-MONTHLY GRANT.....STATE \$.....CITY \$.....			
No. IN FAMILY.....TOTAL \$.....			
MONTHLY GRANT.....\$.....			
RACE.....			
INVESTIGATOR.....	APPROVED:.....19.....		
INCLUSIVE DATE EFFECTIVE.....			
<p>NOTE: This cut-off ticket is to be promptly executed in duplicate by the Department of Public Welfare. The original forwarded to the Central Payroll Bureau, and the duplicate retained for record and file.</p>	(Director Department of Public Welfare)		
	Central Payroll Bureau Verification		
	<table border="1"> <tr> <td data-bbox="1138 940 1284 1024"></td> <td data-bbox="1284 940 1430 1024"></td> <td data-bbox="1430 940 1563 1024"></td> </tr> </table>		

Kovana-Niedentohl

(Worker's full name)

4-18-39

(Date)

112

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place.
(Name of building, room number, street address)

1. Title (General Public Assistance Grant Authorization Tickets) "G.P.A. Form #10"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates Feb. 1938 --
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 17 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling See addenda sheet for list of drawers as labeled.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None.
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Grant authorization prepared on four copies, sent to this office for checking against accuracy, after checking copies are their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by sent to Central Payroll Bureau, Dept. of Public Welfare records file, Auditing Dept, one copy filed in this office for future reference; show payroll number, welfare number; check mark in spaces provided opposite Entry, Change, Emergency, Fuel, Ice, Cut-Off; name of client and former address also name of client and new address; amounts of former grant
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued and new grant; amount of one time
emergency payment; number in family before change
also number in family in new grant; date of birth, race,
religion; date issued, date effective; remarks relative
to changes in family status; approvals of (cont. on line 12)

7. Arrangement Numerically by payroll numbers.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Handwritten on printed form
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of drawer 6 1/4" x 9 1/2" x 18" Average 750 per drawer.
(Of record or container. Height, width, thickness or depth. Average number of ~~pages~~ documents)

11. Location by dates and quantities Feb. 1938 to date, 17 drawers on south
wall in room #215.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and containers in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 6 ~~~~~ field supervisor and assistant
director, also initials of Financial Supervisor; descriptions
of old grant and new grant.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

GRANT AUTHORIZATION

CENTRAL PAYROLL BUREAU

112



PAYROLL NO.

WELFARE NO.

GENERAL PUBLIC ASSISTANCE

ENTRY

CHANGE

EMERGENCY

FUEL

ICE

CUT OFF

NAME
(PRINT)ADDRESS
(PRINT)

SEMI-MONTHLY GRANT

STATE

CITY

TOTAL

MONTHLY

\$

\$

\$

\$

TO

NAME
(PRINT)ADDRESS
(PRINT)

SEMI-MONTHLY GRANT

STATE

CITY

TOTAL

MONTHLY

\$

\$

\$

\$

TO

ONE TIME EMERGENCY PAYMENT

\$

NUMBER IN
FAMILY

TO

NUMBER IN
FAMILY

DATE OF BIRTH

RACE

RELIGION

DATE
ISSUED }DATE
EFFECTIVE }

REMARKS:

OLD

785

NEW

8.15

 DELIVER CHECK

APPROVED:

INVESTIGATOR

SUPERVISOR

FIELD SUPERVISOR

ASST. DIRECTOR

FIN. DIV.

INITIALS

General Public Assistance Grant
Authorization Tickets

continued from line 4

addenda sheet

Drawers labeled as follows —

- G.P.A. Form # 10 1 - 999
- G.P.A. Form # 10 1000 - 17999
- G.P.A. Form # 10 1800 - 2599
- G.P.A. Form # 10 2600 - 3399
- G.P.A. Form # 10 3400 - 4099
- G.P.A. Form # 10 4100 - 4599
- G.P.A. Form # 10 4600 - 5099
- G.P.A. Form # 10 5100 - 5599
- G.P.A. Form # 10 5600 - 5999
- G.P.A. Form # 10 6000 - 6599
- G.P.A. Form # 10 6600 - 7199
- G.P.A. Form # 10 7200 - 7999
- G.P.A. Form # 10 8000 - 8699
- G.P.A. Form # 10 8700 - 9299
- G.P.A. Form # 10 9300 - 9999
- G.P.A. Form # 10 10000 - 10899
- G.P.A. Form # 10 10900 - 12799

KOVAKA-NIEDENTOHLE

(Worker's full name)

(Date)

113-A

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

BALTIMORE CITY State **MARYLAND.**

Name of agency or office **DEPARTMENT OF PUBLIC WELFARE - FINANCIAL DIV.**
(Office of custody) (Office which made the record, if different)

Address of office of custody **# 327 ST. PAUL PLACE.**
(Name of building, room number, street address)

1. Title **(G.P.A. PAY ROLL CARD RECORD.)**
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates **1935 - - .**
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity **8, STEEL FILE DRAWERS**
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling **FOR LABELING SEE ITEM #12.**
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records **NONE.**
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents **CONTAINS RECORD CARDS FOR ACTIVE AND**
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,

CLOSED CASES OF CLIENTS ON G.P.A. PAY ROLL.
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by

THE ACTIVE CASE CARDS ARE USED FOR CHECK-
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

ING, AMOUNT OF GRANT AGAINST ORIGINAL

GRANT, FOR ALL ITEMS OF RELIEF GRANTED

EXCEPTING, ITEM-FUEL, ALSO FOR CHECKING

ORIGINAL GRANT FOR PAY ROLL NUMBERS, AND

NEW ADDRESS. THE CLOSED CASE CARDS ARE KEPT

6. Contents—continued FOR PURPOSE OF CHECKING AGAINST PAY ROLL NUMBERS, AMOUNTS AND NEW ADDRESSES IN RE-ENTRY CASES (SAME PAY ROLL NUMBERS ARE ISSUED IN RE-ENTRY CASES). CARD SHOWS AMOUNT OF GRANT, NAME AND ADDRESS OF CLIENT NUMBER OF -
(CONTINUED TO ITEM #12, BOTTOM OF PAGE)
7. Arrangement ALPHA., BY NAME OF CLIENT
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing TYPED ON PRINTED CARDS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OFF FILE DRAWER; 4" X 5 1/2" X 20", 6,000 CARDS PER DRAWER.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities ON TOP OF DESK, NEAR EAST WALL OF ROOM # 215. (G.P.A. CLERK'S DESK).
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
(CONTINUED FROM ITEM #4).
Whether record is known to have been kept earlier than dates shown in item 2)
1, DRAWER LABELED-A-B 1 DRAWER LABELED-RU-TO
1, " " - C-E. 1, " " - TU-Z.
1, " " - F-HI.
1, " " - HO-K.
1 " " - L-MOR.
1, " " - MU-ROL.
13. ~~(For use in Florida.)~~ Early imprints NOTE: G. P. A. STANDS FOR GEN- ERAL PUBLIC ASSISTANCE.
(Author) (Publisher)
(Place of publication) (Date of publication)

(CONTINUED FROM ITEM #6)
- PERSONS IN FAMILY GROUP AND CASE NUMBER.

KOVAKA-NIEDENTOHLE 4-17-39

(Worker's full name)

(Date)

113-B

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~City~~ BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title (G.P.A. GRANT AUTHORIZATION CARD RECORD)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
(ACTIVE CASES).
or both)

2. Dates 1938--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 3, STEEL FILE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling FOR LABELING, SEE ITEM #12.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another
record. Explain why records are missing, if possible)

6. Contents CONTAINS RECORD CARDS FOR ACTIVE CASES
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
OF CLIENTS ON G.P.A. THE CARDS ARE USED FOR
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
CHECKING AMOUNT OF GRANT AGAINST ORIGINAL
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
GRANT FOR FUEL ALSO FOR CHECKING AGAINST
PAY ROLL NUMBERS AND NEW ADDRESSES CARD
SHOWS AMOUNT OF GRANT FOR FUEL, THE ORIGINAL
DATE OF GRANT, NAME AND ADDRESS OF CLIENT,
NUMBER OF PERSONS IN FAMILY GROUP AND CASE

6. Contents—continued

7. Arrangement NUMERICALLY, BY CASE NUMBER.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPED ON PLAIN CARDS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF FILE DRAWER: 4" X 5 1/4" X 15", APPROX. 4,170 CARDS
(Of record or container. Height, width, thickness or depth. Average number of pages or documents) |
PER DRAWER OR APPROX. 12,500 CARDS IN ALL.

11. Location by dates and quantities ON TOP OF DESK AGAINST NORTH WALL
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
IN ROOM #215. (G.P.A. CLERK'S DESK).

12. Other information CONDITION OF RECORDS & EQUIPMENT GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
(CONTINUED FROM ITEM #4.)

Whether record is known to have been kept earlier than dates shown in item 2)

- 1, DRAWER LABELED - FUEL G.P.A. - 1938-1939
- 1, " " " - FUEL G.P.A. - 1938-1939.
- 1, " " " - FUEL G.P.A. - 1938-1939.

NOTE. G.P.A., STANDS FOR - GENERAL PUB-
LIC ASSISTANCE.

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

KOVAKA - NIEDENTOHL, 9-17-39.

(Worker's full name)

(Date)

113-C

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~██████~~ BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE - FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title (G.P.A. GRANT AUTHORIZATION CARD RECORD).
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
(CLOSED CASES).

2. Dates 1938--.
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2 STEEL FILE DRAWERS.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling FOR LABELING SEE ITEM #12.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINS CARD RECORD OF AMOUNTS FOR FUEL OF PERSONS CUT OFF FROM G.P.A. THE CARDS ARE KEPT FOR PURPOSE OF CHECKING AGAINST PAY ROLL NUMBERS, AMOUNTS AND NEW ADDRESSES IN RE-ENTRY CASES, SAME PAY ROLL NUMBERS ISSUED IN RE-ENTRY CASES. CARD SHOWS AMOUNT OF GRANT FOR FUEL, THE ORIGINAL DATE OF GRANT, NAME AND ADDRESS OF CLIENT NUMBER OF PERSONS IN

6. Contents—continued FAMILY GROUP AND CASE NUMBER.
CARD ALSO SHOWS WORD, CUT OFF, WITH EFFECTIVE DATE, STAMPED IN RED.
7. Arrangement NUMERICALLY, BY CASE NUMBER.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing TYPED ON PLAIN CARDS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF FILE DRAWER: 4" X 5 1/4" X 15". APPROX. 6,000
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
CARDS IN EACH DRAWER OR APPROX 12,000 CARDS IN ALL.
11. Location by dates and quantities ON TOP OF DESK AGAINST NORTH
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
WALL IN ROOM # 215. (G.P.A. CLERK'S DESK).
12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
(CONTINUED FROM ITEM #4).
Whether record is known to have been kept earlier than dates shown in item 2)
1, DRAWER LABELED - CLOSED - G.P.A. - 1-4399.
1, " " - CLOSED G.P.A. FUEL-4400-12000
- NOTE: G.P.A., STANDS FOR, GENERAL PUBLIC ASSISTANCE.
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)
- _____
(Place of publication) (Date of publication)

Kovska-Niedentohl

(Worker's full name)

4-17-39

(Date)

114-A

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place - Room 215
(Name of building, room number, street address)

1. Title (Payroll Record of Fuel Grants)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
"Closed ADC Fuel"
or both)

2. Dates 1938--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Drawers labeled Closed ADC Fuel 1-5399; (Closed ADC Fuel 5400-7500.
(Explain fully; years; numbers; letters / number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Card record of amounts granted for fuel of persons cut-off from assistance kept for the purpose of checking against payroll numbers, amounts and new addresses in re-entry cases; same payroll numbers are issued in re-entry cases; cards show category of relief, Central Payroll Bureau number, Department of Public Welfare number, name and address of client; entry date; semi-monthly amount; dates effective of new addresses,
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued dates effective and new amounts;
stamped across card Cut-Off with date effective.

7. Arrangement Numerically by payroll numbers
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on plain cards
(Handwritten, Handwritten printed form, Handwritten printed head, Typed, Typed printed form, Typed printed head, Printed, Photostat, Other. Give months and years covered by each kind of writing)

10. Size of drawer 4"x5 1/4"x15" Average 3750 per drawer
(Of record or container. Height, width, thickness or depth. Average number of ~~pages~~ documents)

11. Location by dates and quantities 1938 to date, 2 drawers on top of
desk near north wall in room #215.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and containers in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

Note: A. D. C. denotes Aid To Dependent Children.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Kovaka: Niedentohl

(Worker's full name)

4-17-39

(Date)

114-B

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place. - Room 215
(Name of building, room number, street address)

1. Title (Payroll Record of Fuel Grants - Active)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
"Fuel A.D.C. 1938-1939"
or both)

2. Dates 1938--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 3 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling 3 drawers labeled Fuel A.D.C. 1938-1939
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Card record of amounts granted for fuel to relief clients, kept for purpose of checking against their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached
grant authorization tickets; show category of relief, Central Payroll Bureau number, Department of Public Welfare number, name and address of client, entry date, semi-monthly amount, dates effective of new addresses, dates effective and new amounts;

6. Contents—continued stamped across card Cut-Off with date effective.

7. Arrangement Numerically by payroll numbers.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on plain cards.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of drawer 4" x 5 1/4" x 15" Average 2630 per drawer
(Of record or container. Height, width, thickness or depth. Average number of ~~records~~ documents) cards

11. Location by dates and quantities 1938 to date, 3 drawers on top of desk near north wall in room #215.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and containers in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

Note: A. D. C. denotes Aid To Dependent Children

13. (For use in Florida.) Early imprints
(Author) (Publisher)

(Place of publication)

(Date of publication)

Kovaka-Niedentohl
(Worker's full name)

4-27-39
(Date)

114-C
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place
(Name of building, room number, street address)

1. Title (Aid To Dependent Children Grant Authorization Tickets)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates Jan. 1937 - Dec. 1937
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 4 Cardboard transfer cases
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling See line 12 for labeling
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Grant authorization prepared on four copies, sent to this office for checking against accuracy, after checking their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by copies are sent to Central Payroll Bureau for payroll purposes; D.P.W. Records file, Auditing Dept. for auditing purposes and one copy filed in this office for future reference; show payroll number, welfare number, check mark in squares provided opposite Entry, Change, Emergency, Fuel, Ice, Cut-Off; name and address of client and original
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

Kovach-Niedentohl

(Worker's full name)

4-13-39

(Date)

114-0

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place - Room 215
(Name of building, room number, street address)

1. Title (Aid To Dependent Children Grant Authorizations)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1938 --
(Earliest and latest dates; missing dates: Show exact date of breaks)

3. Quantity 11 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Drawers labeled A.D.C. with incl. payroll numbers (See line 12 for list of drawers as labeled)
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Grant authorization prepared on four copies, sent to this office for
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,

checking against accuracy, after checking copies are sent to
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by

Central Payroll Bureau, D.P.W. Records file, Auditing Dept, one copy filed in
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

this office for future reference purposes; show payroll number, Welfare number,

check mark in squares provided opposite Entry, change,

Emergency, Fuel, Ice, Cut Off; name and address of client

and original grant also name and address of client

and new grant; amount of one time emergency pay-

6. Contents—continued ment; number in family of original grant also number in family in new grant; date of birth, race, religion; date issued; date effective; remarks respecting changes in family status; approvals of investigator and director; initials of officer in Financial Division; (cont. on line 12)
7. Arrangement Numerically by Central Payroll Bureau numbers.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing No
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Handwritten on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of drawer 6'4" x 9" x 17 1/2" Average 725 per drawer.
(Of record or container. Height, width, thickness or depth. Average number of ~~per~~ documents)
11. Location by dates and quantities 1938 to date, 11 drawers on west wall in room # 215.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information Records and containers in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
continued from line 6 ~~~~~ descriptions of old grant and new grant.
(Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 4 ~~~~~ Drawers labeled as follows
- | | | |
|---------------|---------------|---------------|
| ADC 1-799 | ADC 3400-4099 | ADC 5800-6299 |
| ADC 800-1699 | ADC 4100-4699 | ADC 6300-6799 |
| ADC 1700-2599 | ADC 4700-5299 | ADC 6800-7999 |
| ADC 2600-3399 | ADC 5300-5799 | |
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

GRANT AUTHORIZATION

CENTRAL PAYROLL BUREAU

PAYROLL NO. _____ WELFARE NO. _____ **AID TO DEPENDENT CHILDREN**

ENTRY | CHANGE | EMERGENCY | FUEL | ICE | CUT OFF

NAME (PRINT)

NAME (PRINT)

ADDRESS (PRINT)

ADDRESS (PRINT)

SEMI-MONTHLY GRANT			
STATE	CITY	TOTAL	MONTHLY
\$	\$	\$	\$

SEMI-MONTHLY GRANT			
STATE	CITY	TOTAL	MONTHLY
\$	\$	\$	\$

ONE TIME EMERGENCY PAYMENT \$

OLD

NUMBER IN FAMILY	TO	NUMBER IN FAMILY
DATE OF BIRTH		RACE RELIGION
DATE ISSUED }		DATE EFFECTIVE }

REMARKS:

NEW

DELIVER CHECK

APPROVED:	FIELD SUPERVISOR	FIN. DIV.
INVESTIGATOR		
SUPERVISOR	ASST. DIRECTOR	INITIALS

KOVAKA-NIEDENTOHLE 4-14-39

(Worker's full name)

(Date)

115
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE - FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title (AID TO DEPENDENT CHILDREN PAYROLL RECORD)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1936--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 4 STEEL FILE DRAWERS.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling FOR LABELING SEE ITEM #12.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS AID TO DEPENDENT CHILDREN RECORD CARDS. THESE CARDS ARE USED FOR PURPOSE OF CHECKING AGAINST GRANT AUTHORIZATIONS, COVERING CHANGE OF ADDRESS, DATES EFFECTIVE AND NEW AMOUNTS. THE CARD SHOWS CATEGORY OF RELIEF CENTRAL PAY ROLL NUMBER, DEPARTMENT OF PUBLIC WELFARE NUMBER, NAME AND ADDRESS OF CLIENT, ENTRY DATE, ORIGINAL SEMI-MONTHLY

6. Contents—continued AMOUNT, NEW ADDRESSES, DATES EFFEC-
TIVE AND NEW AMOUNTS.

7. Arrangement ALPHA. BY NAME OF CLIENT.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPED ON PRINTED CARDS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF FILE DRAWER: 9" X 5 1/2" X 22"; APPROX. 9,600 CARDS
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
PER DRAWER OR APPROX. 18,900 CARDS IN ALL.

11. Location by dates and quantities ON TOP OF DESK, IN CENTER OF
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
ROOM #215. (A.D.C. CLERK'S DESK).

12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
(CONTINUED FROM ITEM #4.)

Whether record is known to have been kept earlier than dates shown in item 2)

- 1, DRAWER ER L A B E L E D - A D C - A - E.
- 1, " " " - A D C - F - K.
- 1, " " " - A D C - L - R.
- 1, " " " - A D C - S - Z.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Kovaka-Niedentohl
(Worker's full name)

4-12-39
(Date)

116
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland
Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place.
(Name of building, room number, street address)

1. Title (Aid To Dependent Children Entry Tickets - Change Tickets - Cut Off Tickets)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1936--
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 11 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling See line 12 for list of drawers as labeled.
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)
6. Contents Copies of entry tickets, change tickets and cut-off tickets sent to this office and to Central Payroll Bureau; Financial Division copies are checked against grant authorizations; errors then filed for future reference; entry ticket shows Central Payroll Bureau number, Department of Public Welfare number, name and address of relief client, amounts of semi-monthly grant from state and city; number in family group
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued and total amount of grant, amount of monthly grant, race, date effective; remarks respecting the requirements to receive allowance; date approved and signature of the Director of Department of Public Welfare; date of Central Payroll Bureau verification; ^(cont. on addenda sheet)
7. Arrangement Alph. by names of relief clients.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing None.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Typed and handwritten on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of drawer 6 1/4" x 9" x 17 1/2" Average 4500 Tickets per drawer.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities 1936 to date, 11 steel file drawers on west wall in room #215.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information Records and containers in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
Continued from line 6 ~~~~~~~~~ Drawers labeled as follows,
Whether record is known to have been kept earlier than dates shown in item 2)
- | | |
|---------------------------|--------|
| Aid To Dependent Children | A-Br |
| " | Bu-Cr |
| " | D-Fr |
| " | G-Hdr |
| " | He-Jo |
| " | K-Lo |
| " | Mc-Ni |
| " | O-Ro |
| " | S-Sz |
| " | T-V |
| " | W-XYZ. |
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)
(Place of publication) (Date of publication)

(Aid To Dependent Children Entry Tickets -
Change Tickets - Cut-Off Tickets)

change ticket shows name of investigator; Central Payroll Bureau number, Department of Public Welfare number; amounts of state and city semi-monthly old grant, amount of monthly old grant and total; amounts of state and city semi-monthly new grant, amount of monthly new grant and total; name and address of client, former address, race number of persons in family group during original grant and at present; date effective; remarks respecting requirements in accordance with Welfare Department for payroll purposes; date approved and signature of Director of the Department of Public Welfare; date of Central Payroll Bureau verification; cut-off ticket shows case worker number and name; name and address of relief client; Central Payroll Bureau number, Department of Public Welfare number; per annum allowance, semi-monthly rate, inclusive date, race, date issued; remarks relate reasons for discontinuing allowance; number in family; date approved and signature of Director of the Department of Public Welfare; date of Central Payroll Bureau verification.

DEPARTMENT OF PUBLIC WELFARE

Aid to Dependent Children Allowance ENTRY TICKET

CENTRAL PAYROLL BUREAU: The person herein indicated has met the requirements of this department relative to aid to dependent children allowance which is hereby certified correct for payroll purposes until further notice.

C. P. B. No.....NAME.....

REMARKS:.....

D. P. W. No.....ADDRESS.....

SEMI-MONTHLY GRANT.....STATE \$.....CITY \$.....

FAMILY GROUP.....TOTAL \$.....

APPROVED:.....

MONTHLY GRANT.....\$.....

.....19.....

RACE

(Director Department of Public Welfare)

DATE EFFECTIVE

Central Payroll Bureau Verification

NOTE: This entry ticket is to be promptly executed in duplicate by the Department of Public Welfare. The original forwarded to the Central Payroll Bureau, and the duplicate retained for record and file.

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Investigator.....

DEPARTMENT OF PUBLIC WELFARE

116

Aid to Dependent Children Allowance CHANGE TICKET

CENTRAL PAYROLL BUREAU: The aid to dependent children allowance for the person herein indicated has been changed in accordance with the requirements of this department and is hereby certified correct for payroll purposes until further notice.

	OLD GRANT		NEW GRANT	
	SEMI-MONTHLY		SEMI-MONTHLY	
C. P. B. No.....	STATE \$	CITY \$	STATE \$	CITY \$
D. P. W. No.....	MONTHLY	TOTAL \$	MONTHLY	TOTAL \$

NAME.....

NEW ADDRESS.....

FORMER ADDRESS.....

RACE..... Family Group: From..... to.....

DATE EFFECTIVE.....

REMARKS:.....

.....

.....

APPROVED:..... 19.....

(Director Department of Public Welfare)
Central Payroll Bureau Verification

NOTE: This change ticket is to be promptly executed in duplicate by the Department of Public Welfare. The original forwarded to the Central Payroll Bureau, and the duplicate retained for record and file.

DEPARTMENT OF PUBLIC WELFARE

116

Aid to Dependent Children Allowance

CUT-OFF TICKET

CENTRAL PAYROLL BUREAU: The aid to dependent children allowance for the person herein indicated has been discontinued in accordance with the records of this department.

NAME.....	C. P. B. No.....	REMARKS HOW SEPARATED }
ADDRESS.....	D. P. W. No.....	
PER ANNUM ALLOWANCE.....	\$.....	NO. IN FAMILY..... APPROVED:.....
SEMI-MONTHLY RATE.....	\$.....	
INCLUSIVE DATE.....	.....19.....	(Director Department of Public Welfare)
RACE.....		Central Payroll Bureau Verification
DATE ISSUED.....		

NOTE: This cut-off ticket is to be promptly executed in duplicate by the Department of Public Welfare. The original forwarded to the Central Payroll Bureau, and the duplicate retained for record and file.

Kovack-Niedentohl
(Worker's full name)

4-26-39
(Date)

117-A
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland
Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place
(Name of building, room number, street address)

- Title (Assistance To Blind Grant Authorization
Tickets - Old Age Grant Authorization Tickets)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
- Dates 1936-1937
(Earliest and latest dates; missing dates. Show exact date of breaks)
- Quantity 1 Bundle
(Number of volumes; file drawers; file boxes; bundles; other)
- Labeling See line 12 for labeling.
(Explain fully; years; numbers; letters; number of records so labeled)
- Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)
- Contents Assistance To Blind Grant Authorizations are packed
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record.
in same bundle containing Old Age Assistance Grant
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
Authorizations (refer to Report labeled #108); records
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
are kept for future reference purposes; Assistance To Blind
Grant Authorization Ticket shows payroll number; welfare
number; category of relief; check mark in squares
provided opposite Entry, Change, Emergency, Fuel, Ice,
Cut-Off; name of client and former address, also

6. Contents—continued Name of client and new address; amounts of former grant and new grant; amount of one time emergency payment; number in family during original grant, number in family in new grant; date of birth, race, religion; date issued; date effective; (cont. on line 12)

7. Arrangement Numerically by payroll numbers.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Handwritten on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of bundle $5\frac{1}{2} \times 9 \times 7$ 560 A.T.B. Grants
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
889 O.A.A. Grants

11. Location by dates and quantities 1936-1937, 1 bundle on west wall in storage room #206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

continued from line 4 ~~num~~ Bundle labeled Old Age Grant Authorizations - 1936-1937 - C.P.B. Nos. 8101-8990. Assistance To Blind Grant Authorizations - 1936-1937 - C.P.B. Nos. 3-563.

Continued from line 6 ~~num~~ remarks relative to changes in family status, etc.; names of officers approving grant,

13. ~~(Case in Florida)~~ ~~Final reports~~ initials of officer in Financial Division signifying check for errors have been made; description of old grant and new grant.
(Author) (Publisher)
(Place of publication) (Date of publication)

PRINTING OFFICE O 16-6410

Note: Old Age Assistance Grant Authorizations, see report #108 for description of record.

Finance
117456
4

GRANT AUTHORIZATION

CENTRAL PAYROLL BUREAU

PAYROLL NO.

WELFARE NO.

ASSISTANCE TO THE BLIND

ENTRY

CHANGE

EMERGENCY

FUEL

ICE

CUT OFF

NAME (PRINT)

ADDRESS (PRINT)

TO

NAME (PRINT)

ADDRESS (PRINT)

SEMI-MONTHLY GRANT

STATE	CITY	TOTAL	MONTHLY
\$	\$	\$	\$

SEMI-MONTHLY GRANT

STATE	CITY	TOTAL	MONTHLY
\$	\$	\$	\$

TO

ONE TIME EMERGENCY PAYMENT

\$

OLD

NUMBER IN FAMILY

TO

NUMBER IN FAMILY

DATE OF BIRTH

RACE

RELIGION

DATE ISSUED

DATE EFFECTIVE

REMARKS:

NEW

DELIVER CHECK

APPROVED:

INVESTIGATOR

SUPERVISOR

FIELD SUPERVISOR

ASST. DIRECTOR

FIN. DIV.

INITIALS

Kovaka-Niedentohl
(Worker's full name)

4-27-39
(Date)

117-B
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland
Name of agency or office Department of Public Welfare - Financial Division.
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place, - (Room 215)
(Name of building, room number, street address)

1. Title (Assistance To Blind Grant Authorization Tickets)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1938--
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 1 steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling Drawer labeled "Memos A-2"
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Grant authorization prepared on four copies, sent to this office to check for accuracy, after checking their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by proper copies are sent to Central Payroll Bureau, Department of Public Welfare records file, Auditing Dept., one copy retained in this office for future references; show Payroll number; Welfare number; check mark in squares provided opposite Entry, Change, Emergency, Fuel, Ice, Cut-Off; name of client and former address, also name of client and new address; amounts
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued of former grant and new grant; amount of one time emergency payment; number in family during original grant, number in family in new grant; date of birth; race; religion; date issued; date effective; remarks relating changes desired; signatures of (cont. on line 12)

7. Arrangement Numerically by Payroll numbers.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Handwritten on printed
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of drawer 6 1/4" x 9 1/8" Approx 700 tickets
(Of record or container. Height, width, thickness or depth. Average number of ~~pages~~ documents)

11. Location by dates and quantities 1938 to date, 1 drawer on west wall in room # 215.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)
Continued from line 6 approving officers and initials of officer in Financial Division; descriptions of old grant and new grant.

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

Kovako-Niedentohl
(Worker's full name)

4-14-39
(Date)

118
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland
Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place.
(Name of building, room number, street address)

- Title (Assistance To Blind Payroll Record - Cut Off's)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
- Dates 1935--
(Earliest and latest dates; missing dates. Show exact date of breaks)
- Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)
- Labeling Drawer labeled "Blind A-2"
(Explain fully; years; numbers; letters; number of records so labeled)
- Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)
- Contents Card record used in checking against grant
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
authorizations respecting cut-off from assistance, also used for checking when persons are re-assigned same payroll numbers of former client; show category of assistance, Central Payroll Bureau number, Department of Public Welfare number, name and address of client, entry date and amount of semi-monthly grant, new addresses, dates effective;

6. Contents—continued amount of last grant, also stamped
Cut-Off with date.

7. Arrangement Alph. by names of clients
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on plain and on printed cards.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of drawer 4"x5 1/2"x22" Approx 1600 cards.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1935 to date, 1 drawer on top of desk
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
in center of room # 215.

12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication)

(Date of publication)

Case Worker No.....Name.....

DEPARTMENT OF PUBLIC WELFARE

118

ASSISTANCE TO THE BLIND CUT-OFF TICKET

CENTRAL PAYROLL BUREAU: The assistance to the blind allowance for the person herein indicated has been discontinued in accordance with the records of this department.

C. P. B. No.....NAME.....

D. P. W. No.....ADDRESS.....

No. IN FAMILY.....

SEMI-MONTHLY RATE..... \$.....

PER ANNUM ALLOWANCE..... \$.....

RACE.....

DATE EFFECTIVE.....

REMARKS
HOW SEPARATED }

APPROVED:..... 19.....

(Director Department of Public Welfare)

Central Payroll Bureau Verification

NOTE: This cut-off ticket is to be promptly executed in duplicate by the Department of Public Welfare. The original forwarded to the Central Payroll Bureau, and the duplicate retained for record and file.

Kriva ka-Niedentohl
(Worker's full name)

5-1-39
(Date)

119-A
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division.
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place.
(Name of building, room number, street address)

1. Title (Dispensary Visit Slips)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities)

or both)

2. Dates 1936
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2 Bundles.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling 1 Bundle labeled Baltimore Eastern Dispensary 1936; (cont. on line 12)
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Visit slips to Medical Dispensaries of persons that have received treatments in the Dispensary, also "out visit slips" of persons that have been treated by visiting Doctor from the Dispensary; prepared by the Dispensary and sent to the Department of Public Welfare each month; slips are checked against the number of persons received treatments as per agreement between the Dispensary and the Department of Public Welfare; the agreement covers
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued payment from the Dept. of Public Welfare for a certain number of persons treated by the Dispensary; kept as an office record also for preparing annual report; visit slip to Dispensary shows surname and given name of recipient; address; race, sex, name of Dispensary, date of (cont. on line 12)

7. Arrangement Chron. by date of visit
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Handwritten on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of bundle 10"X10"X5" Average 6000 per bundle.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1936, 2 Bundles on east wall in storage room #206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records are in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

continued from line 4 ~~~~~ 1 bundle labeled

Baltimore General Dispensary 1936.

continued from line 6 ~~~~~ treatment; certification of examining physician; out visit slips show surname and given name of recipient; address; color, source of application, date of visit, number of prescriptions filled and

13. ~~(Donnerstag, Florida)~~ Early imprints certification of examining physician.
(Author) (Publisher)

(Place of publication)

(Date of publication)

KOVAKA-NIEDENTOHL. 4-27-39 119-B
(Worker's full name) (Date) (Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title "DISPENSARY VISIT SLIPS" - "OUT-VISITS"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1937-1938.
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 13, PASTEBOARD BOXES.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling FOR LABELING SEE ADDENDA.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS VISIT SLIPS TO MEDICAL DISPENSARIES
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by COVERING TREATMENT RECEIVED BY RESIDENTS. each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached) THESE CLIENTS ARE CERTIFIED BY EXAMINING PHYSICIAN TO BE PROPER PATIENTS HAVING RECEIVED TREATMENT. AFTER TREATMENT HAS BEEN GIVEN THE SLIP IS MADE OUT AND SENT TO FINANCIAL DIVISION AND IS KEPT IN OFFICE FOR FUTURE REFERENCE

6. Contents—continued ALSO USED IN PREPARING ANNUAL REPORT.
"DISPENSARY SLIP," SHOWS SURNAME AND GIVEN
NAME OF PERSON, ADDRESS, RACE AND SEX, NAME OF
DISPENSARY AND DATE OF TREATMENT. "OUT VISIT,"
SLIPS SHOW SURNAME AND GIVEN NAME OF —
(CONTINUED TO ITEM #12)
7. Arrangement CHRONO. BY DATE OF VISIT.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing HAND WRITTEN ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF BOX; 3 1/2" X 5 1/2" X 9 3/4". APPROX. 1000 DISPENSARY
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
SLIPS AND APPROX. 150, OUT VISIT SLIPS, PER BOX, OR
APPROX. 14,950 SLIPS IN ALL
11. Location by dates and quantities ON WOODEN SHELF AGAINST EAST
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
WALL OF RECORD STORE ROOM, ROOM # 206.
12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)
(CONTINUED FROM ITEM #6). — PERSON, ADDRESS,
COLOR, SOURCE OF APPLICATIONS, DATE OF VISITS
AND NUMBER OF PRESCRIPTIONS FILLED.
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)
(Place of publication) (Date of publication)

“DISPENSARY VISIT SLIPS - “OUT VISITS.”

(LABELING - AS SHOWN BELOW.)

ADDENDA.

- 1, BOX LABELED - { “D.P.W. FINANCIAL DIV.”
“BALTIMORE GENERAL DISPENSARY SLIPS 1937”
- 1, BOX LABELED - { “BALTO. GENERAL.”
“MARCH 1937 TO JULY 1937.”
- 1, BOX LABELED - { “BALTO. GENERAL.”
“AUG. 1937 TO DEC. 1937.”
- 1, BOX LABELED - { “FINANCIAL DIV. BALTO. GENERAL DISPENSARY”
“SLIPS 1938 BOX #1.”
- 1, BOX LABELED - { “FINANCIAL DIV. BALTO. GENERAL DISPENSARY”
“SLIPS 1938 BOX #2.”
- 1, BOX LABELED - { “FINANCIAL DIV. BALTO. GENERAL DISPENSARY”
“SLIPS 1938 BOX #3.”
- 1, BOX LABELED - { “D.P.W. FINANCIAL DIV. BALTO. EASTERN”
“DISPENSARY SLIPS - 1937.”
- 1, BOX LABELED - “BALTO. EASTERN MARCH 1937 - JUNE 1937”
- 1, BOX LABELED - “BALTO. EASTERN JULY 1937 - NOV. 1937”
- 1, BOX LABELED - “BALTO. EASTERN - DEC. 1937”
- 1, BOX LABELED - { “FINANCIAL DIV. BALTO. EASTERN DISPENSARY”
“SLIPS 1938 BOX #1.”
- 1, BOX LABELED - { “FINANCIAL DIV. BALTO. EASTERN DISPENSARY”
“SLIPS 1938 BOX #2.”
- 1, BOX LABELED - { “FINANCIAL DIV. BALTO. EASTERN DISPENSARY”
“SLIPS 1938 BOX #3.”

Kovako-Niedentohl
(Worker's full name)

5-3-39
(Date)

120-A
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place
(Name of building, room number, street address)

1. Title "Purchase Orders and Emergency Cash Payrolls."
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both) (Purchase Orders)

2. Dates 1938
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Cardboard box
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Box labeled "Purchase Orders and Emergency Cash Payrolls - 1938."
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Purchase Orders filed in front of box containing Emergency Cash Payrolls, kept as an office record of their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by purchases made of household necessities, clothing, fuel, etc., for relief clients; show name and address of vendor, date of purchase order, name of place where delivery is to be made; date delivery promised; purchase order number; department number; requisition number; comptrollers symbol; cost account numbers; work order number; quantity, unit
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record. Each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued and description of articles; price per unit; bottom of sheet shows date and quantity of material received; description of articles, date receiving notice forwarded; remarks relating the condition of material when received.

7. Arrangement Chron. by dates of Purchase Orders.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of box 11" x 12" x 24" Approx. 3000 purchase orders
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1938, 1 box on east wall in storage room #206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and container in good condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication)

(Date of publication)

Kovaka-Niedentohl
(Worker's full name)

5-4-39
(Date)

120-B
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place (Room 206)
(Name of building, room number, street address)

1. Title "Purchase Orders and Emergency Cash Payrolls"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
(Emergency Cash Payrolls)
2. Dates 1938
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 1 Cardboard box
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling Box labeled "Purchase Orders and Emergency Cash Payrolls - 1938"
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)
6. Contents Emergency Cash Payrolls filed in same box
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
containing Purchase Orders; kept as an office record of petty cash emergency relief expenditures; the envelopes marked, showing inclusive dates of payroll, category of relief and amounts of payrolls, also total amount for period; consists of paid emergency cash vouchers, records of requests for emergency allowances, copies of vouchers for

6. Contents—continued re-imbursements, Department of Public Welfare Emergency Cash Payrolls; also adding machine ribbons showing amounts taken from vouchers and checked against the payrolls.

7. Arrangement Chron. by dates of payroll periods - under category of relief.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on printed forms and plain paper also handwritten on ruled paper.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of box 11" x 12" x 24" Approx. 56 envelopes.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1938, 1 box on east wall in storage room #206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and containers in good condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication)

(Date of publication)

KOVANA-NIEDENTOHL 4-27-39

(Worker's full name)

(Date)

121

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~██████~~ BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title "CARD REPORTS OF JUVENILE COURT MINORS."
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1937 (inc.)
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 3, PASTE BOARD BOXES.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling FOR LABELING; SEE ADDENDA SHEET.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS CARD REPORTS OF MINORS WHO HAVE
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
BEEN COMMITTED TO VARIOUS REFORMATORIES AND
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
INDUSTRIAL SCHOOLS, AND ARE KEPT FOR OFFICE
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
FUTURE REFERENCE PURPOSE. REPORT SHOWS; NAME
OF CHILD, DATE DISCHARGED, TO WHOM DISCHARGED,
ADDRESS, DATE PAROLED, TO WHOM PAROLED, (HIS OR
HER) ADDRESS, DATE ESCAPED, DATE OF WRIT OF
HABEAS CORPUS, ON REVERSE SIDE OF CARD

6. Contents—continued SHOWS, TOWHOM RELEASED AND THEIR ADDRESS, DATE SENT TO HOSPITAL, PARENT'S NEW ADDRESSES, OTHER CHANGES OF ADDRESS, PARENT'S NEW NAMES, (IF REMARRIED) AND SIGNATURE OF SUPERINTENDENT OF INSTITUTION, D.P.W. REPORTS

7. Arrangement CHRONO. BY DATE OF DISCHARGE OR PAROLE.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN ON PRINTED CARDS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF BOX; 3 1/2" X 5 1/2" X 9 3/4". APPROX. 900 CARDS IN EACH BOX, OR APPROX. 1825 CARDS IN ALL.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities ON WOODEN SHELF AGAINST EAST WALL OF RECORD STORE ROOM, ROOM #206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)
(CONTINUED FROM ITEM #6) — FROM ST. MARYS INDUSTRIAL SCHOOL, SHOWS NAME AND ADDRESS OF CHILD, AGE, DATE OF BIRTH, DATE RECEIVED IN INSTITUTION, PERIOD OF COMMITMENT, HOW COMMITTED (JUVENIL COURT), OFFENCE, SQUARES, PROVIDED FOR CHECK MARK, SHOWING IF DISCHARGED, PAROLED, RELEASED HOSPITAL, OR ESCAPED, DATE RETURNED TO INSTITUTION,

13. (For use in Florida.)—Early imprints NAME AND ADDRESS TOWHOM PAROLED OR RELEASED TO, ALSO DATE RELEASED OR PAROLED —
(Author) (Publisher)
(Place of publication) (Date of publication)

NOTE: FOR CONTINUANCE OF CONTENTS, AND LABELING—SEE ADDENDA SHEET ATTACHED.

"CARD REPORTS OF JUVENILE COURT MINORS"

(CONTENTS, ITEMS #6, & #12 CONTINUED)

APPEND A.

DATE OF HABEAS CORPUS, SQUARES ARE ALSO PROVIDED ON CARD, FOR CHECK MARK, SHOWING IF RECOMMITTED OR PAROLE VIOLATION, WITH DATE AND ALSO INCLUSIVE DATES OF EXTENDED COMMITMENT.

LABELING, ITEM #4. AS BELOW.

-1937.-

"REFORMATORY CARDS."

"MARYLAND TRAINING SCHOOL FOR BOYS."

1 BOX LABELED "HOUSE OF REFORMATION AND

CHELTENHAM SCHOOL FOR BOYS"

"FINANCIAL DIV."

D. P. W.

-1937.-

"REFORMATORY CARDS."

"HOUSE OF GOOD SHEPHERD, FOR WHITE GIRLS."

"HOUSE OF GOOD SHEPHERD, FOR COLORED GIRLS."

1 BOX LABELED -

"FLORENCE CRITTENTON MISSION."

"MARYLAND TRAINING SCHOOL, FOR COLORED GIRLS."

"MONTROSE SCHOOL FOR GIRLS"

FINANCIAL DIV.

D. P. W.

-1937.-

REFORMATORY CARDS.

ST. MARYS INDUSTRIAL SCHOOL.

1 BOX LABELED -

FINANCIAL DIV.

D. P. W.

KOVAKA-NIEDENTOHL

(Worker's full name)

5-2-39

(Date)

#122

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE - FINANCIAL DIVISION
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST PAUL PLACE
(Name of building, room number, street address)

1. Title "O.A.P. SEMI-MONTHLY ALLOWANCE PAYROLLS"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates OCT. 1ST, 1937 - DEC. 31ST, 1938 (INCLUSIVE)
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 7 LOOSE LEAF BINDERS
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling NOT LABELED (SEE ADDENDA FOR LIST OF BINDERS)
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS COPIES OF OLD AGE PENSION SEMI-MONTHLY PAYROLL ALLOWANCES - COPY SENT FROM CENTRAL PAYROLL BUREAU TO D.P.W. AND KEPT BY D.P.W. AS AN OFFICE RECORD - COPY SHOWS CATEGORY OF ASSISTANCE, PAYROLL SHEET NUMBER, VOUCHER NUMBER, INCLUSIVE DATES OF PAYROLL PERIOD, ACCOUNT SYMBOLS, PAYROLL NUMBERS, NAMES OF CLIENTS, AMOUNTS OF ALLOWANCES,
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued AND CHECK NUMBERS, AT BOTTOM OF SHEET, RECAPITULATION SHOWS NET AMOUNTS OF ADJUSTMENTS AND GROSS AMOUNTS, ALSO APPROVALS BY CHIEF OF C.P.B. AND AUDITED BY STATE RELIEF AUDITOR, ATTACHED TO PAYROLL IS A —
(CONTINUED TO ITEM #12 &)
7. Arrangement CHRONO. BY PAYROLL PERIODS.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing TYPED ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF VOLUME; 14 1/2" X 9 1/2" X 1 1/2"; APPROX. 400 PAGES
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
IN VOLUME.
11. Location by dates and quantities FROM OCT. 1ST 1937 - DEC. 31ST 1938,
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
ON WOODEN SHELF, AGAINST EAST WALL OF RECORD STORE ROOM, ROOM # 206.
12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
(CONTINUED FROM ITEM #6) - RECAPITULATION SHEET
Whether record is known to have been kept earlier than dates shown in item 2)
GIVING SUMMARY OF RECAPITULATIONS ON BOTTOM OF PAYROLL SHEETS, RECAPITULATION SHEET SHOWS, PAYROLL SHEET NUMBERS, GROSS AMOUNTS, AMOUNTS OF ADJUSTMENTS, TOTAL AMOUNTS PAYABLE AND SUBTOTALS, ALSO SHOW CERTIFICATIONS RELATING THAT PAYROLL IS TRUE AND CORRECT BY SIGNATURES OF DIRECTOR OF
13. ~~(For use in Florida)~~ - Early imprints D.P.W. AND CHIEF OF C.P.B.
(Author) (Publisher)
NOTE: PAYROLLS ARE ALSO USED FOR AUDITING PURPOSES.
(Place of publication) (Date of publication)

NOTE: O.A.P. - DENOTES - OLD AGE PENSION.
G.P.B. - " - CENTRAL PAYROLL BUREAU.
D.P.W. " - DEPARTMENT OF PUBLIC WELFARE.

"O.A.P. SEMI-MONTHLY ALLOWANCE PAYROLLS."

(CONTINUED FROM ITEM #4)

ADDENDA

BINDERS NOT LABELED.

LIST OF BINDERS - AS FOLLOWS.

	FROM	TO
1 LOOSE LEAF BINDER	OCT. 1 ST 1937	DEC. 31 - 1937
1 " " "	JAN. 1 ST 1938	FEB. 28 - 1938
1 " " "	MAR. 1 ST 1938	APRIL 30 - 1938
1 " " "	MAY 2 ND 1938	JUNE 30 - 1938
1 " " "	JULY 15 TH 1938	AUG. 31 - 1938
1 " " "	SEPT. 1 ST 1938	OCT. 31 ST 1938
1 " " "	NOV. 1 ST 1938	DEC. 31 ST 1938

KOVAKA-NIEDENTOHL 4-27-39.

(Worker's full name)

(Date)

#123

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title "TIME CARDS OF EMPLOYEES ENGAGED ON DETACHED DUTY" (D. P. W.)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates JULY 1ST, 1938 TO DEC. 31ST, 1938.
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1, CARDBOARD BOX.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling FOR LABELING, SEE ITEM #12.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINS A DAILY TIME CARDS SHOWING TIME ON AND OFF ACTUAL DUTY EACH DAY, CERTIFICATION AS TO ENTRIES BEING CORRECT, DATE OF PAYROLL PERIOD ENDING, DEPARTMENT OR BUREAU, NAME AND CLASSIFICATION OF EMPLOYEE. TIME ON CARDS IS RECORDED DAILY AND AT CLOSE OF PAYROLL PERIOD, INDIVIDUAL CARDS ARE DULY SIGNED AND CERTIFIED, THEN FORWARDED TO D.P.W.

6. Contents—continued HEAD TO SUPPORT ATTENDANCE RECORD ON PAYROLL.

NOTE: ON REVERSE SIDE OF EACH CARD IS STAMPED. - RECEIVED, D.P.W. WITH DATE; FINANCIAL DIVISION.

7. Arrangement CHRONO. BY DATE, UNDER DISPENSARIES.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by

title and identification number)

9. Writing HANDWRITTEN ON PRINTED CARDS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF CARDBOARD BOX: 3 1/4" X 5 1/2" X 9 3/4", APPROX. 228 CARDS IN BOX.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities JULY 1ST 1938 TO DEC. 31ST 1938; ON WOODEN SHELF, AGAINST EAST WALL OF RECORD STORE-ROOM, ROOM #206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD (LABELING, ITEM # 4 CONTINUED.)
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)

1 CARDBOARD BOX LABELED. ("FINANCIAL DIVISION" "DISPENSARY TIME CARDS." "JULY 1, -1938 TO DEC. 31ST 1938")

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

KOVAKA-NIEDENTOWL 5-2-39.
(Worker's full name) (Date)

#124.
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~6~~ BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title "A.T.B. SEMI-MONTHLY ALLOWANCE PAYROLLS"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates JAN. - DEC. 1937 (INCLUSIVE)
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2, LOOSE LEAF BINDERS.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling "A.T.B. JAN. - DEC. 1937."
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS COPIES OF ASSISTANCE TO BLIND
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
SEMI-MONTHLY PAYROLL ALLOWANCES. + COPY SENT
FROM CENTRAL PAYROLL BUREAU TO D. P. W. AND
KEPT BY D. P. W. AS AN OFFICE RECORD. - COPY SHOWS
CATEGORY OF ASSISTANCE, PAYROLL SHEET NUMBER,
VOUCHER NUMBER, INCLUSIVE DATES OF PAYROLL
PERIOD, ACCOUNT SYMBOLS, PAYROLL NUMBERS,
NAMES OF CLIENTS, AMOUNTS OF ALLOWANCES,

6. Contents—continued AND CHECK NUMBERS, AT BOTTOM OF SHEET, RECAPITULATION SHOWS NET AMOUNTS OF ADJUSTMENTS AND GROSS AMOUNTS ALSO APPROVALS BY CHIEF OF C.P.B. AND AUDITED BY STATE RELIEF AUDITOR, ATTACHED TO PAYROLLS

7. Arrangement CHRONO., BY PAYROLL PERIODS. (CONTINUED TO ITEM #12 ✓)
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by

title and identification number)

9. Writing TYPED ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF VOLUME; 14 1/2" X 9 1/2" X 1 1/2" APPROX. 400 PAGES
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
IN VOLUME.

11. Location by dates and quantities JAN.-DEC. 1937, ON WOODEN SHELF,
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
AGAINST EAST WALL, OF RECORD STORAGE ROOM,
ROOM # 206.

12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
(CONTINUED FROM ITEM #6) — IS A RECAPITULATION
(Whether record is known to have been kept earlier than dates shown in item 2)
SHEET GIVING SUMMARY OF RECAPITULATIONS ON
BOTTOM OF PAYROLL SHEETS, RECAPITULATION SHEET
SHOWS, PAYROLL SHEET NUMBERS, GROSS AMOUNTS,
AMOUNTS OF ADJUSTMENTS, TOTAL AMOUNTS PAY-
ABLE AND SUB-TOTALS, ALSO SHOW CERTIFICATION
RELATING THAT PAYROLL IS TRUE AND CORRECT, BY

13. ~~(For use in Florida.)~~ Early imprints SIGNATURES OF DIRECTOR OF
(Author) (Publisher)
D.P.W. AND CHIEF OF C.P.B. NOTE: PAYROLLS ARE ALSO
(Place of publication) (Date of publication)
USED FOR AUDITING PURPOSES.

U. S. GOVERNMENT PRINTING OFFICE 16-6410

NOTE: A.T.B. DENOTES - ASSISTANCE TO BLIND "
C.P.B. " - CENTRAL PAYROLL BUREAU.
D.P.W. " - DEPARTMENT OF PUBLIC WELFARE.

KOVAKA-NIEDENTOHL. 5-2-39.

(Worker's full name)

(Date)

#125.

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~WORKS~~ BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title "DAILY RECORD OF DIRECT RELIEF ALLOWANCES"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities)

or both)

2. Dates JAN. - MAY 1937. (INCLUSIVE).
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1, LOOSE LEAF BINDER.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling NOT LABELED.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS A DAILY RECORD OF DIRECT RELIEF
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,

ALLOWANCE IN CHECK WRITING DIVISION OF THE
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by

EMERGENCY CHARITIES ASSOCIATION DURING THE
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

DURATION OF E.C.A. SETUP. FORM SHEET SHOWS

DATES PAYABLE, NAME OF BANK, INCLUSIVE CHECK

NUMBERS, NUMBER OF CANCELLED CHECKS AND NUMBER

OF VOID CHECKS, NET AMOUNTS PAYABLE, TOTAL WEEK-

LY INCOMES, TOTAL WEEKLY BUDGETS, TOTAL AMOUNTS

6. Contents—continued FOR FOOD, SHELTER, CLOTHING, FUEL, MEDICAL CARE, HOUSEHOLD NECESSITIES AND MISCELLANEOUS, ALSO SHOW AMOUNTS OF RELIEF ALLOWANCES TO SINGLE RESIDENT PERSONS, AMOUNTS OF RELIEF ALLOWANCES TO RESIDENT FAMILIES, TOTAL AMOUNT—
(CONTINUED TO ITEM #12)

7. Arrangement CHRONO. BY DATE OF PAYROLL.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPED AND HANDWRITTEN ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF VOLUME; 9" X 12" X 1/2"; APPROX. 50 PAGES IN VOLUME.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities JAN.-MAY 1937; ON WOODEN SHELF, AGAINST EAST WALL, OF RECORD STORE ROOM, ROOM #206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information (CONTINUED FROM ITEM #6) — OF RELIEF ALLOWANCES PAYABLE, SIGNATURE OF CLERK BY WHOM PREPARED ALSO SIGNATURE OF CLERK BY WHOM POSTED.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)
NOTE: THE ABOVE RECORD DEALS WITH THE FORMER EMERGENCY CHARITIES ASSOCIATION RELIEF SET UP, NOW OBSOLETE, AND IS KEPT BY D.P.W. FOR REFERENCE PURPOSES ONLY.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

KOUAKA-NIEDENTOHLE 5-2-39. #126.
(Worker's full name) (Date) (Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~██████~~ BALTIMORE CITY State MARYLAND.
Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)
Address of office of custody #327 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title (VOUCHER REGISTER).
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1936-1937 (INCLUSIVE).
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 1, LOOSE LEAF BINDER.
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling NOT LABELED.
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINS MONTHLY ACCOUNT SHEETS OF THE NUMBER OF VOUCHERS PAID DAILY. SHEETS ALSO SHOW ORDER NUMBERS, NAMES OF PAYEES, PAID VOUCHER NUMBERS AND TOTAL AMOUNTS PAID. THIS RECORD IS KEPT FOR OFFICE REFERENCE PURPOSES.
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued _____

7. Arrangement CHRONO., BY DATE OF ENTRY.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by

title and identification number)

9. Writing HANDWRITTEN ON PRINTED HEADS AND
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
ON RULED SHEETS.
Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF VOLUME; 15 1/2" X 24" X 1"; APPROX. 150 SHEETS
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
IN VOLUME.

11. Location by dates and quantities 1 VOL. 1936-1937 (INC.), ON WOODEN
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
SHELF, AGAINST EAST WALL OF RECORD STORE-
ROOM, ROOM #206.

12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication)

(Date of publication)

KOVARA-NIEDENTOML. 5-1-39.

(Worker's full name)

(Date)

#127.

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~COLUMBIA~~ BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title (INTERDIVISION CORRESPONDENCE).
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
(CLOSED RECORD).

or both)

2. Dates JAN. 1936 TO JULY 1ST; 1938.
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 6 CARBOARD TRANSFER CASES & 1 BUNDLE
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling FOR LABELING, SEE ATTACHED ADDENDA.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS INTERDIVISION CORRESPONDENCE
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
FROM FINANCIAL TO CENTRAL PAYROLL BUREAU,
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
RESPECTING CANCELLATION AND RELEASE OF
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
CHECKS, CHANGES IN ADDRESSES, HOLD CHECK
NOTICES AND INCORRECT ADDRESSES. THIS
RECORD IS KEPT FOR OFFICE FUTURE REFER-
ENCE PURPOSES. FORM HEADED "INTERDIV-
ISION CORRESPONDENCE SHOWS NAMES OF

6. Contents—continued DEPARTMENTS COMMUNICATING, (I.E.) TO CENTRAL PAYROLL BUREAU, FROM FINANCIAL DIVISION, SUBJECT, SOCIAL WORKER'S DISTRICT CATEGORY OF RELIEF, DATE OF CORRESPONDENCE, C.P.B. NUMBER, D.P.W. NUMBER, NAME AND (CONTINUED TO ITEM #12)
7. Arrangement ALPHA, BY NAME OF CLIENT.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE:
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing TYPED ON PRINTED FORM:
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF TRANSFER CASE; 6 1/2" X 9" X 24", APPROX 3000 LETTERS PER CASE, OR APPROX. 18,000 LETTERS IN CASES SIZE OF BUNDLE; 5 1/2" X 9" X 4", APPROX. 1,000 IN BUNDLE OR— (APPROX. 19,000 IN ALL)
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities JAN. 1936 TO JULY 1 ST. 1938. ON WOODEN SHELF, AGAINST EAST WALL, OF RECORD STORE ROOM, ROOM # 206.
(Room. vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
(CONTINUED FROM ITEM #6). ADDRESS OF RELIEF CLIENT, DESCRIPTION AND REASON FOR HOLD CHECKS, CANCELLATION ETC. AND SIGNATURE OF OFFICER OF PAYROLL BUREAU OR D.P.W.
NOTE. C.P.B. DENOTES CENTRAL PAYROLL BUREAU.
D.P.W. " DEPARTMENT OF PUBLIC WELFARE
NOTE: THE ABOVE RECORD DEALS WITH CLOSED
13. ~~(For use in Florida.)~~ Early imprints CORRESPONDENCE, FOR ACTIVE RECORDS - SEE SERIAL #103.
(Author) (Publisher)
(Place of publication) (Date of publication)

(INTER DIVISION CORRESPONDENCE).

(LABELING, ITEM #4 CONTINUED)

ADDENDA

1, CASE LABELED - { "INTER DIVISION CORRESPONDENCE"
"FINANCIAL DIVISION-1937-R.G. SHANKLIN."

1, CASE LABELED - "TO - FROMS - A TO I - 1-1-38 TO 7-1-38."

1, " " " - "TO - FROMS - J TO S - 1-1-38 TO 7-1-38."

1, " " " - "TO - FROMS - T TO Z - 1-1-38 TO 7-1-38."

1, " " " - "TO AND FROMS - A - L - JAN. 1ST. 1938 - JUNE 30-1938."

1, " " " - "TO AND FROMS - M - Z - JAN. 1ST. 1938 - JUNE 30-1938."

1, BUNDLE LABELED { "INTER DIVISION CORRESPONDENCE
PERIOD, -1-1-36 TO 12-31-36."

KOVAKA-NIEDENTOHL. 5-1-1939. #128.

(Worker's full name)

(Date)

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL-DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title (EQUIPMENT RECORD).
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1936 - - .
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2, LOOSE LEAF BINDERS
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling NOT LABELED.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS EQUIPMENT RECORD OF EACH DIVISION OF D.P.W. SHOWING NAME OF OFFICE, OFFICER IN CHARGE, UNIT NAME OF ARTICLE, SIZE, DESCRIPTION, VENDOR'S NAME, LOCATION OF DIVISION, TAG NUMBER, ALSO NAMES OF DISIVISIONS AND DATES OF EQUIPMENT TRANSFERS. THE RECORD IS KEPT BY THE D.P.W. FOR THE PURPOSE OF LOCATING AND CHECKING OFFICE EQUIPMENT IN ITS
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued DIFFERENT, DEPARTMENTAL DIVISIONS.

7. Arrangement IN NO OTHER ORDER BUT BY DIVISION
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPED ON MINEOGRAPHED FORM SHEETS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF VOLUME; 9" x 13 1/2" x 2"; APPROX 200 SHEETS,
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
IN VOLUME.

11. Location by dates and quantities 1936--; ON WOODEN SHELF AGAINST
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
EAST WALL OF RECORD STORE ROOM, ROOM #206.

12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

NOTE: INVENTORY OF THE ABOVE OFFICE EQUIPMENT, TAKEN IN 1936.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

KOVAKA-NIEDENTOML, 5-1-39.

(Worker's full name)

(Date)

#129.

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE - FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title (CASH DISBURSEMENTS JOURNAL)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities)

or both)

2. Dates 1936-1937. (INCLUSIVE).
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1, LOOSE LEAF BINDER.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling NOT LABELED.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINS MONTHLY CASH DISBURSEMENTS OF RELIEF
PAYROLLS SPECIAL RELIEF DISBURSEMENTS, HOS-
PITALIZATION, MAINTENANCE OPERATION, RENTALS
ETC, DURING THE BALTIMORE EMERGENCY RELIEF
COMMISSION SETUP LEDGER SHEET ALSO SHOWS
ORDER NUMBER, DESCRIPTION OF DISBURSEMENT,
AMOUNTS OF DISCOUNTS, AND GRAND TOTALS.
NOTE: THE ABOVE RECORD IS NOW OBSOLETE

6. Contents—continued AND IS USED BY D.P.W. FOR OFFICE REFERENCE PURPOSES ONLY.

7. Arrangement CHRONO., BY DATE OF ENTRY.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by

title and identification number)

9. Writing HANDWRITTEN ON PRINTED HEADS AND RULED SHEETS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF VOLUME; 11 1/2" X 18" X 1"; APPROX. 200 PAGES IN VOLUME.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1936-1937 (INC.) ON WOODEN SHELF, AGAINST EAST WALL, OF RECORD STORE ROOM, ROOM #206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____ (Author) _____ (Publisher)

(Place of publication)

(Date of publication)

Title: (Cash Disbursements Journal) ⑥

Dates: ~~Jan - 1933~~ 1936 - 1937 (inclusive)

Quantity: 1, loose leaf binder,

Label: not labeled.

Dist. & Miss Rec: none.

Arrange: Chrono. by date of entry.

Index: none.

Unit: Hand written on printed heads and ruled

Size: $11\frac{1}{2}'' \times 18'' \times 1''$ - approx. 200 pages in ~~one~~ ^{two} volume.

Locat: against E. Wall of Rec. Store Room # 206

Contents: contains cash disbursements of Relief Pay Rolls, Special Relief disbursements #04 hospitalization, maintenance operation, rentals etc. showing order no., description of disbursement, vouchers no total amt. of disbursement, amts. of discounts, grand totals (This is during the era of B.E.R.C. (Monthly Accounts)).

KOVAKA-NIEDENTOHL 5-1-39 #130
(Worker's full name) (Date) (Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE
(Name of building, room number, street address)

1. Title "HOSPITAL ACCOUNT LEDGER"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1924-1935 (INCLUSIVE)
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 BOUND VOLUME
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling "HOSPITALS"
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS SEPARATE HOSPITAL MONTHLY AC-
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,

COUNTS OF PATIENTS TREATED. THE ACCOUNTS SHOW
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
YEAR EFFECTED, NAME OF HOSPITAL, NUMBER OF
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
PATIENTS ALLOWED PER DAY, NUMBER OF OUT PAT-
IENTS ALLOWED EACH YEAR, THE AMOUNT OF AP-
PROPRIATIONS FOR INDOOR PATIENTS, THE AMOUNT
OF APPROPRIATIONS FOR INDOOR, OUT-PATIENTS, (FOR
TREATMENTS FOR PATIENTS CONFINED IN HOMES)

6. Contents—continued AND TOTAL OF APPROPRIATION. THE LEDGER SHEET ALSO SHOWS, MONTH, NUMBER OF PATIENTS CARRIED OVER, NUMBER ENTERED DURING MONTH, TOTAL NUMBER TREATED, AGGREGATE DAYS USED, NUMBER OF "OUTS," TREATED, COST OF "OUTS,"
(CONTINUED TO ITEM #12)
7. Arrangement CHRONO. BY MONTH OF ACCOUNT.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing HAND WRITTEN ON RULED PAPER.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF VOLUME: 10 1/4" X 12" X 1"; APPROX. 150 SHEETS IN LEDGER.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities 1924-1935. AGAINST EAST WALL OF RECORD STORE ROOM, ROOM #206.
(Room. vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)
(CONTINUED FROM ITEM #6). ~ COST OF INDOOR PATIENTS, TOTAL COST FOR MONTH AND AMOUNT EXPENDED TO END OF EACH MONTH, WITH TOTALS AT BOTTOM OF SHEET, FOR ALL HOSPITALS IN CITY.
NOTE: THE ABOVE RECORD IS NOW OBSOLETE AND IS USED FOR D.P.W. OFFICE REFERENCE PURPOSE ONLY.
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)
(Place of publication) (Date of publication)

KOVAKA-NIEDENTOHL 4-26-39 #131
(Worker's full name) (Date) (Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~COPIES~~ BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title (PAID BILLS OF CHARGE ACCOUNTS OF CITY PATIENTS IN HOSPITALS).
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1927-1935.
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1, PASTEBOARD TRANSFER CASE.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling "HOSPITALS"
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINS PAID BILLS FROM VARIOUS HOSPITALS IN CITY RESPECTING CHARGE ACCOUNTS OF CITY PATIENTS FOR BOARD AND MEDICAL SERVICE RENDERED. THEY ARE KEPT FOR OFFICE RECORD PURPOSE FOR FUTURE REFERENCE. BILL SHOWS NAME AND ADDRESS OF HOSPITAL, TOTAL DAYS BILLED, TOTAL DAYS ADDED, TOTAL DAYS DEDUCTED, NUMBER OF ADJUSTED DAYS, TOTAL DAYS ALLOWED.

6. Contents—continued RATE PER DAY, TOTAL AMOUNT OF BILL, CERTIFICATION OF OFFICER, RESPECTING PERSONS ACCEPTED AS PROPER SUBJECTS FOR MUNICIPAL AID; ALSO SHOWS NAMES OF PATIENTS, DISEASES, DATES ADMITTED, DATES DISCHARGED, AND NUMBER DAYS IN HOSPITAL [CONTINUED TO ITEM #12]
7. Arrangement ALPHA. BY NAME OF HOSPITAL AND CHRONO. BY DATE-
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE. [UNDER EACH HOSPITAL
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)]
9. Writing HANDWRITTEN ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF TRANSFER CASE; 11 1/2" X 13" X 26"; APPROX. 2,500 SHEETS.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities 1927-1935, ON WOODEN SHELF, AGAINST EAST WALL OF RECORD STORE ROOM, ROOM #206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information CONDITION OF RECORD & EQUIPMENT GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
(CONTINUED FROM ITEM #6) - NAME OF CLERK, A MONTHLY SUMMARY OF BILL IS ATTACHED TO BILL. SUMMARY SHOWS NAME OF HOSPITAL, MONTH, NUMBER OF PATIENTS RECEIVED AND DISCHARGED EACH DAY DURING MONTH. NUMBER OF PATIENTS LEFT IN HOSPITAL AT CLOSE OF EACH DAY WITH TOTALS AT BOTTOM OF SHEET. BILL ALSO SHOW PERFORATION, DATE PAID AND STAMP.
13. ~~(For use in Florida.)~~ Early imprints ED ON REVERSE SIDE WITH DATE RECEIVED IN BUREAU OF DISBURSEMENTS AND VOUCHER NUMBER OF PAYMENT.
(Author) (Publisher)
(Place of publication) (Date of publication)

NOTE: THIS RECORD DEALS WITH PAID BILLS (CLOSED ACCOUNTS) FOR ACTIVE RECORD, SEE SERIAL #104B.

6. Contents—continued OUT-VISITS, NUMBER OF PERSCRIPTIONS FURNISHED, TOTAL NUMBER OF PATIENTS VISITS, PERSCRIPTIONS AND COST, TOTAL AMOUNT OF BILL AND AMOUNT PAID BY CITY CONTROLLER. THE LEDGER SUPPORTS ACCOUNTS FOR PATIENTS IN

7. Arrangement CHRONO., BY DATE OF VISIT OF PATIENT.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF BOUND VOLUME: 10" X 11 1/2" X 1/2", 100 PAGES IN VOLUME, APPROX. 30 PAGES USED.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1926-1936; ON WOODEN SHELF, AGAINST EAST WALL, OF RECORD STORE ROOM, ROOM # 206.
(Room. vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information CONDITION OF RECORDS & EQUIPMENT GOOD
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)
(CONTINUED FROM ITEM #6)-THE FOLLOWING DISPENSARIES - EASTERN DISPENSARY, NORTH EASTERN AND BALTIMORE GENERAL.
NOTE: FOR CONTINUANCE OF THIS RECORD, (SUBSEQUENT RECORD), SEE SERIAL # TITLED "DISPENSARY VISIT SLIPS" - "OUT-VISITS."

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

KOVAKA-NIEDENTOHLE 4-28-39.

(Worker's full name)

(Date)

#133

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~WORKS~~ BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #377 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title "CHECK CANCELLATION NOTICES"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates NOV. 1934 TO MAY 1936.
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 3 CARBOARD FILE BOXES.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling NOT LABELED.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS CHECK CANCELLATION NOTICES
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
FROM CENTRAL ACCOUNTING OFFICE CONCERNING CANCELLATION OF CHECKS OF RELIEF CLIENTS OF BALTIMORE EMERGENCY RELIEF COMMISSION AN AGENCY NOW NON-EXISTENT, THE DUTIES OF WHICH HAVE BEEN TAKEN OVER BY THE DEPARTMENT OF PUBLIC WELFARE. THIS RECORD IS NOW KEPT BY D.P.W FOR REFERENCE PURPOSE ONLY.

6. Contents—continued NOTICE SHOWS NOTICE NUMBER, RELIEF DISTRICT NUMBER, NUMBER OF CHECK, THAT HAS BEEN CANCELLED, DATE OF CHECK, NAME OF CLIENT TO WHOM ISSUED, AMOUNT OF CHECK, FAMILY NAME, DATE OF CANCELLATION AND

7. Arrangement NUMERICALLY, BY NOTICE NUMBER.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPED ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

10. Size OF FILE BOXES; 5" X 6 1/4" X 12", APPROX. 9000 NOTICES IN ALL.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities FROM NOV. 1934 TO MAY 1936, ON WOODEN SHELF, AGAINST EAST WALL, OF RECORD STORE ROOM, ROOM #206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
(CONTINUED FROM ITEM #6) — NAME OF CLERK IN CENTRAL ACCOUNTING OFFICE.
(Whether record is known to have been kept earlier than dates shown in item 2)

NOTE: THE ABOVE RECORDS ARE OBSOLETE.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

KOVAKA - NIEDENTOHL. 4-28-39.

(Worker's full name)

(Date)

#134.

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE - FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title (MISCELLANEOUS RECORDS.)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1931-1937 INC.
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 7, WOODEN BOX.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling NOT LABELED.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS RECORDS IN TABBED FOLDERS, KEPT FOR OFFICE FUTURE REFERENCE PURPOSE. FOLDERS TITLED AS FOLLOWS: "PAYROLLS 1937" (SEMI-MONTHLY REPORTS TO DIRECTOR OF D.P.W.); "HOLD CHECKS REQUEST"; (FOLDERS FOR EACH CATEGORY OF RELIEF), "CORRESPONDENCE"; (LETTERS TO DIRECTOR OF D.P.W. FROM SUPERVISORS, RELATING TO CHANGES IN GRANTS, CUT-OFFS, ETC. FOR EACH

6. Contents—continued CATEGORY OF RELIEF), "HOLD CHECK REQUEST 1936"; "STOP PAYMENT REQUESTS" 1936; (REQUEST TO VARIOUS BANKS NOTIFYING THEM TO STOP PAYMENT ON CHECKS) "PAYROLLS FOR 1936"; "ABSENTEE REPORTS 1935-1936"; "MONTHLY DETAIL COST OF OPERATING
[CONTINUED TO ITEM #12]
7. Arrangement ALPHA. BY SUBJECT, UNDER EACH YEAR.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing TYPED AND HANDWRITTEN ON PLAIN PAPER
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. AND PRINTED FORMS.
Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF WOODEN BOX; 10 1/2" X 12 1/2" X 24", APPROX. 3,000
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
PAPERS IN BOX.
11. Location by dates and quantities 1931-1937; ON WOODEN SHELF,
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
AGAINST EAST WALL OF RECORD STORE ROOM,
ROOM # 206.
12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD,
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
[CONTINUED FROM ITEM #6] — EXPENSES; (FROM BUREAU
Whether record is known to have been kept earlier than dates shown in item 2)
OF CONTROL AND ACCOUNTS, RESPECTING BALTIMORE CITY
HOSPITALS, 1935-1936), "EMPLOYEE'S RETIREMENTS Y-
STEM NOTICES" 1936; (RESPECTING CERTIFICATION OF
RATE OF DEDUCTION OF D.P.W. EMPLOYEE'S SALARIES
TO FUND), "CASH VOUCHERS" (FOR A.D.C.O.A.P. 1931-1939)
"NOTICES OF REFUND" (FROM CENTRAL PAYROLL
13. ~~(For use in Florida.)~~ Early imprints BUREAU). NOTE: FOR FURTHER
(Author) (Publisher)
INFORMATION ON ABOVE ITEMS SEE SERIALS COVER-
(Place of publication) (Date of publication)
ING SAME.

KOVAKA - NIEDENTORF. 4-28-39. #135.
(Worker's full name) (Date) (Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE - FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody # 327 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title "HOLD CHECK LISTS." - O.A.P., G.P.A., A.D.C.
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
(CLOSED).
or both)

2. Dates JAN. 1938 - JUNE 1938. INC.
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 3 BUNDLES.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling FOR LABELING, SEE ITEM #12.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINS COPIES OF O.A.P., G.P.A. AND A.D.C.
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
HOLD CHECK LISTS FROM FINANCIAL DIVISION, KEPT FOR OFFICE REFERENCE PURPOSES. LISTS SHOW CENTRAL PAYROLL NUMBERS, DATES OF FIRST CHECKS, NAMES AND ADDRESSES OF RECIPIENTS, NAMES OF SOCIAL WORKERS, AND REASONS FOR CHECKS BEING HELD.

6. Contents—continued _____

7. Arrangement CHRONO. BY DATE OF PAYROLL.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPED ON PLAIN PAPER.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF BUNDLES; 8 1/2" X 10" X 1", APPROX. 12 LISTS IN EACH BUNDLE OR 36 LISTS IN ALL.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities JAN. 1938 - JUNE 1938, ON WOODEN SHELF, AGAINST EAST WALL OF RECORD STORE ROOM ROOM # 206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information CONDITION OF RECORDS & EQUIPMENT GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
(CONTINUED FROM ITEM # 4)
Whether record is known to have been kept earlier than dates shown in item 2)

1, BUNDLE LABELED - O.A.P. HOLD CHECK LISTS - JAN - JUNE 1938
1, " " - "G.P.A. HOLD CHECK LISTS - JAN - JUNE 1938"
1, " " - "A.D.C. HOLD CHECK LISTS - JAN - JUNE 1938"

NOTE: O.A.P. - OLD AGE PENSION.
G.P.A. - GENERAL PUBLIC ASSISTANCE.

13. (For use in Florida.) ~~Early imprints~~ A.D.C. - AID TO DEPENDENT CHILDREN
(Author) (Publisher)

(Place of publication)

(Date of publication)

KOVAKA-NIEDENTHAL 4-25-39.

(Worker's full name)

(Date)

(Form identification number)

#136

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.

(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE.

(Name of building, room number, street address)

1. Title "G. P. A. GRANT AUTHORIZATION TICKETS"

(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities)

(Original Tickets Prepared by Case Workers)

or both)

2. Dates JUNE 1, 1937 TO DEC. 24th 1937.

(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 3, TRANSFER CASES.

(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling FOR LABELING SEE ITEM #12.

(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.

(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS G.P.A. GRANT AUTHORIZATION TICKETS

(Purpose and general nature of record; Principal items of information shown. Summary of forms used in making record,

PREPARED BY CASE WORKER AND SENT TO FINAN-

cial Division, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by

each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

G.P.A. GRANT AUTHORIZATION TICKET ISSUED BY D.P.W.

HEAD AND SENT TO FINANCIAL DIVISION. TICKET SHOWS G.P.B.

NUMBER, D.P.W. NUMBER, CATEGORY OF RELIEF, SPACE

IS PROVIDED ON TOP OF FORM TO SHOW WHETHER

CASE IS ENTRY, CHANGE, SUPPLEMENTARY, EMER

6. Contents—continued AGENCY OR CUT-OFF NAME AND FORMER ADDRESS OF CLIENT, NAME AND PRESENT ADDRESS OF CLIENT. FORMER SEMI-MONTHLY AND MONTHLY GRANTS WITH STATE AND CITY ALLOTMENT, NEW GRANT, WITH STATE AND CITY ALLOTMENT

(CONTINUED TO APPENDIX)

7. Arrangement NUMERICALLY, BY CENTRAL PAYROLL NUMBER.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN ON PRINTED FORM.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.)

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF TRANSFER CASE. 6" X 9 1/2" X 25". APPROX.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
4,590 TICKETS IN ALL.

11. Location by dates and quantities ON WOODEN SHELF AGAINST EAST WALL OF RECORD STORE ROOM, ROOM #206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information CONDITION OF RECORDS & EQUIPMENT GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
(CONTINUED FROM ITEM #4).

Whether record is known to have been kept earlier than dates shown in item?

1 " " " — { G.P.A. GRANT AUTHORIZATIONS
JUNE 1ST 1937 TO DEC. 29TH 1937
C.P.B. NUMBER - 1-1199.

1 " " " — { G.P.A. GRANT AUTHORIZATIONS.
JUNE 1ST 1937 TO DEC. 29TH 1937.
C.P.B. NUMBER - 1200-2599.

13. (For use in Florida.) Early imprints
1 " " " — { G.P.A. GRANT AUTHORIZATIONS
(Author) (Publisher)
JUNE 1ST 1937 TO DEC. 29TH 1937
(Date of publication)
C.P.B NUMBER - 2600-4591.

"G. P. A. GRANT AUTHORIZATION TICKETS"

(CONTENTS, ITEM #6 & #12 CONTINUED) ADDENDA.

NUMBER OF PERSONS FORMERLY IN FAMILY
NUMBER AT PRESENT, NAME OLD WORKER, NAME
OF NEW WORKER, DATE REQUESTED, DATE EFF-
ECTIVE, RACE, AMOUNT OF EMERGENCY AL-
LOWANCE WITH STATE AND CITY ALLOTMENTS
AND TOTAL, DATE OF BIRTH, RELIGION, SIGNA-
TURES OF APPROVAL BY WORKER, SUPERVISOR
ASSISTANT DIRECTOR OR DEPARTMENT HEAD
AND DATE APPROVED.

NOTE: BESIDES BEING USED TO CHECK AGAINST
COPY OF G. P. A. AUTHORIZATION TICKET ISSUED
TO FINANCIAL DIVISION, THESE TICKETS ARE KEPT
BY CASE WORKER FOR FUTURE REFERENCE
PURPOSE.

KOVAKA-NIEDENTOHL 4-26-39.

(Worker's full name)

(Date)

#137.

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title "HOSPITAL REPORTS"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1936-1938 (INCLUSIVE).
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 7, CARDBOARD BOXES.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling FOR LABELING SEE ITEM #12.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS HOSPITAL REPORTS SENT FROM VARIOUS HOSPITALS TO D.P.W. RESPECT IN TREATMENT their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by RECEIVED BY CLIENTS, UNDER CARE OF D.P.W. IN each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached THESE VARIOUS HOSPITALS. THEY ARE KEPT FOR PURPOSE OF CHECKING AGAINST (PATIENT'S REPORTS FROM HOSPITALS) SEE SERIAL #100 AND ALSO TO CHECK WHETHER CLIENT HAS COMPLIED WITH RULE RELATING TO LEGAL RESIDENT OF BALTIMORE CITY.

6. Contents—continued REPORT SHOWS, DATE OF REPORT, NAME AND ADDRESS OF PATIENT, BIRTH PLACE, OCCUPATION, MARITAL STATUS, COLOR, SEX, HOW LONG IN CITY, REMARKS, RESPECTING APPLICATION THROUGH FINDINGS, DIAGNOSIS OF CASE, AND SIGNATURE OF EXAMINING PHYSICIAN.
7. Arrangement CHRONO., BY DATE UNDER EACH HOSPITAL.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing HANDWRITTEN ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF ONE BOX LABELED "ACCIDENT SLIPS, JAN. 1ST 1938 TO DEC. 31-1938,"
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
IN ROOM #206, 3 1/2" x 10 1/4" x 16"; APPROX. 5,700 SLIPS; SIZE OF OTHER 6 BOXES,
IN ROOMS #206 & #211; 4' x 10" x 12", APPROX. 3,000 PER BOX, OR APPROX. 23,700
[SLIPS IN ALL]
11. Location by dates and quantities 2, BOXES FROM JAN. 1ST 1939 --, IN ROOM #211,
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
5, BOXES FROM 1936-1938, ON WOODEN SHELF, AGAINST EAST WALL OF RECORD STORE ROOM, ROOM #206.
12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
(CONTINUED FROM ITEM #4). BOXES LABELED AS BELOW—
Whether record is known to have been kept earlier than dates shown in item 2)
"D.P.W. FINANCIAL DIVISION-1936 ACCIDENT REPORTS FOR
1, BOX - ST. AGNES HOSPITAL, ST. JOSEPH HOSPITAL, SOUTH BALTO.
GENERAL HOSPITAL, UNIVERSITY HOSPITAL."
"D.P.W. FINANCIAL DIVISION-1936 ACCIDENT REPORTS FOR
1, BOX - FRANKLIN SQUARE HOSPITAL, MARYLAND GENERAL
HOSPITAL, MERCY HOSPITAL, PROVIDENT HOSPITAL."
13. (For use in Florida.) Early imprints NOTE: FOR CONTINUANCE OF
(Author) (Publisher)
LABELING SEE ATTACHED APPENDIX SHEET.
(Place of publication) (Date of publication)

"HOSPITAL REPORTS."

(LABELING - CONTINUED FROM ITEM #12) ADDENDA.

1 BOX LABELED } "D.P.W. FINANCIAL DIVISION - 1936 ACCIDENT REPORTS
ACCIDENT SLIPS FROM ALL HOSPITALS - 1937"

1 BOX LABELED } "D.P.W. FINANCIAL DIVISION - 1936 ACCIDENT REPORTS
ACCIDENT SLIPS - 1937"

1 BOX LABELED - "ACCIDENT SLIPS - JAN. 1ST 1938 TO DEC. 31 - 1938"

1 BOX NOT LABELED - (IN ROOM #206).

1 BOX NOT LABELED - (IN ROOM #206).

NOTE: THIS RECORD DEALS WITH HOSPITAL
TREATMENT FOR CLIENTS WHO RECEIVE MINOR
INJURIES WHILE (PATIENT'S REPORTS FROM
HOSPITALS) - SERIAL #100. COVERS HOSPITAL-
IZATION OF PATIENTS THAT ARE CONFINED
IN HOSPITAL.

Kovaka-Niedentohl
(Worker's full name)

5-12-39
(Date)

138-A
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place, (Room # 206)
(Name of building, room number, street address)

1. Title "Paid Bills = From Hospitals - Destitute and Neglected Children -
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
Reformatories - Psychopathic Hospital - Maryland League for Crippled Children (cont. on line 12)
(or both)
2. Dates 1936 - 1937
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 2 Cardboard boxes
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling See Addenda Sheet for labeling
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

Monthly
6. Contents Statements from various hospitals in city of charge accounts
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
for board, also medical services rendered to patients certified by the Department of Public Welfare; kept as an office record respecting distribution of funds; statements show name and address of hospital; total days billed, total days added, total days deducted, number of adjusted days, total days allowed, rate per day, total amount of bill; certification of officer in hospital respecting persons accepted as proper subjects for municipal

6. Contents—continued aid; also show names of patients, diseases, dates admitted, dates discharged, number of days in hospital and signature of principal clerk; a summary sheet is attached to statement, showing name of hospital, month, number of patients admitted, discharged each day, (cont. on line 12)

7. Arrangement Chron. by month of statement under name of hospital.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on printed form.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.)

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of box 11" x 13" x 24" Approx. 600 documents
(Of record or container. Height, width, thickness or depth. Average number of ~~documents~~ documents)
(Average 7 sheets per document.)

11. Location by dates and quantities 1936-1937, 2 boxes on east wall in storage room # 206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and containers are in good condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

Line 1 Continued from line one — Maryland School for Blind — City Medical Agency Reports" (Paid Bills - Hospitals)

Line 6 Continued from line six — number of patients left in hospital at close of each day; statement also bears perforations Paid, with date received in Bureau of Disbursements and voucher number of payment. Note: Above statements are filed in some boxes that contain

~~13. (For use in Florida)~~ ~~Early imprints~~ statements from Institutions for Destitute and
(Author) (Publisher)
Neglected Children - Reformatories - Maryland League for Crippled Children -
(Place of publication) (Date of publication)
Maryland School for Blind - ~~GOVERNMENT PRINTING OFFICE~~ 15-6419 and City Medical Agency Reports.

Kovack-Niedentoh
(Worker's full name)

5-12-39
(Date)

138-B
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place (Room # 206)
(Name of building, room number, street address)

1. Title Paid Bills - from Hospitals - Destitute and Neglected Children - Reformatories -
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
Psychopathic Hospital - Maryland League for Crippled Children - (cont. on line 12)
or both)

2. Dates 1936-1937
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2 Cardboard boxes
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling See addenda sheet for labeling
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

Quarterly
6. Contents Statements from Institutions for Destitute and Neglected
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
Children of charge accounts for board, etc., to children certified
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
by the Dept. of Public Welfare; kept as an office record respecting
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
distribution of funds; statements show name and address of
institution; total days billed, total days added, total days deducted,
number of adjusted days, total days allowed, rate per day,
total amount of bill, certification of officer in institution
respecting children as proper subjects for municipal aid;

6. Contents—continued also show names of children, diseases, dates
admitted for treatments, dates discharged, number of
days in hospital; signature of superintendent in institution.

7. Arrangement Numerically by quarter of year under name of institution.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by
title and identification number)

9. Writing Typed on printed form
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of box 11"X13"X24" Approx 300.
(Of record or container. Height, width, thickness or depth. Average number of ~~pages~~ documents)

11. Location by dates and quantities 1936-1937, 2 boxes on east wall in
storage room #1206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and containers are in good condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Continued from line one ~~~~~ Maryland School for Blind ~
Whether record is known to have been kept earlier than dates shown in item 2)
City Medical Agency Reports" (Institutions for Destitute
Children)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Kovaka-Niedentohl
(Worker's full name)

5-16-39
(Date)

138-C
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place (Room #206)
(Name of building, room number, street address)

1. Title Paid Bills - From Hospitals - Destitute and Neglected Children - Reformatories - Psychopathic Hospital - Maryland League For Crippled Children - Maryland (cont. on line 12)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities of both)
2. Dates 1936-1937
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 2 Cardboard boxes
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling See addenda sheet for labeling.
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Quarterly statements for Reformatories in Baltimore City of City charges for board, etc., filed in same boxes containing statements for Hospitals - Institutions for Destitute and Neglected Children - Psychopathic Hospital - Maryland League For Crippled Children - Maryland School for Blind and City Medical Agency Reports; kept as an office record respecting the distribution of funds; statements headed The Mayor and City Council of Baltimore show name and address of Reformatory; date, ending of quarter with
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued year numbers; number of days and rate, also total amount of bill; certification by Financial Supervisor as to corrections also certification by Assistant Director, respecting persons accepted as proper subjects of municipal aid; list of inmates, showing identification numbers, (cont. on line 12)

7. Arrangement Numerically by quarter of year under name of Reformatory
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on printed form.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of box 11"X13"X24" Approx. 70 Documents
(Of record or container. Height, width, thickness or depth. Average number of documents)
(average 6 sheets per document)

11. Location by dates and quantities 1936-1937, 2 cardboard boxes on east wall in storage room # 206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and containers are in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Line 1 continued from line one ~ School for Blind - City Medical Agency Reports. (Paid Bills from Reformatories)

Line 6 continued from line six ~ names of inmates, check marks (as checked against reports), dates accepted, dates left, numbers of days, remarks relating inmates recaptured, committed by Juvenile Court; paroled, in custody of relative, etc.

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

Kovaka-Niedentohl

(Worker's full name)

5-15-39

(Date)

138-D

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division.
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place (Room #206)
(Name of building, room number, street address)

1. Title Paid Bills = from Hospitals - Destitute and Neglected Children - Reformatories -
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
Psychopathic Hospital - Maryland League For Crippled Children - Maryland (cont. on
of both)
2. Dates 1936-1937
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 2 Card board boxes.
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling See Addenda sheet for labeling.
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None.
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Monthly statements from Psychopathic Hospital of charge accounts
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
for board and medical service rendered to patients certified by the
Department of Public Welfare; kept as an office record respecting
distribution of expenditures from funds; statement shows name and
address of hospital; total days billed, total days added, total days
deducted, number of deducted days, total days allowed, rate per
day, total amount of bill, certification of officer in hospital
respecting persons accepted as proper subjects for municipal

6. Contents—continued aid; also shows names of patients, diseases, dates admitted, dates discharged, number of days in hospital and signature of principal clerk; a summary sheet is attached to statement, showing name of hospital, month, number of patients admitted, number discharged each day, number of (cont. on line 12)

7. Arrangement Chron. by month of statement under name of hospital.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on printed form.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of box 11" x 13" x 24" Approx. 500 documents,
(Of record or container. Height, width, thickness or depth. Average number of ~~pages~~ documents)

11. Location by dates and quantities 1926-1937, 2 boxes on east wall in storage room # 206
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and containers in good condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Line 1 continued from line one — School for Blind - City Medical Agency Reports" (Paid Bills - Psychopathic Hospital)
Whether record is known to have been kept earlier than dates shown in item 2)

Line 6 continued from line 6 — patients left in hospital at close of each day; statement also bears perforations Paid, with date received in Bureau of Disbursements and voucher number of payment.

Note: Above records are filed in same boxes that contain statements from Hospitals, Institution for Destitute and Neglected

~~13. (For use in Florida.)~~ Early imprints Children, Maryland League for Crippled Children, Maryland School for Blind and City Medical Agency Reports.
(Author) (Publisher)
(Place of publication) (Date of publication)

Kovacka-Niedentohl

(Worker's full name)

5-17-39

(Date)

138-E

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division.
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place (Room #206)
(Name of building, room number, street address)

1. Title Paid Bills - From Hospitals - Destitute and Neglected Children - Reformatories -
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities)
Psychopathic Hospital - Maryland League For Crippled Children - Maryland (cont. on line 12)
or (both)
2. Dates 1936 - 1937
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 2 Cardboard boxes
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling See addenda sheet for labeling
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Quarterly statements from Maryland League for Crippled
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
Children of City charges for board, etc., filed in same boxes
containing Paid Bills from Hospitals, Destitute and Neglected Children,
Reformatories, Psychopathic Hospital, Maryland School for Blind and City Medical
Agency Reports; kept as an office record respecting distribution of funds;
statements headed The Mayor and City Council of Baltimore, Dc;
showing the name and address of institution, date of end of
quarter, year numbers; number of days and rate; total amount

6. Contents—continued of bill; certification by financial supervisor for contents being correct also certification by Assistant Director respecting persons accepted as proper subjects of municipal aid; list of children include identification numbers, names of children, squares provided for check marks (as checked against reports), (cont. on line 12)

7. Arrangement Numerically by quarter of year
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on printed form.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of box 11"X13"X24" 8 Documents
(Of record or container. Height, width, thickness or depth. Average number of ~~10~~ documents)
(Average 6 sheets per document)

11. Location by dates and quantities 1936-1937, 2 cardboard boxes on east wall in storage room #206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and containers are in good condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Line 1 continued from line one ~ School for Blind - City Medical Agency Reports.
(Whether record is known to have been kept earlier than dates shown in item 2)
(Paid Bills - Maryland League for Crippled Children)

Line 6 continued from line six ~ dates accepted, dates left, number of days of each child; remarks relating child when discharged, in whose custody placed.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Kovaka-Niedentoh
(Worker's full name)

5-17-39
(Date)

138-F
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place (Room # 206)
(Name of building, room number, street address)

1. Title Paid Bills - From Hospitals - Destitute and Neglected Children - Reformatories -
Psychopathic Hospital - Maryland League for Crippled Children - Maryland (cont. on line 12)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities of both)
2. Dates 1936-1937
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 2 Cardboard boxes
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling See addenda sheet for labeling
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Monthly reports from City Medical Agencies, kept as an office record of number of persons receiving treatments also used by this office for preparing annual reports for the Director of the Department of Public Welfare; show district of agency; month; number of applicants registered for treatments this year, under respective headings of Color, men and women; color, children; number registered for first time; number of applicants registered
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued in previous year; number of treatments given at agency; number of visits made to applicants' homes; number of cases referred to charitable agencies; number of cases sent to Baltimore City Hospital, to other hospitals and special dispensaries; number of (cont. on line 12)

7. Arrangement Chron. by month of report
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Hand written on printed form.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of box. 11" x 13" x 2 1/4" Approx. 140 reports.
(Of record or container. Height, width, thickness or depth. Average number of ~~pages~~ documents)
(Average 6 Agency reports per month)

11. Location by dates and quantities 1936-1937, 2 cardboard boxes on
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
east wall in storage room #206.

12. Other information Records and containers are in good condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Line 1 continued from line one ~ school for Blind. (City Medical Agency Reports)
Whether record is known to have been kept earlier than dates shown in item 2)

Line 6 continued from line six ~ prescriptions issued; signature of physician in charge.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

"Paid Bills - From Hospitals - Destitute and Neglected Children - Reformatories - Psychopatic Hospital - Maryland League for Crippled Children - Md. School for Blind - City Medical Agency Reports"

1 Cardboard box labeled as follows

Paid Bills From =	1936	
Hospitals		(Report 138 A)
Destitute and Neglected Children		138 B
Reformatories		138 C
Psychopatic Hospital		138 D
Maryland League for Crippled Children		138 E
<u>Maryland School for Blind</u> - - - - -		138 F
City Medical Agency Reports		138 G

1 Cardboard box labeled as above with year numbers 1937.

Kouka-Niedentohl

(Worker's full name)

5-4-39

(Date)

139-A

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division.
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place (Room 206)
(Name of building, room number, street address)

1. Title "Service Orders - Requisitions - Purchase Orders - Cash Vouchers -
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

Surplus Commodity Reports - Reformatory Reports - Correspondence - Old Age
or both Pension Reports - Mothers Relief Reports." (Service Orders)

2. Dates 1937
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Cardboard transfer case.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line one with year numbers 1937.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Service Orders filed in same case containing Requisitions,
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
Purchase Orders, Cash Vouchers, Surplus Commodity Reports, Reformatory
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
Reports, Correspondence, Old Age Pension Reports, Mothers Relief
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
Reports; kept as an office record for future reference purposes
respecting expenditures of the various divisions in the
Department of Public Welfare; office copy shows the name
of the Department (D.P.W.); vendor's name and address, date
of order; Service Order number; appropriation account

6. Contents—continued number, other account numbers; quantity and description of articles and details in regard to agreement reached covering price, terms, etc.; delivery address; name of officer in Department by whom ordered;

7. Arrangement Alph. by names of vendors.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on printed form
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of transfer case 11" x 12" x 24" Approx 2500
(Of record or container. Height, width, thickness or depth. Average number of documents)

11. Location by dates and quantities 1937, 1 cardboard transfer case on east wall in room #206
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

Kouakou-Niedentohl
(Worker's full name)

5-5-39
(Date)

139-B
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place. (Room #206)
(Name of building, room number, street address)

1. Title Service Orders - Requisitions - Purchase Orders - Cash Vouchers - Surplus
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities)
Commodity Reports - Reformatory Reports - Correspondence - Old Age Pension Reports
or both Mothers' Relief Reports. (Requisitions)

2. Dates 1937
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Cardboard transfer case
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line one with year numbers 1937.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Financial Division copies of requisitions for materials
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
purchased for the various divisions in the Dept. of Public Welfare;
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
filed in same transfer case containing Service Orders, Purchase
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
Orders, Cash Vouchers, Surplus Commodity Reports, Reformatory
Reports, Correspondence, Old Age Pension Reports and Mothers' Relief
Reports; kept as an office record for future reference purposes;
show name of the department; division or the address; date
of requisition; requisition number; comptroller's symbol;

6. Contents—continued confirmation; quantity of material; description of articles; unit price; vendors name and address also date of delivery; order number; cost account number; by whom ordered and address where delivery was made; signature of approving officer (Bureau Head or Dept. Head - Dept. of Public Welfare.
7. Arrangement Numerically by requisition numbers.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Typed and handwritten on printed form.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of transfer case 11x12x24" Approx. 3000
(Of record or container. Height, width, thickness or depth. Average number of ~~pages~~ documents)
11. Location by dates and quantities 1937, 1 cardboard transfer case on east wall in storage room #206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)
(Place of publication) (Date of publication)

Kovaka-Niedentohl

(Worker's full name)

5-4-39

(Date)

139-C

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place (Room 206)
(Name of building, room number, street address)

1. Title "Service Orders - Requisitions - Purchase Orders - Cash Vouchers - Surplus
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

Commodity Reports - Reformatory Reports - Correspondence - Old Age Pension
or both) Reports - Mother's Relief Reports" (Purchase Orders)

2. Dates 1937
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Cardboard transfer case
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line one with year numbers 1937.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Financial Division copies of Purchase Orders of
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record.

materials purchased for the various divisions in the Dept. of
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by

Public Welfare; kept as an office record for future reference
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

purposes respecting costs, terms, etc.; show vendor's
name and address; date of order; to whom delivered;

date delivery promised; purchase order number; department;

requisition number; comptroller's symbol; cost account

number; work order number; quantity, unit, description

6. Contents—continued of articles and details in regard to terms of purchase; price per unit; amount of freight charges; bottom of order also shows quantity and date material received (respecting partial deliveries); description of articles; date receiving notice forwarded to (cont. on line 12)
7. Arrangement Numerically by Purchase Order numbers.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Typed and handwritten on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of transfer case 11"X12"X24" Approx. 2500
(Of record or container. Height, width, thickness or depth. Average number of ~~pages~~ documents)
11. Location by dates and quantities 1937, 1 cardboard transfer case on east wall in room #206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 6 ~~~~~ Bureau of Disbursements. The above records are filed in same transfer case containing Service Orders, Requisitions, Cash Vouchers, Surplus Commodity Reports, Reformatory Reports, Correspondence, Old Age Pension Reports, Mothers' Relief Reports.
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Kouka-Niedentohl

(Worker's full name)

5-5-39

(Date)

139 D

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Financial Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place.
(Name of building, room number, street address)

1. Title "Service Orders - Requisitions - Purchase Orders - Cash Vouchers - Surplus
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

Commodity Reports - Reformatory Reports - Correspondence - Old Age Pension Reports -
or both Mother's Relief Reports" (Emergency Cash Vouchers)

2. Dates 1937
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Cardboard transfer case
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling As shown on line one with year numbers 1937.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents Financial Division Copies of Emergency Cash Vouchers
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,

showing amounts up to \$5.00, covering cash
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by

which have been advanced to clients for emergency needs,
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

kept for purpose of adjusting payroll, which amounts are deducted
from original check and is then re-imbursed to the Dept. of
Public Welfare by Central Payroll Bureau; show voucher number,
date cash received; particulars relating receipt from the
Dept. of Public Welfare; sum of money (amount shown), in cash for

6. Contents—continued emergency need, also squares provided for
check mark opposite A.D.C. and G.P.A, the category of relief
referred for; signatures of Investigator by whom requested;
Field Supervisor by whom approved; Assistant Director by whom
approved; name and address of relief client also signature ^{(cont. on} line 12)
7. Arrangement Alph. by names of relief clients.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing None.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Handwritten on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of transfer case 11" x 12" x 24"
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities 1937, 1 transfer case on east wall in
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
storage room #206.
12. Other information Records and container in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 6 of relief client; on
reverse side of voucher, stamped with date when cash
was deducted from payroll.
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)
(Place of publication) (Date of publication)

KOVAKA-NIEDENTOHL. 5-8-39

(Worker's full name)

(Date)

139-E.

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~COPIES~~ BALTIMORE CITY. State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE.
(Name of building, room number, street address)

- Title "SERVICE ORDERS-REQUISITIONS-PURCHASE ORDERS-CASH VOUCHERS - SURPLUS COMMODITY REPORTS-REFORMATORY REPORTS-CORRESPONDENCE-OLD AGE PENSION REPORTS-MOTHERS RELIEF REPORTS"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates)
- Dates 1937. (SURPLUS COMMODITY REPORTS)
(Earliest and latest dates; missing dates. Show exact date of breaks)
- Quantity 1, CARDBOARD TRANSFER CASE.
(Number of volumes; file drawers; file boxes; bundles; other)
- Labeling AS SHOWN ON LINE ONE WITH YEAR NUMBERS, 1937.
(Explain fully; years; numbers; letters; number of records so labeled)
- Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINS SURPLUS COMMODITY STATEMENTS OF DILENERIES, THEY ARE USED FOR THE PURPOSE OF INFORMING THE D.P.W. THE KIND AND AMOUNTS OF SURPLUS COMMODITIES AVAILABLE FOR DISTRIBUTION AND ARE FILED BY D.P.W. FOR FUTURE REFERENCE. COMMODITY STATEMENT SHOWS DISTRIBUTION WAREHOUSE, AND ADDRESS, DATE OF DISTRIBUTION, KIND OF COMMODITY, AND WEEK

6. Contents—continued OF DELIVERIES, DISTRICT NUMBERS,
AMOUNT OF COMMODITY UNITS, WEIGHT AND TOTALS.

7. Arrangement CHRONO. BY DATE OF STATEMENT.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by

title and identification number)

9. Writing TYPED ON PLAIN PAPER.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF TRANSFER CASE; 11" X 12" X 24" APPROX. 14
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
STATEMENTS.

11. Location by dates and quantities 1937; 3, TRANSFER CASE, ON WOOD-
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
EN SHELF, AGAINST EAST WALL OF RECORD STORE-
ROOM, ROOM # 206.

12. Other information CONDITION OF RECORD & CONTAINER, GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication)

(Date of publication)

KOVAKA-NIEDENTOHL

(Worker's full name)

5-8-39

(Date)

139-F

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~BALTIMORE~~ BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody # 327 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title SERVICE ORDERS-REQUISITIONS-PURCHASE ORDERS-CASH
(Give present full title in quotes: assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities)
2. Dates 1930-1937 (INC.) REPORTS (OLD REFORMATORY REPORTS)
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 1 CARDBOARD TRANSFER CASE.
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling AS SHOWN ON LINE ONE WITH YEAR NUMBERS 1937
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINS MONTHLY REPORTS OF REFORMATORIES
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
- COMPILED BY THE SENIOR STENOGRAPHER OF THE FINANCIAL DIVISION OF D.P.W. SHOWING A SUMMARY OF ALL REFORMATORY REPORTS (I.E.) THEY ARE KEPT FOR THE PURPOSE BY D.P.W. OF ACCOUNTING, THE NUMBER OF INMATES RETAINED AND RELEASED FROM REFORMATORIES AND FOR OFFICE REFERENCE. REFORMATORY REPORT SHOWS NAMES OF

6. Contents—continued REFORMATORIES, NUMBER OF INMATES
IN PREVIOUS MONTH, TOTAL RECEIVED DURING CURRENT
MONTH, TOTAL DISCHARGED, TOTAL PAROLED, NUMBER
ESCAPED, NUMBER IN HOSPITAL, NUMBER OF INMATES
COMMITTED BY VARIOUS COURTS, (MAGISTRATES AND POLICE—
(CONTINUED TO ITEM #12)

7. Arrangement ALPHA, BY NAME OF REFORMATORY, CHRONO. BY MONTH
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE [UNDER EACH REFORMATORY]
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by

title and identification number)

9. Writing TYPED ON PLAIN PAPER.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF TRANSFER CASE: 11" X 12" X 24"; APPROX. 96 RE-
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
PORTS IN CASE.

11. Location by dates and quantities 1930-1937: ON WOODEN SHELF,
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
AGAINST EAST WALL OF RECORD STORAGE ROOM,
ROOM # 206.

12. Other information CONDITION OF RECORD & EQUIPMENT, GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
(CONTINUED FROM ITEM #6) — STATION) NUMBER RETURN-
(Whether record is known to have been kept earlier than dates shown in item 2)
ED TO INSTITUTIONS OTHER THAN COMMITTED AND TOTAL
IN MARYLAND WORK SHOP FOR BLIND

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication)

(Date of publication)

KOVAKA-NIEDENTOHLE 5-8-39.

(Worker's full name)

(Date)

139-G.

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~██████~~ BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE. (ROOM #206).
(Name of building, room number, street address)

- 1. Title " SERVICE ORDERS-REQUISITIONS-PURCHASE ORDERS.
(Give present full title in quotes: assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities)
- 2. Dates CASH VOUCHERS-SURPLUS COMMODITY REPORTS-REFORMATORY REPORTS-CORRESPONDENCE-OLD AGE PENSION REPORTS-1937 (INC).-MOTHER'S RELIEF REPORTS. (CORRESPONDENCE).
(Earliest and latest dates; missing dates. Show exact date of breaks)
- 3. Quantity 1 CARDBOARD TRANSFER CASE.
(Number of volumes; file drawers; file boxes; bundles; other)
- 4. Labeling AS SHOWN ON LINE ONE WITH YEAR NUMBER 1937.
(Explain fully; years; numbers; letters; number of records so labeled)
- 5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS CORRESPONDENCE FROM D.P.W. TO CITY DEPARTMENTS RESPECTING EMPLOYMENT OPERATIONS ALSO CORRESPONDENCE FROM COUNTIES TO D.P.W. RESPECTING ACCOUNTS FOR RENTAL OF PROPERTIES, OFFICE EQUIPMENT, MAINTENANCE OF CHILDREN IN INSTITUTIONS ETC. RECORD IS KEPT FOR D.P.W. OFFICE REFERENCE PURPOSE.

6. Contents—continued _____

7. Arrangement CHRONO. BY DATE OF LETTER.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPED ON PLAIN PAPER.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF TRANSFER CASE; 11" X 12" X 24" APPROX.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
100 LETTERS IN CASE.

11. Location by dates and quantities 1937 - ON WOODEN SHELF AGAINST
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
EAST WALL, OF RECORD STORE ROOM, ROOM #206.

12. Other information CONDITION OF RECORD & CONTAINER, GOOD
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)
NOTE! THE ABOVE RECORDS ARE FILED IN
SAME TRANSFER CASE CONTAINING - SERVICE
ORDERS - REQUISITIONS - PURCHASE ORDERS -
CASH VOUCHERS - SURPLUS COMMODITY REPORTS -
REFORMATORY REPORTS - OLD AGE PENSIONS.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

KOVAKA-NIEDENTOHL.

(Worker's full name)

5-8-39.

(Date)

139H

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327. ST. PAUL PLACE.
(Name of building, room number, street address)

- Title "SERVICE ORDERS-REQUISITIONS-PURCHASE ORDERS-CASH
VOUCHERS-SURPLUS COMMODITY REPORTS-CORRESPONDENCE-
OLD AGE PENSION REPORTS-MOTHERS RELIEF REPORTS
or both) (OLD AGE PENSION REPORTS)
- Dates 1932-1938.
(Earliest and latest dates; missing dates. Show exact date of breaks)
- Quantity 2, CARDBOARD TRANSFER CASE.
(Number of volumes; file drawers; file boxes; bundles; other)
- Labeling AS SHOWN ON LINE ONE WITH YEAR NUMBERS, 1937.
(Explain fully; years; numbers; letters; number of records so labeled)
- Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINS OLD AGE PENSION REPORTS, COVERING
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
PERIOD OF A YEAR KEPT FOR THE PURPOSE OF DETERMINING THE AMOUNT SPENT FOR OLD AGE PENSIONERS. REPORT SHOWS NUMBER OF PERSONS WHO RECEIVED PENSIONS DURING LAST MONTH OF EACH YEAR, TOTAL AMOUNT PAID IN PENSIONS DURING LAST MONTH IN EACH YEAR, AVERAGE MONTHLY ALLOWANCE PER PERSON IN DECEMBER, FOR

6. Contents—continued EACH YEAR, TOTAL AMOUNT PAID IN PENSIONS DURING YEAR (FROM JAN. TO DEC.) AND NUMBER OF NEW PENSIONS GRANTED DURING YEAR.

7. Arrangement CHRONO. BY YEAR OF REPORT.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by

title and identification number)

9. Writing TYPED ON MIMEOGRAPH FORM.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF TRANSFER CASE; 11" X 12" X 24". 3, REPORTS IN CASE.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents) 7

11. Location by dates and quantities 1937 TO 1938, 1 TRANSFER CASE ON EAST WALL IN ROOM #206.
(Room, vault, etc. E. G. W., section, bin, shelf, cabinet, on floor)

12. Other information CONDITION OF RECORD & CONTAINER GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication)

(Date of publication)

KOVAKA-NIEDENTOHLE 5-8-39

(Worker's full name)

(Date)

139-I.

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~████~~ BALTIMORE CITY. State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.

(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE (ROOM #206)

(Name of building, room number, street address)

1. Title "SERVICE ORDERS-REQUISITIONS-PURCHASE ORDERS-
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

CASH VOUCHERS-SURPLUS COMMODITY REPORTS-REFORMA-
TORY REPORTS-CORRESPONDENCE-OLD AGE PENSION REPORTS-
MOTHERS RELIEF REPORTS. (MOTHERS RELIEF REPORTS).

2. Dates 1937 (INC) (Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1, CARD BOARD TRANSFER CASE.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling AS SHOWN ONLINE ONE WITH YEAR NUMBERS 1937
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS MONTHLY REPORTS OF NUMBER OF
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record.

FAMILIES RECEIVING ASSISTANCE UNDER MOTHERS
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by

RELIEF PLAN. THE PURPOSE OF THE RECORD IS KEPT
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

FOR D.P.W. OFFICE REFERENCE. REPORT SHOWS NUM-
BER OF CHILDREN, AMOUNT OF MONEY ALLOTTED
FOR CURRENT MONTH, ALSO SHOWS THE NUMBER
OF FAMILIES, NUMBER OF CHILDREN AND AMOUNTS
SPENT FOR PREVIOUS MONTHS BY THE D.P.W.

6. Contents—continued DURING 1937.

7. Arrangement CHRONO. BY MONTH OF YEAR, 1937.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPED ON PLAIN PAPER.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF TRANSFER CASE: 11" X 12" X 24", CONTAINING 12 REPORTS.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1937 (INC.) ON WOODEN SHELF AGAINST EAST WALL OF RECORD STORE ROOM - ROOM #206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information CONDITION OF RECORDS & CONTAINER GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

NOTE: THE ABOVE RECORDS ARE FILED IN SAME TRANSFER CASE CONTAINING - SERVICE ORDERS - REQUISITIONS - PURCHASE ORDERS - CASH VOUCHERS - SURPLUS COMMODITY REPORTS - REFORMATORY REPORTS - CORRESPONDENCE - OLD AGE PENSIONS.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

(Miscellaneous)

1 Cardboard transfer case labeled as follows

1937 ~~~~~

A "Service Orders."

B "Requisitions."

C "Purchase Orders."

D "Cash Vouchers."

E Surplus Commodity Reports.

F Old Reformatory Reports.

G Correspondence.

H Old Age Pension.

I Mothers Relief.

KOVAKA-NIEDENTOHLE 5-8-39. #140.
(Worker's full name) (Date) (Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title (PAID BILLS-HOSPITALS).
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1927-1935 (INCLUSIVE).
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2, WOODEN BOXES.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling 1 BOX LABELED "COURT PAPERS 1812-1832 - 1 BOX "COURT
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE. [PAPERS 1833-1834.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS PAID BILLS FROM VARIOUS HOSPITALS IN
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
CITY, RESPECTING CHARGE ACCOUNTS OF CITY PATIENTS FOR BOARD AND MEDICAL SERVICE RENDERED. THEY ARE KEPT FOR D.P.W. OFFICE REFERENCE PURPOSES. BILL SHOWS NAME AND ADDRESS OF HOSPITAL, TOTAL DAYS BILLED, TOTAL DAYS ADDED, TOTAL DAYS REDUCTED, NUMBER OF ADJUSTED DAYS, TOTAL DAYS ALLOWED, RATE PER DAY, TOTAL AMOUNT OF

6. Contents—continued BILL, CERTIFICATION OF OFFICER, RESPECTING PERSONS ACCEPTED AS PROPER SUBJECTS, FOR MUNICIPAL AID; ALSO SHOWS NAMES OF PATIENTS, DISEASES, DATES ADMITTED, DATES DISCHARGED, NUMBER OF DAYS IN HOSPITAL ALSO NAME OF ^(cont. on line 12)
7. Arrangement ALPHA BY NAME OF HOSPITAL AND CHRONO. UNDER
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE. [EACH HOSPITAL.]
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing TYPED ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF WOODEN BOXES; 11" X 13" X 24"; APPROX.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
4000 BILLS IN EACH BOX OR APPROX 8000 IN ALL.
11. Location by dates and quantities 1927-1935 - 2 WOODEN BOXES
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
AGAINST EAST WALL OF RECORD STORE ROOM, ROOM # 206.
12. Other information CONDITION OF RECORDS & EQUIPMENT GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
(CONTINUED FROM ITEM # 6) - CLERK, A MONTHLY SUMMARY OF BILLS IS ATTACHED TO BILL. SUMMARY SHOWS NAME OF HOSPITAL, MONTH, NUMBER OF PATIENTS RECEIVED AND DISCHARGED EACH DAY DURING MONTH. NUMBER OF PATIENTS LEFT IN HOSPITAL AT CLOSE OF EACH DAY WITH TOTALS AT BOTTOM OF SHEET. BILL ALSO SHOW PERFORATION, DATE PAID AND STAMPED
Whether record is known to have been kept earlier than dates shown in item 2)
13. (For use in Florida.) Early imprints ON REVERSE SIDE WITH DATE RECEIVED IN BUREAU OF DISBURSEMENTS AND VOUCHER NUMBER OF PAYMENT.
(Author) (Publisher)
(Place of publication) (Date of publication)

NOTE: THIS RECORD DEALS WITH PAID BILLS (CLOSED ACCOUNTS) FOR ACTIVE RECORD, SEE SERIAL # 109B.

#140

(Paid Bills - Hospitals)

2 Wooden boxes labeled as follows

Court Papers 1812 - 1832

Court Papers 1833 - 1834

KOVAKA-NIEDENTOHLE 5-10-39.

(Worker's full name)

(Date)

141 - A.

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST PAUL PLACE (ROOM #206).
(Name of building, room number, street address)

1. Title PAID BILLS-REQUISITIONS-SERVICE ORDERS-PURCHASE
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
ORDERS." (REQUISITIONS AND PURCHASE ORDERS).
or both)

2. Dates 1936.
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1, CARDBOARD BOX.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling FOR LABELING, SEE ADDENDA SHEET ATTACHED.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS FINANCIAL DIVISION COPIES OF REQUIS.
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
ITIONS AND PURCHASE ORDERS FOR MATER-
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
IAL PURCHASED FOR VARIOUS DIVISIONS IN THE DEPT.
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
OF PUBLIC WELFARE, FILED IN SAME BOX CONTAINING
PAID BILLS, FROM PSYCHOPATHIC HOSPITAL CHILD-
REN'S INSTITUTIONS, REFORMATORIES, BLIND (WORKSHOP)
BLIND (SCHOOL) 1933-1935; ALSO SERVICE ORDERS
1936, THEY ARE KEPT AS AN OFFICE RECORD FOR FUTURE

6. Contents—continued REFERENCE PURPOSE RESPECTING COSTS,
TERMS, ETC.

NOTE: SEE SERIALS, #139B, 139C, FOR DESCRIPTION
OF FORM.

7. Arrangement _____
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by
title and identification number)

9. Writing TYPED AND HANDWRITTEN ON PRINTED FORM.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF BOX; 11" X 13" X 24", APPROX. 4,000 IN BOX.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1936 - IN CARBOARD BOX, ON SHELF;
(Room. vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
AGAINST EAST WALL, OF RECORD STORE ROOM,
ROOM #206.

12. Other information CONDITION OF RECORDS AND CONTAINER, GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

NOTE: ABOVE RECORDS FILED IN SAME BOX CON-
TAINING, PAID BILLS - SERVICE ORDERS - PURCHASE
ORDERS.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication)

(Date of publication)

KOVAKA - NIEDENTOHLE - 5-11-39.

(Worker's full name)

(Date)

141-B.

(Form Identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE. (ROOM #206).
(Name of building, room number, street address)

1. Title "PAID BILLS-REQUISITIONS-SERVICE ORDERS-PURCHASE ORDERS."
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both) (SERVICE ORDERS).

2. Dates JAN. 1936 - JUNE 1936 (INCLUSIVE).
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 CARDBOARD BOX.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling FOR LABELING, SEE ADDENDA SHEET ATTACHED.
(Explain fully: years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS FINANCIAL DIVISION COPIES OF SERVICE ORDERS FOR VARIOUS DIVISIONS OF THE DEPT. PUBLIC WELFARE, FILED IN SAME BOX CONTAINING PAID BILLS, REQUISITIONS AND PURCHASE ORDERS AND KEPT AS AN OFFICE RECORD FOR FUTURE REFERENCE PURPOSE RESPECTING EXPENDITURES, SERVICE ORDERS SHOW NAME OF DIVISION OF (D.P.W.), VENDOR'S NAME AND ADDRESS, DATE OF ORDER, SERVICE ORDER NUMBER,

6. Contents—continued APPROPRIATION ACCOUNT NUMBER, OTHER ACCOUNT NUMBERS, QUANTITY AND DESCRIPTION OF ARTICLES AND DETAILS IN REGARD TO AGREEMENT REACHED COVERING, PRICE, TERMS, ETC., DELIVERY ADDRESS AND NAME OF OFFICER IN
(CONTINUED TO ITEM #12)

7. Arrangement ALPHA. BY NAME OF VENDOR.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPED ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF BOX. 11"X13"X24". APPROX. 2,500 SERVICE ORDERS IN BOX.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities FROM JAN. 1936 - JUNE 1936 INC.,
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
IN CARDBOARD BOX, ON SHELF, AGAINST EAST WALL OF RECORD STORE ROOM, ROOM #206.

12. Other information CONDITION OF RECORDS & CONTAINER, GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
(CONTINUED FROM ITEM #6) - DEPARTMENT BY WHOM ORDERED.
Whether record is known to have been kept earlier than dates shown in item 2)

NOTE: ABOVE RECORDS FILED IN SAME BOX CONTAINING PAID BILLS - REQUISITIONS - PURCHASE ORDERS.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

KOVAKA-NIEDENT.OHL. 5-16-39

(Worker's full name)

(Date)

141-C.

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #377, ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title "PAID BILLS-REQUISITIONS-SERVICE ORDERS-PURCHASE ORDERS." (PAID BILLS-PSYCHOPATHIC HOSPITAL).
(Give present full title in quotes: assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1933-1935 (INCLUSIVE).
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1, CARDBOARD BOX.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling FOR LABELING SEE ADDENDA SHEET, ATTACHED.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents MONTHLY STATEMENTS FROM PSYCHOPATHIC HOSPITAL OF CHARGE ACCOUNTS FOR BOARD AND MEDICAL SERVICE RENDERED TO PATIENTS CERTIFIED BY THE D.P.W. KEPT AS AN OFFICE RECORD RESPECTING DISTRIBUTION OF EXPENDITURES FROM FUNDS; STATEMENT SHOWS, NAME AND ADDRESS OF HOSPITAL, TOTAL DAYS BILLED, TOTAL DAYS ADDED, TOTAL DAYS DEDUCTED, NUMBER OF ADJUSTED DAYS, TOTAL DAYS ALLOWED, RATE PER DAY, TOTAL AMOUNT OF BILL, CERTIFICATION OF OFFICER
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued IN HOSPITAL RESPECTING PERSONS ACCEPTED AS PROPER SUBJECTS FOR MUNICIPAL AID; ALSO SHOWS NAMES OF PATIENTS, DISEASES, DATES ADMITTED, DATES DISCHARGED, NUMBER OF DAYS IN HOSPITAL AND SIGNATURE OF PRINCIPAL CLERK. A SUMMARY SHEET IS ATTACHED TO STATEMENT —
[CONTINUED TO ITEM #12].

7. Arrangement CHRONO. BY MONTH OF STATEMENT UNDER NAME OF —
[HOSPITAL.]
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by

title and identification number)

9. Writing TYPED ON PRINTED FORM.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF BOX. 11" X 13" X 24", APPROX. 2500 PAID BILLS IN BOX.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1933-1935- INCLUSIVE IN CARBOARD BOX,
(Room. vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
ON SHELF, AGAINST EAST WALL, IN RECORD STORE ROOM,
ROOM #206.

12. Other information CONDITION OF RECORDS AND CONTAINER, GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
(CONTINUED FROM ITEM #6) — SHOWING NAME OF HOSPITAL, MONTH,
Whether record is known to have been kept earlier than dates shown in item 2)
NUMBER OF PATIENTS ADMITTED, NUMBER DISCHARGED EACH DAY,
NUMBER OF PATIENTS LEFT IN HOSPITAL AT CLOSE OF EACH DAY
STATEMENT ALSO BEARS PERFORATIONS PAID, WITH DATE
RECEIVED IN BUREAU OF DISBURSEMENTS AND VOUCHER NUM-
BER OF PAYMENT. — NOTE: THE ABOVE RECORD IS KEPT IN SAME
CONTAINER WITH "BILLS- CHILDRENS INSTITUTIONS- 1933-1934-1935"

13. (For use in Florida.) Early imprints REFORMATORIES- 1933-1934-1935, BLIND.
(Author) (Publisher)
(WORKSHOP) 1933-34-35- BLIND (SCHOOL) 1933-34-35, REQUIS-
(Place of publication) (Date of publication)
ITIONS AND PURCHASE ORDERS 1936. SERVICE ORDERS JAN.
1936- JUNE 1936 INCLUSIVE.

KOVAKA-NIEDENTOHLE 5-16-39.

(Worker's full name)

(Date)

191-D.

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~City~~ BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE (ROOM #206)
(Name of building, room number, street address)

1. Title "PAID BILLS-REQUISITIONS-SERVICE ORDERS-PUR-CHASE ORDERS" (PAID BILLS-CHILDREN'S INSTITUTIONS)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1933-1935 (INCLUSIVE).
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 CARDBOARD BOX.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling FOR LABELING SEE ADDENDA SHEET ATTACHED.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINS QUARTERLY STATEMENTS FOR CHILDREN'S INSTITUTIONS IN BALTIMORE CITY OF CITY CHARGES, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by FOR BOARD, ETC. KEPT AS AN OFFICE RECORD RESPECTING THE DISTRIBUTION OF FUNDS. STATEMENTS HEADED THE MAYOR AND CITY COUNCIL OF BALTIMORE, SHOW NAME AND ADDRESS OF INSTITUTION, DATE ENDING OF QUARTER WITH YEAR NUMBER; NUMBER OF DAYS AND RATE, ALSO TOTAL AMOUNT OF BILL, CERTIFICATION BY FINANCIAL

6. Contents—continued SUPERVISOR AS TO CORRECTIONS ALSO CERTIFICATION BY ASSISTANT DIRECTOR, RESPECTING PERSONS ACCEPTED AS PROPER SUBJECTS OF MUNICIPAL AID; LIST OF INMATES, SHOWING IDENTIFICATION NUMBERS, NAMES OF INMATES, SHOWING IDENTIFICATION NUMBERS
(CONTINUED TO ITEM #12)
7. Arrangement NUMERICALLY BY QUARTER OF YEAR, UNDER NAME
(Chronologically—by what? Numerically—by what? Alphabetically—by what?) [OF REFORMATORY.]
8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing TYPED ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size DE BOX; 11" X 13" X 24"; APPROX. 108 STATEMENTS
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
AVERAGE 7 SHEETS PER STATEMENT.
11. Location by dates and quantities 1933-1935 (INC.) - ON WOODEN SHELF,
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
AGAINST EAST WALL OF RECORD STORE ROOM.
ROOM #206.
12. Other information CONDITION OF RECORDS AND CONTAINER, GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
(CONTINUED FROM ITEM #6). — NAMES OF INMATES, CHECK
Whether record is known to have been kept earlier than dates shown in item 2)
MARKS (AS CHECKED AGAINST REPORTS), DATES ACCEPTED,
DATES LEFT, NUMBERS OF DAYS, REMARKS RELATING TO
INMATES RECAPTURED, COMMITTED BY JUVENILE COURT,
PAROLED, IN CUSTODY OF RELATIVE, ETC.
NOTE. THE ABOVE RECORD IS KEPT IN SAME CONTAIN-
ER WITH; BILLS - PSYCHOPATHIC 1933-1934-1935; REFORM-
13. ~~(For use in Florida)~~ Early imprints ATORIES 1933-1934-1935; BLIND
(Author) (Publisher)
(WORKSHOP) 1933-34-35; BLIND (SCHOOL) 1933-1934-1935.
(Place of publication) (Date of publication)

KOVAKA-NIEDENTOHLE 5-17-39.

(Worker's full name)

(Date)

141-E.

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT OF PUBLIC WELFARE-FINANCIAL DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE. (ROOM #206)
(Name of building, room number, street address)

- Title "PAID BILLS-REQUISITIONS-SERVICE ORDERS-PURCHASE ORDERS" (PAID BILLS-BLIND (WORKSHOP), BLIND or both)
(Give present full title in quotes: assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities)
- Dates 1933-1935 (INCLUSIVE). (SCHOOL)
(Earliest and latest dates; missing dates. Show exact date of breaks)
- Quantity 1, CARDBOARD BOX.
(Number of volumes; file drawers; file boxes; bundles; other)
- Labeling FOR LABELING, SEE ADDENDA SHEET, ATTACHED.
(Explain fully; years; numbers; letters; number of records so labeled)
- Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS QUARTERLY STATEMENTS, FOR BLIND (WORKSHOP) AND BLIND (SCHOOL) IN BALTIMORE CITY, OF CITY CHARGES FOR BOARD ETC. KEPT AS AN OFFICE RECORD, RESPECTING THE DISTRIBUTION OF FUNDS. STATEMENT HEADED MAYOR AND CITY COUNCIL OF BALTIMORE SHOWS, AMOUNT OF BILL, NUMBER OF INMATES ACCEPTED, NUMBER OF INMATES WHO LEFT INSTITUTION AND
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued TOTAL NUMBER OF INMATES IN INSTI-
UTION AT PRESENT.

7. Arrangement NUMERICALLY, BY QUARTER OF YEAR.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by
title and identification number)

9. Writing TYPED ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF CARBOARD BOX; 11" X 13" X 24"; APPROX. 24 DOC-
UMENTS, AVERAGE 6 SHEETS PER DOCUMENT.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1933-1935 (INC.) - ON WOODEN SHELF;
AGAINST EAST WALL OF RECORD STORE ROOM,
ROOM # 206.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information CONDITION OF RECORDS AND CONTAINER GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)
NOTE: THE ABOVE RECORD IS KEPT IN SAME CON-
TAINER WITH; BILLS - PSYCHOPATHIC - 1933-1934-1935;
CHILDREN'S INSTITUTIONS - 1933-1934-1935; REFORM-
ATORIES. 1933-1934-1935.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Bills - Requisitions - Service Orders - Purchase Orders.

1 Cardboard box labeled as follows

D.P.W. Financial Division

Bills - Psychopathic 1933-1934-1935

Childrens Institutions 1933-1934-1935

Reformatories 1933-1934-1935

Blind (Work Shop) 1933-1934-1935

Blind (School) 1933-1934-1935

Requisitions and Purchase Orders 1936

Service Orders Jan. 1936 - June 1936 incl.

INDEX OF DEPT. PUBLIC WELFARE - HOSPITALIZATION DIVISION, 327 ST PAUL PLACE.

80

SERIAL NO.	SERIAL DATES	TITLE OF RECORD	DATE OF RECORD
142	Nov. 7-1939	(CARD RECORD OF HOSPITALIZATION BILLS FOR CLIENTS UNABLE TO PAY FULL AMOUNT, BUT OBLIGATE THEM SELF TO PAY STIPULATED AMOUNT BY PAYMENT OVER A PERIOD OF TIME)	1926--
143	Nov. 7-1939	(RECORD OF CASE HISTORIES ON HOSPITALIZATION OF RELIEF CLIENTS SENT TO HOSPITALS UNDER DEPT. PUBLIC WELFARE)	1926--
144	Nov. 8-1939	(CARD RECORDS OF HOSPITALIZATION OF ALL CLIENTS, WHERE IN DEPT. PUBLIC WELFARE, HAS CONTRACT WITH HOSPITALS)	1926--
145	Nov. 8-1939	"OBSTETRICAL CASE HISTORIES, "ACTIVE"	1935--
146	Nov. 9-1939	(CASE HISTORIES OF PSYCHOPATHIC PATIENTS SENT TO CITY & STATE INSTITUTIONS, BY DEPT. OF WELFARE PSYCHOPATHIC DIVISION) INACTIVE)	1926--
147	Nov. 9-1939	(CASE HISTORIES OF PSYCHOPATHIC PATIENTS SENT TO CITY & STATE INSTITUTIONS BY DEPT. OF WELFARE - HOSPITALIZATION DIVISION, "ACTIVE")	1926--
148	Nov 9-1939	(CARD RECORD OF PSYCHOPATHIC CASE HISTORIES OF PATIENTS, SENT TO CITY HOSPITALS & STATE INSTITUTIONS BY DEPT. PUBLIC WELFARE UNDER CONTRACT; ACTIVE & INACTIVE)	1926--
149	Nov. 10-1939	(HOSPITAL REPORTS TO DEPT. OF WELFARE ON PSYCHOPATHIC PATIENTS, THAT HAVE BEEN RECEIVED, DISCHARGE, DIED OR PAROLED)	1933--

and monthly duty rosters, miscellaneous notices, movement orders, organization and post exchange credit allowances, laundry receipts, statements, special orders (local and regimental), physical examination reports, company fund vouchers showing receipts and expenditures for reports, company fund vouchers showing receipts and expenditures for organization activities; also correspondence relating to the personnel. Filed by subject. (Older records, rarely; current records, daily, official.) 9 x 12 folders, 4 ft. 6 in., in drawer of steel filing case. Orderly Room (Bldg. L). (206)

1876. PAYROLLS, 1932 to date. Date, payroll voucher number, name of organization, regiment, station, signatures of disbursing officer and of organization commander; and names, ranks, and serial numbers of service men receiving pay. Filed chronologically. (Frequently, official.) $4\frac{1}{2}$ x 8 folded sheets, 5 in., in field desk. Orderly Room (Bldg. L). (208)

1877. COMMISSARY ACTIVITY RECORDS, INACTIVE, July 1932 - June 1936. Daily charge sales slips, monthly statements of accounts, daily summary of sales, invitations to bid, contracts, abstracts of bids, requisitions, receiving reports, changes in War Department procurement authority; ice, ration, and savings accounts; tally sheets, purchase orders, vouchers, delivery slips, post and War Department circulars, special orders, memoranda and miscellaneous correspondence relating to the activities of this office. Filed chronologically. (Seldom, official.) Various sized sheets, folders, and pads, 117 ft., in 52 pasteboard boxes. Attic (Bldg. M). (66)

1878. CCC FILE, 1933 - 1935. Personnel reports, ratings, amounts of pay, allotments, discontinuances of allotments, athletic activities, etc. Filed numerically. (Seldom, official.) 10 x 12 folders, 1 ft., in drawer of wooden filing case. Quartermaster's Office (Bldg. K). (2)

1879. MOTOR VEHICLE RECORD BOOK, Jan. 1933 to date. QMC Form 248, showing from whom vehicle was received, date, registration number, make, operation, maintenance cost, and depreciation. These records are retained only during the life of the truck; when the truck is condemned or salvaged the records are sent to the office of the quartermaster. Filed chronologically. (Frequently, official.) $6\frac{1}{2}$ x $9\frac{1}{2}$ loose-leaf books, 1 in., in drawer of steel filing case. E. Side (Bldg. P). (216)

1880. PURCHASE ORDERS, July 1933 to date. Form QMC 308. Contract, purchase order, and requisition numbers; location, date of purchase, authority number, date of bid, from whom purchased, terms of delivery, where inspected, quantities or unit purchased, description of articles, unit price and total amount of purchase, vouchers, delivery and tally slips and relating correspondence.

O'KEEFE, RICH. NIEDENTHOL, NOV. 7, 1939.

(Worker's full name)

(Date)

(Form identification number)

WORKS PROGRESS ADMINISTRATION
 DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
 THE HISTORICAL RECORDS SURVEY: 1937
 1734 NEW YORK AVE. NW.
 WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPT. PUBLIC WELFARE - (HOSPITALIZATION DIVISION)
 (Office of custody) (Office which made the record, if different)

Address of office of custody 327 ST. PAUL PLACE ROOM #203
 (Name of building, room number, street address)

- Title CARD RECORD OF HOSPITALIZATION BILLS FOR CLIENTS UNABLE TO PAY FULL AMOUNT, BUT OBLIGATE THEMSELVES TO PAY STIPULATED AMOUNT, BY PARTIAL PAYMENT, OVER A PERIOD OF TIME
 (Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
- Dates 1926--
 (Earliest and latest dates; missing dates. Show exact date of breaks)
- Quantity 2 STEEL DRAWERS, AVERAGE 480 TO DRAWER
 (Number of volumes; file drawers; file boxes; bundles; other)
- Labeling 1-DRAWER PAID BILLS A TO L E Y 1 DRAWER PAID BILLS L1 TO Z
 (Explain fully; years; numbers; letters; number of records so labeled)
- Discontinued and missing records NONE
 (If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

- Contents CONTAINS A CARD RECORD OF PAID BILLS FOR HOSPITALIZATION OF CLIENTS OF DEPT. OF WELFARE, CARDS SHOW, NAME & ADDRESS OF CLIENT, AMOUNT OF CHARGE, NAME & ADDRESS OF CONTRIBUTOR, BASIS OF PAY OR TERMS OF AGREEMENTS, MONTHLY OR QUARTERLY, DAY MONTH & YEAR OF ADMITTANCE, DAY, MONTH & YEAR OF DISCHARGE, AMOUNT OF BILL AND DATE OF PAYMENT. SEE FORM ATTACHED.
 (Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued _____

7. Arrangement ALPHABETICALLY, BY SUR NAME OF PATIENT.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPE WRITTEN ON PRINTED FORM
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF CABINET 6'x8'x15' CARD 5"x8' APPROX 960
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1926 -- IN STEEL CABINET E WALL ROOM #203
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
DEPT. OF WELFARE 327 ST PAUL PLACE

12. Other information RECORD EQUIPMENT - GOOD
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication)

(Date of publication)

NIEDENTOHL-RICH-O'KEEFE 11-7-39 #143
(Worker's full name) (Date) (Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPT. PUBLIC WELFARE-HOSPITALIZATION DIV.
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE (ROOM #203)
(Name of building, room number, street address)

1. Title (RECORD OF CASE HISTORY ON HOSPITALIZATION OF RELIEF CLIENTS SENT TO HOSPITALS UNDER DEPT. PUBLIC WELFARE)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1926-- [CONTRACT WITH HOSPITAL OF ALL CASES EXCEPT PSYCHOPATHIC & MATERNITY]
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 2 STL. CABINETS, 47 DRAWERS AVER 20 FOLDERS PER DRAWER, APPROX.
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling SEE ADDENDASHEET (150 SHEETS PER FOLDER)
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINS INDIVIDUAL HOSPITAL CASE HISTORY RECORDS OF PUBLIC WELFARE CLIENTS, IN TAB FOLDERS, FOLDERS their headings, etc. IF A VERY GENERAL OR MISCELLANEOUS RECORD, DETAILED INFORMATION AS TO TYPES OF RECORDS CONTAINED AND DATES COVERED BY CONTAIN CASE HISTORIES OF CLIENTS AS SHOWN ON TAB AT TOP OF FOLDER. HISTORY SHEET-HOSPITAL DIVISION FORM, SHOWS DATE OF APPLICATION FOR ADMITTANCE, NAME AND ADDRESS (BOTH PRESENT AND PREVIOUS) OF PATIENT, AGE, SEX, COLOR, RELIGION, MARITAL STATUS-IF DIVORCED, WIDOW OR WIDOWER, OR SINGLE.
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued HOW LONG, IN CITY, MONTHS, YEARS, OCCUPATION,
IN MIDDLE OF FORM. SHOWS NAMES OF RELATIVES OF
PATIENT, THEIR ADDRESSES, PHYSICAL CONDITION, OCCUPA-
TION, ON BOTTOM OF FORM GIVES TYPE OF MALADY, ATTENDING
PHYSICIAN, LENGTH OF ILLNESS, IN CASE OF DEATH, WHO WILL
BURY PATIENT? (CONTINUED TO ITEM #12)
7. Arrangement FOLDERS ARRANGED ALPHAB. BY SURNAME OF PATIENTS
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing HANDWRITTEN ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF 35 SMALL DWRS. 12" X 7" X 20," AVER. 20 FOLDERS APPROX. 150
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
SHEETS PER FOLDER, SIZE 12 LARGE DWRS 15" X 16" X 24" AVER.
35 FOLDERS, 150 SHEETS PER FOLDER.
11. Location by dates and quantities 1926-- INSTL. CABINETS; AGAINST EAST
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
WALL, ROOM # 203, DEPT. PUBLIC WELFARE.
12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
(CONTINUED FROM ITEM #6) ~ NAME OF COMPANY PATIENT IN-
Whether record is known to have been kept earlier than dates shown in Item 2)
SURED, AMOUNT, INCOME OF PATIENT, PAST PENSION, SALARY,
SICK BENEFITS, VALUABLE OR PROPERTY, DATES OF PREVIOUS
TREATMENTS, HOW MUCH PATIENT OR FRIENDS CAN
CONTRIBUTE TOWARDS TREATMENT PER WEEK, TO WHOM
TO BILL, NAME OF PARTY, ADMITTANCE PERMIT WAS IS
SUED & DATE, ON BOTTOM SHOWS SIGNATURE OF APPLICANT
13. (For use in Florida.) Early imprints AND ADDRESS, IF PATIENT IS SUF
(Author) (Publisher)
FERING FROM TUBERCULOSIS ANOTHER FORM TITLED
(Place of publication) (Date of publication)
"TUBERCULOSIS MADE OUT AND ATTACHED TO HISTORY-
SHEET. TUBERCULOSIS FORM GIVES DATE, CASE NUM-
BER, DATE OF APPLICATION FOR ADMITTANCE, NAME AND
ADDRESS, OF PATIENT, AGE, SEX, COLOR, RACE, BIRTHPLACE,

(RECORD OF CASE HISTORY, ON HOSPITALIZATION OF RELIEF CLIENTS, SENT TO HOSPITALS UNDER DEPT. PUBLIC WELFARE CONTRACT WITH HOSPITALS OF ALL CASES EXCEPT PSYCHIATRY & MATERNITY)

(CONTENTS, ITEMS #6812 CONTINUED)

ADDENDA.

~ MARITAL STATUS, WIDOW, WIDOWER, OR SINGLE
 HOW LONG IN CITY? - YEARS, MONTHS. OCCUPATION, DURA-
 TION OF COUGH, PRESENT WEIGHT, MAXIMUM WEIGHT, HIS-
 TORY OF HEMORRHAGE, EXTENT AND LOCATION OF LUNG
 INVOLVEMENT, CHARACTER OF LESION, IS THE LARYNX-
 LYMPH GLANDS - PERITONEUM - INTESTINES - BONES - GENERAL
 NERVOUS SYSTEM INVOLVED? IF EVER TREATED PREVIOUSLY,
 IN WHAT INSTITUTION, WHEN AND FOR HOW LONG?, SOURCE
 OF PAYMENT FOR PREVIOUS TREATMENT?, TO WHAT HOS-
 PITAL DOES PATIENT DESIRE TO BE ADMITTED, - MUNICIPAL
 TUBERCULOSIS HOSPITAL, STATE SANITARIUM, EUDOKWOOD,
 MT. PLEASANT. SIGNATURE AND ADDRESS OF EXAMINING
 PHYSICIAN. RECOMMENDATION BY HEAD OF HOSPITAL
 IZATION DIVISION THAT APPLICANT BE PLACED ON
 WAITING LIST OF THE ABOVE HOSPITALS. SEE CITY
 WAITING LIST FORM ATTACHED WITH SIGNATURE.
 FORMS ATTACHED.

1. Identification Number _____ Employed Through _____
 (Last name of applicant) (First) (Middle)
2. Address _____ Reemployment service _____
3. Sex: Male Female _____
4. Race: White Negro Indian Chinese Japanese Filipino Other _____
 (Specify)
5. Date of birth _____
6. Economic head of a family: Yes No _____ (Location of service) _____
 Relief organization _____
7. Persons in family: Total persons No. _____ (Name of relief organization) _____
 Dependent persons No. _____
8. Record all changes in occupation or wage rates of employee (Enter first assignment on line(A):

Date of Change	Occupation	Hourly Rate	Reason for Change	Person Authorizing Change
A				
B				
C				
D				

9. Earnings Record:

Week ending	Hours worked	Payment	Week ending	Hours worked	Payment	Week ending	Hours worked	Payment	Week ending	Hours worked	Payment

CITY OF BALTIMORE
DEPARTMENT OF PUBLIC WELFARE
HISTORY SHEET—HOSPITAL DIVISION

DATE OF APPLICATION FOR ADMIT _____

NAME _____ BIRTHPLACE _____

AGE ____ SEX ____ COLOR ____ RELIGION _____ MARRIED ____ SINGLE ____ DIVORCED ____ WIDOW ____ WIDOWER ____

PRESENT ADDRESS _____ HOW LONG _____

PREVIOUS ADDRESS _____ " " _____

" " _____ " " _____

HOW LONG IN CITY _____ YEARS _____ MONTHS _____ OCCUPATION _____

NAMES	RESIDENCE	PHYSICAL CONDITION	OCCUPATION	EARNINGS
HUSBAND				
WIFE				
FATHER				
MOTHER				
SONS				
DAUGHTERS				
BROTHERS				
SISTERS				
OTHERS				

APPARENT MALADY _____

ATTENDING PHYSICIAN _____ LENGTH OF PRESENT ILLNESS _____

IN CASE OF DEATH WHO WILL BURY PATIENT _____

COMPANY IN WHICH PATIENT IS INSURED _____ AMOUNT _____

INCOME OF PATIENT } SALARY
 } EARNINGS _____ AMOUNT IN BANK OR BLDG. ASSO. _____

DOES PATIENT RECEIVE PENSION _____ SICK BENEFITS _____

ANY OTHER INCOME _____ ANY VALUABLES OR PROPERTY _____

DATES OF PREVIOUS TREATMENTS _____

SOURCE OF PAYMENT FOR PREVIOUS TREATMENTS _____

HOW MUCH CAN PATIENT OR FRIENDS CONTRIBUTE TOWARDS TREATMENT _____ PER WEEK _____

BILL TO _____

ADMIT ISSUED TO _____ DATE _____

THE ANSWERS TO ALL OF THE QUESTIONS IN THE AFOREGOING APPLICATION HAVE BEEN GIVEN BY ME AND REPRESENT A FULL AND TRUTHFUL STATEMENT.

NAME OF APPLICANT _____ ADDRESS _____

TUBERCULOSIS

Date.....

No. _____ Date of application for admit, _____
Name, _____ Race _____ Birthplace, _____
Age, _____ Sex, _____ Color, _____ Married, _____ Single, _____ Widow, _____ Widower, _____
Residence, _____ How Long? _____
How long in city? _____ years, _____ months, _____ Occupation, _____
Duration of Cough; _____ Present weight; _____ Maximum weight (date), _____
History of Hemorrhage, _____ Fever _____ Pulse, _____
Extent and location of lung involvement: _____

Character of lesion,

Is the Larynx—Lymph Glands—Peritoneum—Intestines—Bone—General Nervous System involved?
Scratch out all except proper answer.

If ever treated previously, in what institution, when, and for how long?

Source of payment for previous Treatment?

Can applicant be provided with heavy overcoat, thick hat with ear pieces, winter suit of clothes, two suits of heavy underwear, thick stockings, heavy shoes, overshoes, heavy slippers, night clothes, dressing gown and mittens?

To what hospital does patient desire to be admitted: Municipal Tuberculosis Hospital, State Sanatorium, Eudowood, Mt. Pleasant?

Will patient be willing to go to any other than one desired if he is not admitted to his choice?

I, a registered physician of Maryland, have examined the applicant named above and have caused this form to be filled out—

(Signed)

Address

This application must be presented within one week to The Supervisors of City Charities at their office, Room 122 City Hall; at which time instructions will be given for the examination of the applicant.

I recommend that this applicant be put on the City's waiting list and that he is a suitable case for the Municipal Tuberculosis Hospital, State Sanatorium, Incipient Hospital, Advanced Hospital, Eudowood, Mt. Pleasant.

Date,

(Signed)

CITY WAITING LIST

DATE OF APPLICATION:.....

NAME:.....

ADDRESS:.....

SANATORIUM:.....STATE:.....EUDOWOOD:.....MOUNT PLEASANT:.....

CLASS:.....MALE:.....FEMALE:.....INCIPIENT:.....ADVANCED:.....AGE:.....

ENTERED SANATORIUM:.....

DISCHARGED FROM SANATORIUM:.....

REMARKS:.....

(RECORD OF CASE HISTORY, ON HOSPITALIZATION, OF RELIEF CLIENTS, SENT TO HOSPITALS, UNDER DEPT. PUBLIC WELFARE)

LABELING ITEM # 4 - CONTINUED

ADDENDA

1- DRAWER-LABELED-AA-TO-ANDERSON	1-DRAWER, LABELED-JACOB-TO-JOHNSON-ELIZ.
1- " " ANELLO-TO-BAKZ.	1- " " JOHNSON, ELL-TO-JONES-H.
1- " " BAL- "-BAUST-	1- " " JONES-I- "-KELLY
1- " " BAV- "-BERNE	
1- " " BERN- "-BOG-	
1- " " BOH- "-BRADR-	
1- " " BRADS- "-BROWN-	
1- " " BROWN- "-BUZ-	
1- " " BUD- "-BZ-	
1- " " CA- "-CATH-	
1- " " CATI- "-CLARK-	
1- " " CLARK- "-COMN-	
1- " " CONN- "-COZ-	
1- " " CRA- "-DANH-	
1- " " DANI- "-DEL-	
1- " " DELG- "-DOBR-	
1- " " DOBS- "-DUF-	
1- " " DUG- "-ELLIN-	
1- " " ELLIOTT- "-FAUNS-	
1- " " FAUNT- "-FLZ-	
1- " " FO- "-FREID-	
1- " " FREIF- "-GAZ-	
1- " " GEA- "-GN-	
1- " " GOA- "-GRAY/A-TO-G	
1- " " GRAY-H-Z-TO-GROSS	
1- " " GROSSA- "-HAMMEL	
1- " " HAMMELA- "-HARRIS	
1- " " HARRISON- "-HEK-	
1- " " HEL- "-HILTE-	
1- " " HILTI- "-HOPKINS	
1- " " HOPL- "-HUNT	
1- " " HUNTER- "JACKSON	

handled during month; also any changes in equipment during month. Filed chronologically. (Monthly, official.) 8 x 12 $\frac{1}{2}$ sheets, 1 in., in drawer of steel filing case. Radio Room (Bldg. B). (220)

220. INCOMING AND OUTGOING RADIOGRAMS, Jan. 1, 1936 to date. Records of headquarters messages and all kinds of outgoing and incoming messages. These reports are kept six months and then destroyed. Filed chronologically. (Rarely, official.) 8 x 8 $\frac{1}{2}$ sheets, 1 ft., in drawer of steel filing case. Radio Room (Bldg. B). (219)

Research Section

221. BALLISTIC COMPUTATION AND RESEARCH, 1918 to date. Original drawings and charts of Ballistic Computation Section. Further information not available because of the confidential nature of records. Filed alphabetically and numerically. 4 x 6 alphabetical card index, 40 ft. 6 $\frac{1}{2}$ in. (Older records, rarely; current records, daily, official.) 12 $\frac{1}{2}$ x 26 and 26 x 30 folders and rolls, 87 ft. 1 $\frac{1}{2}$ in., in 48 drawers of steel and wooden filing cases. 1st floor (Bldg. A). (137)

222. REPORTS ON RESEARCH WORK AT ABERDEEN PROVING GROUND, 1935 - 1936. Copies of ballistic reports on research work at Aberdeen Proving Ground. Filed numerically. 8 x 10 $\frac{1}{2}$ alphabetical index sheet. (Occasionally, official.) 8 $\frac{1}{2}$ x 11 $\frac{1}{2}$ folders, 7 in., in drawer of steel filing case. 1st floor (Bldg. A). (136)

223. WORKING NOTES, Dates not revealed. Of the Record Division. Further information not available because of the confidential nature of records. (Daily, official.) 9 $\frac{1}{2}$ x 14 $\frac{1}{2}$ folders, 6 in., in drawer of steel filing case. 1st floor (Bldg. A). (138)

Reserve Officers' Training Corps

224. CHECK BOOK AND VOUCHERS, June 1936 to date. Checks drawn on allotment of camp expenditure, and vouchers supporting same. Filed numerically. (Daily, official.) 10 x 14 and 4 x 6 vols. and folded papers, 1 in., on desk. Mess Hall (Bldg. H). (247)

225. MONTHLY MESS ACCOUNT, June 1936 to date. Number of men rationed, ration for the day, daily allowance from company fund, day's income from boarders and other sources, purchases from commissary and Post Exchange, and total cost. Filed alphabetically. (Daily, official.) 10 $\frac{1}{2}$ x 15 loose-leaf book, $\frac{1}{2}$ in., on table. Mess Hall (Bldg. H). (246)

226. MISCELLANEOUS FILE, June 1936 to date. Assignments of officers, students, camp attendants, clothing and equipment; also inspections, marksmanship, night firing, payroll, physical examination, ration returns, schedules of instructors and students, and miscellaneous records accumulated during the six-weeks period of training, then filed in Post Headquarters for future use in subsequent camps. Filed alphabetically. (Daily, official.) 8 x 10 $\frac{1}{2}$ folders, 9 in., in drawer of steel filing case. Headquarters Office (Bldg. E). (248)

(RECORD OF CASE HISTORY, ON HOSPITALIZATION, OF RELIEF CLIENTS, SENT TO HOSPITALS, UNDER PUBLIC WELFARE.)

LABELING ITEM #4 CONTINUED:

ADDENDA

1-	DOUBLE DRAWER LABEL	KLEN-TO-KREL	KREM-TO-LESS
1-	"	LEST-McCARTHY	McCARTI-TO-MARI-
1-	"	MARJ-MICHA	MICHE-I. MORRIS-
1-	"	J. MORRIS-NOE	NOF-PARR-
1-	"	PARS-PLI	PLI-RAU-
1-	"	RAUA-C. ROBERTS	D. ROBERTS-TO-ROZ-
1-	"	RYA-SCHOL	SCHOM-SHAZ
1-	"	SHE-SMAZ	SME-SOLT-
1-	"	SOM-STOD	STOE-S. TAYLOR
1-	"	T. TAYLOR-TO-TRAY	TRAW-WALD-
1-	"	WALDA-WEIMB	WEINC-C. WILLIAMS
1-	"	D. WILLIAMS-TO-WOM	WON-ZZ-

95. ACCOUNTING FOR PROPERTY, 1919 to date. Reports of surveys, return on property and supplies, shortage, losses, and damages. Filed alphabetically, numerically, and topically. 4 x 6 alphabetical card index, 141 ft. (Older records, rarely; current records, daily, official.) 8 x 10 $\frac{1}{2}$ folders, 3 ft. 7 in., in 3 drawers of steel filing case. 1st floor, E. wing (Bldg. A). (23)

96. CORRESPONDENCE ON FUNDS, 1919 to date. Reports of laws and regulations concerning funds, allotments, property accounts, and rations. Filed alphabetically, numerically, and topically. 4 x 6 alphabetical card index, 141 ft. (Older records, rarely; current records, daily, official.) 8 x 10 $\frac{1}{2}$ folders, 7 ft. 1 in., in 5 drawers of steel filing cases. 1st floor, E. wing (Bldg. A). (22)

97. SCHOOL APPLICATIONS, 1920. Application forms and correspondence. These records are applications from soldiers entering the military schools; also records of the diplomas received. Filed chronologically. (Rarely, official.) 8 x 10 $\frac{1}{2}$ folders, 7 in., in drawer of steel filing case. Vault (Bldg. I). (150)

98. SUMMARY OF CORRESPONDENCE AND RECORDS, 1920 - 1922. Showing subject and comment. Filed chronologically. (Occasionally, official.) 8 x 10 $\frac{1}{2}$ loose-leaf books, 2 ft. 2 in., in 2 drawers of steel filing case. Vault (Bldg. I). (184)

99. RESERVE OFFICERS, 1921 to date. Records of Ordnance Reserve Corps, concerning officers appointed to and stationed at this post in case of emergency. Filed alphabetically and numerically. 4 x 6 alphabetical card index, 141 ft. (Occasionally, official.) 8 x 10 $\frac{1}{2}$ folders, 2 ft. 6 in., in 2 drawers of steel filing case. 1st floor, E. wing (Bldg. A). (34)

100. RESERVE OFFICERS' TRAINING CORPS, 1921 to date. General reports pertaining to summer camps of the Reserve Officers' Training Corps, organized for six weeks of each year since 1917. Filed numerically and alphabetically. 4 x 6 alphabetical card index, 141 ft. (Older records, rarely; current records, daily, official.) 8 x 10 $\frac{1}{2}$ folders, 1 ft. 10 in., in 2 drawers of steel filing case. 1st floor, E. wing (Bldg. A). (37)

101. TELEGRAMS AND PLANT ORDERS, 1922 - 1933. Typewritten copies of telegrams; showing name of party to whom telegram is addressed, date, and signature of sender. Plant orders are also included in this file. Filed alphabetically and chronologically. (Occasionally, official.) 8 x 10 $\frac{1}{2}$ loose-leaf books, 9 ft. 4 in., in 5 drawers of steel filing cases. Vault (Bldg. I). (179)

Meteorological Service

102. SPECIAL WIND ALOFT DATA, 1918 to date. Form 987 - Local, showing recordings of wind directions and speed, and altitude in meters computed from air soundings; for use in connection with artillery firing programs. Filed chronologically. (Older records, rarely; current records, daily, official.) 8 x 10 $\frac{1}{2}$ bundles, 2 ft., in drawer of steel filing case. Meteorological Room (Bldg. B). (211)

KEEFE, RICH NIEDENTOHLE
(Worker's full name)

11-8-39
(Date)

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPT. PUBLIC WELFARE (HOSPITALIZATION DIVN)
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 ST. PAUL PLACE ROOM # 203
(Name of building, room number, street address)

1. Title (CARD RECORD OF HOSPITALIZATION OF ALL CLIENTS, WHERE-
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
'IN DEPT. PUBLIC WELFARE, HAS CONTRACT WITH HOSPITALS.)
or both)

2. Dates 1926 - - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 6 STEEL CABINETS, DOUBLE DRAWER
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling SEE APPENDIX SHEET.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another
record. Explain why records are missing, if possible)

6. Contents CONTAINS CARD INDEX RECORD OF PATIENTS SENT TO HOS-
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
PITALS UNDER CONTRACT WITH CITY, FOR TREATMENT.
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
CARD SHOWS: NAME & ADDRESS OF PATIENT, NAME OF HOSPITAL
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
TO WHICH ADMITTED AND DATE DISCHARGED. PERTINENT INFORMATION
IS TRANSFERRED FROM CASE HISTORY TO THIS FILE FOR QUICK
ACCESS TO INFORMATION DESIRED.

6. Contents—continued _____

7. Arrangement ALPHABETICAL, BY SUR NAME OF PATIENT.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPE WRITTEN ON PLAIN WHITE CARD
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size 52 X 12" X 24" CABINET. SIZE OF CARD 3" X 5". AVERAGE 3000 TO DRAWER.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1926- - 6 STEEL CABINETS AGAINST S. WALL ROOM #203
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information RECORDS & EQUIPMENT - GOOD
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication)

(Date of publication)

(CARD RECORD OF HOSPITALIZATION, OF ALL CLIENTS, EXCEPT MENTAL CASES WHEREIN DEPT. PUBLIC WELFARE HAS CONTRACT WITH HOSPITALS)

LABELING ITEN #4 CONTINUED

ADDENDA

1- DOUBLE-DRAWER LABELED -	AA - ALLE	ALLEN - ANDREW
1- " " "	ANDREWS - AUSTE	AUSTIN - W. BAKER
1- " " "	BAKLOR - P. BARNES	R. BARNES - BEA
1- " " "	BEACH - BENDL	BENDERMAN - BH
1- " " "	Bi - BLEY	BLI - BOON
1- " " "	BOONE - BOYCE	BOYD - BRESL
1- " " "	BRESNICK - W. BROOKS	BROOKSBANK - K. BROWN
1- " " "	L. BROWN - BRYANT	BRYDEN - BURNO
1- " " "	BURNS - BYRL	BYRNE - CAREY
1- " " "	CARF - CASE	CASEY - CHENOWIRTH
1- " " "	CHENOWITH - H. CLARK	J. CLARKE - COLE
1- " " "	COLEBAUGH - CONTEE	CONTES - COSTELLA
1- " " "	COSTELLO - CROMER	CROMIE - DAIL
1- " " "	DAILEY - K. DAVIS	L. DAVIS - DELUC
1- " " "	DELUE - R. DIGGS	S. DIGGS - DONZ
1- " " "	DOO - DRUMMEY	DRUMMOND - EATM
1- " " "	EATON - ELSE	ELSK - EZ
1- " " "	FABER - L. FIELDS	M. FIELDS - FLETCHER
1- " " "	FLEN - D. FOWLER	E. FOWLER - FRIEDMAN
1- " " "	FRIEDT - GARE	GAREY - GERRANT
1- " " "	GERRE - GLOVER	GLOVI - GRAB
1- " " "	GRACE - M. GREEN	N. GREEN - P. GROSS
1- " " "	R. GROSS - D. HALL	E. HALL - HARDEE
1- " " "	HARDEN - HARRIS	HARRISON - HAYD
1- " " "	HAYES - HENL	HENN - HILDE
1- " " "	HILDI - HOFFMAN	HOFFM - HOPF
1- " " "	HOPKINS - HUDNUT	HUDSON - IMW
1- " " "	IN - JACOBSON	JACOBU - JEZ
1- " " "	Ji - J. JOHNSON	K. JOHNSON - D. JONES
1- " " "	E. JONES - JORY	JOS - JEC
1- " " "	JED - KER	JES - KJ
1- " " "	KL - KOP	KOR - KUD
1- " " "	KUE - LANGLEY	LANGO - L. LEE
1- " " "	M. LEE - D. LEWIS	E. LEWIS - LITTLE
1- " " "	LITTLEFIELD - F. LUCAS	G. LUCAS - MAGGE
1- " " "	MAGGI - MARLEM	MARLOW - MARTHA

1. Identification Number _____ Employed Through _____
 (Last name of applicant) (First) (Middle)
2. Address _____ Reemployment service _____
3. Sex: Male Female
4. Race: White Negro Indian Chinese Japanese Filipino Other _____
 (Specify)
5. Date of birth _____
6. Economic head of a family: Yes No (Location of service) _____
 Relief organization _____
7. Persons in family: Total persons No. _____ (Name of relief organization) _____
 Dependent persons No. _____
8. Record all changes in occupation or wage rates of employee (Enter first assignment on line(A):

Date of Change	Occupation	Hourly Rate	Reason for Change	Person Authorizing Change
A				
B				
C				
D				

9. Earnings Record:

Week ending	Hours worked	Payment	Week ending	Hours worked	Payment	Week ending	Hours worked	Payment	Week ending	Hours worked	Payment

PERSONNEL RECORD CARD FOR EMPLOYEES Civil Works Administration of _____
 (Print name) 16-1501

1-	DOUBLE DRAWER, LABELED	MARTHAS-MCCLEARY	MCCLELLAN-McHON
1-	"	McHUGH - MEISEL	MEISEN - MILER
1-	"	MILES - MILW	MINIMS - MOONEY
1-	"	MOONEYHAN - MOSBE	MOSBY - MUSC
1-	"	MUSE - NETZEL	NEU - NOVAC
1-	"	NOVAK - OREL	OREM - PARKE
1-	"	PARKE - PEAR	PEARCE - PFINGST
1-	"	PFISTER - POHLMAN	POINDEXTER - D. PRICE
1-	"	E. PRICE - RAFTERY	RAGAN - REESE
1-	"	REESER - I. RICHARDSON	J. RICHARDSON - I. ROBERTS
1-	"	I. ROBERTS - ROHRN	ROHRER - RUCKEL
1-	"	RUCKER - SAMPSE	SAMPSON - SChAP
1-	"	SCHAPIRO - SCHULT	SCHULTZ - SEITL
1-	"	SEITZ - SHEP	SHER - SIMMONT
1-	"	SIMMS - A. SMITH	B. SMITH - L. SMITH
1-	"	M. SMITH - SOK	SOL - STALLI
1-	"	STALK - B. STEWART	C. STEWART - STRUBIN
1-	"	STRUCK - TALBOT	TALBOTT - THEIRF
1-	"	THEIS - THORIC	THORN - TRENDR
1-	"	TRENT - UNDERK	UNDERW - VYSK
1-	"	WABELL - I. WALTER	J. WALTERS - H. WATKINS
1-	"	I. WATKINS - WEITZ	WEITZEL - F. WHITE
1-	"	G. WHITE - WILKINS	WILKINSON - WILLIAMS
1-	"	WILLIAMSON - WINTERK	WINTERL - WOODWARD
1-	"	WOODWIN - C. YOUNG	D. YOUNG - ZYWICKI

Identification Number _____

1. (Last name of applicant) (First) (Middle) _____ Employed Through: _____

2. Address _____ Reemployment service _____

3. Sex: Male Female _____

5. Date of birth _____

4. Race: White Negro Indian Chinese Japanese Filipino Other _____
(Specify)

6. Economic head of a family: Yes No

(Location of service) Relief organization

7. Persons in family:

Total persons No. _____ (Name of relief organization)

Dependent persons No. _____

8. Record all changes in occupation or wage rates of employee (Enter first assignment on line(A):

Date of Change	Occupation	Hourly Rate	Reason for Change	Person Authorizing Change
A				
B				
C				
D				

9. Earnings Record:

Week ending	Hours worked	Payment	Week ending	Hours worked	Payment	Week ending	Hours worked	Payment	Week ending	Hours worked	Payment

PERSONNEL RECORD CARD FOR EMPLOYEES Civil Works Administration of _____ (Print name) 16-1501

O'KEEFE, DIEDENTOHL, RICH.
(Worker's full name)

NOV. 8, '39
(Date)

#145
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE, CITY State MARYLAND

Name of agency or office DEPT. WELFARE (MATERNITY DIVN.)
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST PAUL PL. ROOM # 205
(Name of building, room number, street address)

1. Title "OBSTETRICAL CASE HISTORIES 'ACTIVE'"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1935 - - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 3 DOUBLE DRAWERS 89 FOLDERS AVER 100 CASES PER FOLDED
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling 1935 - - 1-DRAWER LABELED "OBSTETRICS," 1-DRAWER, No. 1-1499
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE (CONT'D TO ITEM #12)
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS OBSTETRICAL CASE HISTORIES, ON HOSPITALIZATION OF
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,

PATIENTS SENT BY MATERNITY DIVISION TO HOSPITALS.
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by

HISTORY SHEET FORM IS IDENTICAL AS USED IN SERIAL #146
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

NOTE: SEE FORM ATTACHED.

6. Contents—continued _____

7. Arrangement NUMERICAL, BY CASE No.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HAND WRITTEN ON PRINTED FORM
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF CABINET 11 1/2" X 16" X 24" 89 FOLDERS APPROX 9900 CASES
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1955-60. ONE WALL ROOM # 305
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information RECORD EQUIPMENT - GOOD
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

CONT'D FROM ITEM #4

1-DRAWER No. 1500 - 2999, 1-DRAWER, No 3000 - 5099,

1-DRAWER No 5100 - 6999, 1-DRAWER No. 7000 -

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

145

HISTORY SHEET—HOSPITAL DIVISION

DATE OF APPLICATION FOR ADMIT _____

NAME _____ BIRTHPLACE _____

AGE _____ SEX _____ COLOR _____ RELIGION _____ MARRIED _____ SINGLE _____ DIVORCED _____ WIDOW _____ WIDOWER _____

PRESENT ADDRESS _____ HOW LONG _____

PREVIOUS ADDRESS _____ " " _____

" " _____ " " _____

HOW LONG IN CITY _____ YEARS _____ MONTHS _____ OCCUPATION _____

NAMES	RESIDENCE	PHYSICAL CONDITION	OCCUPATION	EARNINGS
HUSBAND				
WIFE				
FATHER				
MOTHER				
SONS				
DAUGHTERS				
BROTHERS				
SISTERS				
OTHERS				

APPARENT MALADY _____

ATTENDING PHYSICIAN _____ LENGTH OF PRESENT ILLNESS _____

IN CASE OF DEATH WHO WILL BURY PATIENT _____

COMPANY IN WHICH PATIENT IS INSURED _____ AMOUNT _____

INCOME OF PATIENT } SALARY
EARNINGS _____ AMOUNT IN BANK OR BLDG. ASSO. _____

DOES PATIENT RECEIVE PENSION _____ SICK BENEFITS _____

ANY OTHER INCOME _____ ANY VALUABLES OR PROPERTY _____

DATES OF PREVIOUS TREATMENTS _____

SOURCE OF PAYMENT FOR PREVIOUS TREATMENTS _____

HOW MUCH CAN PATIENT OR FRIENDS CONTRIBUTE TOWARDS TREATMENT _____ PER WEEK _____

BILL TO _____

ADMIT ISSUED TO _____ DATE _____

THE ANSWERS TO ALL OF THE QUESTIONS IN THE AFOREGOING APPLICATION HAVE BEEN GIVEN BY ME AND REPRESENT A FULL AND TRUTHFUL STATEMENT.

NAME OF APPLICANT _____ ADDRESS _____

O'KEEF, NIEDENTOHL, RICH
(Worker's full name)

Nov. 9, '39
(Date)

#146
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPT. WELFARE PSYCHOPATHIC HOSPITALIZATION DIVN.
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 ST. PAUL PLACE ROOM #207
(Name of building, room number, street address)

1. Title CASE HISTORIES OF PSYCHOPATHIC PATIENTS SENT TO CITY & STATE INSTITUTIONS BY DEPT. OF WELFARE PSYCHOPATHIC HOSPITALIZATION
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1926 - - - - - DIVISION - "INACTIVE"
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 73 SMALL DRAWERS, 4 DOUBLE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling SEE ADDENDA
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINS CASE HISTORIES OF PSYCHOPATHIC PATIENTS SENT TO CITY & STATE INSTITUTIONS BY DEPT. OF WELFARE PSYCHOPATHIC DIVISION. THESE CASES ARE IN ENVELOPES AND REFER TO PATIENTS, WHOSE CASES HAVE BEEN CLOSED; DUE TO DEATH, PAROLE OR DISCHARGED. PSYCHOPATHIC HISTORY SHEET SHOWS, DATE OF APPLICATION FOR ADMITTANCE, NAME, ADDRESS PREVIOUS ADDRESS & BIRTH PLACE OF PATIENT, AGE, COLOR & SEX, MARITAL STATUS, HOW LONG IN CITY, OCCUPATION.
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued HOW LONG HAS MIND BEEN AFFECTED, IN CASE OF DEATH WHO WILL BURY PATIENT, VIOLET, DOES PATIENT RECEIVE A PENSION, IS PATIENT ENTITLED TO SICK BENEFITS, ANY VALUABLES OR PROPERTY, ANY INCOME FROM ANY SOURCE, IF EVER IN HOSPITAL FOR INSANE, WHAT HOSPITAL, WHEN AND HOW LONG. ^{SEE NOTE}

7. Arrangement ALPHABETICAL BY SUR NAME OF PATIENT. (Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing SEPERATE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by

title and identification number)

9. Writing HAND WRITTEN ON PRINTED FORM
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size LARGE DRAWER 11 1/2" x 16" x 24" AV. NO. OF ENVELOPES, SMALL DRAWER 480
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11 1/2" x 7 3/4" x 20" AVERAGE NUMBER OF ENVELOPES 1000

11. Location by dates and quantities 1926 -- SMALL DRAWERS AGAINST N. WALL
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
LARGE DRAWERS AGAINST S. WALL IN ROOM #207

12. Other information RECORDS & EQUIPMENT - GOOD.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

NOTE
SOURCE OF PAYMENT FOR PREVIOUS TREATMENT, RELATIVES, RESIDENCE OCCUPATION, HUSBAND, WIFE, FATHER, MOTHER, SON, DAUGHTER, BROTHER, SISTER, NAME & ADDRESS OF APPLICANT, OTHERS INTERESTED. HOW MUCH CAN FAMILY OR FRIENDS CONTRIBUTE TOWARD MAINTENANCE OF THIS PATIENT, NAME & ADDRESSES OF TWO PHYSICIANS WHO GAVE CERTIFICATES OF INSANITY.

13. (For use in Florida.) Early imprints VISITING CARD ISSUED & RENEWED, ADMIT ISSUED TO TRANSFERRED TO HOSPITAL, DISCHARGED, DIED. SEE FORM ATTACHED.
(Author) (Publisher)
(Place of publication) (Date of publication)

NOTE: ENVELOPES CONTAIN ONE CASE RECORD, ON OUTSIDE OF ENVELOPE SHOWS; NAME OF PATIENT, DATE ADMITTED, DATE RELEASED, DISPOSITION OF CASE (DEATH, PAROLE OR DISCHARGE) THESE RECORDS COVER CASE HISTORIES FROM 1909 TO DATE. ALSO ATTACHED ARE COMMITMENT PAPERS FOR DESCRIPTION OF FORM ^{SEE #147}

#146

CITY OF BALTIMORE
 DEPARTMENT OF PUBLIC WELFARE
 327 ST. PAUL PLACE

HISTORY SHEET—PSYCHOPATHIC DIVISION

Date of application for admit

Name Birthplace

Age Sex Color Married Single Widow Widower

Present address How long

Previous addresses “

“ “ “

“ “ “

How long in city? years months Occupation

How long has mind been affected?

In case of death, who will bury patient? Violent?

Does patient receive a pension? Any valuables or property?

Is patient entitled to sick benefits? Any income from any source?

If ever in Hospital for insane, what Hospital, when and for how long?

Source of payment for previous treatment?

Relatives Residence Occupation

Husband

Wife

Father

Mother

Son

Daughter

Brother

Sister

Name of applicant Residence

Others interested

How much can family or friends contribute toward maintenance of this patient?

Names and addresses of two physicians who gave certificates of insanity

Visiting card issued

Visiting card renewed

Admit issued to

Transferred to

Hospital

Discharged

Died

CASE HISTORIES OF PSYCHOPATHIC PATIENTS SENT TO CITY AND STATE INSTITUTIONS
BY DEPT. OF WELFARE PSYCHOPATHIC HOSPITALIZATION DIVISION. - "INACTIVE"

LABELING ITEM #4 CONTINUED

ADDENDA

1- DOUBLE DRAWER, LABELED } S. ARRON - TO - S. ANDERSON
T. ANDERSON - TO - J. BAKER

1- " " " " } L. BAKER - TO - BAUMGARTNER
E. BAURENSCHMIDT - TO - M. BERMAN

1- " " " " } M. BERNEY - TO - C.E. BOLANDER
A. BOLARD - TO - G. BRANDT

1- " " " " } H. BRANDT - TO - J.E. BROWN
J.W. BROWN - TO - A. BURRELL

1- SINGLE DRAWER, LABELED M. BURRELL - TO - JOHN CAPE

1- " " " " B. CAPEL - " - MARY CAST.

1- " " " " D. CASTELLIZZI - " - W.M. CLARK

1- " " " " W.C. CLARK - " - E.J. CONLEY

1- " " " " E. CONLON - " - M. COTTER

1- " " " " C. COTTMAN - " - J. CURRAN

1- " " " " J.J. CURRAN - " - ANNA DAWSON

1- " " " " EDW. DAWSON - " - C. DAHIEL

1- " " " " W.G. DIAMOND - " - J.J. DOORY

1- " " " " M. DONOGHUE - " - CLARA DULL

1- " " " " A. DULSKI - " - J.P. ELLERS

1- " " " " I. ELLICOTT - " - JOSEPH FAY

1- " " " " VINCENT FAZZI - " - M.E. FISHPAW

1- " " " " H. FISKE - " - JOS. FOX

1- " " " " L. FOX - " - E. FUESCH

1- " " " " LEE FUHRER - " - M. GENSTLER

1- " " " " A.G. GENT - " - A. GOLDBERG

1- " " " " C. GOLDBERG - " - F. GRAY

1- " " " " G. GRAY - " - R. GROSS

(CASE HISTORIES OF PSYCHOPATHIC PATIENTS SENT TO CITY AND STATE INSTITUTIONS
 BY DEPT. OF WELFARE PSYCHOPATHIC HOSPITALIZATION DIVISION. - "INACTIVE"
 LABELING ITEM #4 CONTINUED

ADDENDA

1-	SINGLE DRAWER	Labeled	J. GROSSMAN - To - W. HAMMERBACKER
1-	"	"	L. M. HAMMERSCHMIDT - To - W. HARRIS, JR.
1-	"	"	A. HARRISON - " - W ^M . C. HEATH
1-	"	"	A. HEAVER - " - H. HERMAN
1-	"	"	I. HERMAN - " - COBB HODGE
1-	"	"	I. HODGE - " - W ^M . HORTON
1-	"	"	M. HORVITZ - " - W ^M . HYMAN
1-	"	"	M. HYMES - " - V. JENNINGS
1-	"	"	L. JENSON - " - S. JOHNSON
1-	"	"	T. JOHNSON - " - J. KAISS
1-	"	"	A. KAROWSKI - " - J. KELLY
1-	"	"	M. KELLY - " - C. KIRK
1-	"	"	J. KIRK - " - H. KOWALSKI
1-	"	"	ELIZ. KOZAK - " - J. LAMPKING
1-	"	"	V. LAMKOWSKA - " - LEVI LEE
1-	"	"	M. M. LEE - " - M. C. LILLY
1-	"	"	M. LIMDEN - " - S. LYNCH
1-	"	"	D. LYNEMAN - " - CATH. M ^S KEE
1-	"	"	J. M ^C KEIGE - " - H. MALLARD
1-	"	"	E. MALLONEE - " - W ^M . MATTHEWS
1-	"	"	I. MATTINGLY - " - C. MILES WKI
1-	"	"	C. MILHISER - " - CHAS. MOHR
1-	"	"	M. MOLITORE - " - JAS. MULDOON
1-	"	"	M. MULDOON - " - J. E. NELSON
1-	"	"	R. NELSON - " - R. NOTTING
1-	"	"	MARY OATES - " - L. PADGETT
1-	"	"	E. PADIAN - " - K. PEINE
1-	"	"	M. PELLARELLA - " - B. PLACIDE
1-	"	"	K. PLACK - " - S. PROVIDENCE
1-	"	"	J. PRTROS - " - THOS. J. REBER
1-	"	"	J. J. REBHAN - " - H. RICHARDSON
1-	"	"	J. RICHARDSON - " - R. ROBERTSON

1. Identification Number _____ Employed Through: _____
 (Last name of applicant) (First) (Middle)
 2. Address _____ Reemployment service
 3. Sex: Male Female
 4. Race: White Negro Indian Chinese Japanese Filipino Other _____
 5. Date of birth _____
 6. Economic head of a family: Yes No (Location of service) Relief organization
 7. Persons in family: _____ (Name of relief organization)
 Total persons No. _____
 Dependent persons No. _____

8. Record all changes in occupation or wage rates of employee (Enter first assignment on line(A):

Date of Change	Occupation	Hourly Rate	Reason for Change	Person Authorizing Change
A				
B				
C				
D				

9. Earnings Record:

Week ending	Hours worked	Payment	Week ending	Hours worked	Payment	Week ending	Hours worked	Payment	Week ending	Hours worked	Payment

PERSONNEL RECORD CARD FOR EMPLOYEES Civil Works Administration of _____
 (Print name) 16-1501

16-1501 (Print name)

PERSONNEL RECORD CARD FOR EMPLOYEES CIVIL WORKS ADMINISTRATION OF

Week ending	Hours worked	Payment	Week ending	Hours worked	Payment	Week ending	Hours worked	Payment	Week ending	Hours worked	Payment

9. Earnings Record:

Date of Change	Occupation	Hourly Rate	Person Authorizing Change
A			
B			
C			
D			

8. Record all changes in occupation or wage rates of employee (Enter first assignment on line(A):
 Total persons No. _____ (Name of relief organization)
 Dependent persons No. _____
 7. Persons in family: _____ (Specify)
 Yes No
 6. Economic head of a family: _____ (Location of service) Relief organization
 Chinese Japanese Filipino
 5. Date of birth _____
 Male Female
 4. Race: White Negro Indian
 3. Sex: Male Female
 2. Address _____ Reemployment service
 1. (Last name of applicant) (First) (Middle) Identification Number _____ Employed Through: _____

(CASE HISTORIES OF PSYCHOPATHIC PATIENTS, SENT TO CITY AND STATE INSTITUTIONS
By DEPT. OF WELFARE PSYCHOPATHIC, HOSPITALIZATION DIVISION. - "INACTIVE"

LABELING, ITEM #4 CONTINUED

ADDENDA

1-	SINGLE DRAWER	LABELLED	S. ROBERTSON	- To -	ROSSMARK
1-	"	"	G. ROSSWIG	- "	J. W. SANK
1-	"	"	S. SANKINS	- "	G. SCHMIDT
1-	"	"	H. SCHMIDT	- "	H. SEFFUS
1-	"	"	C. SEFTON	- "	W. C. SHIELDS
1-	"	"	G. L. SHILLEN	- "	F. SLACK
1-	"	"	A. M. SLADE	- "	M. H. SMITH
1-	"	"	M. N. SMITH	- "	J. SOULE
1-	"	"	S. SOUTHARD	- "	W. E. STEIN
1-	"	"	E. STEINBACK	- "	F. STRUVE
1-	"	"	E. STUART	- "	F. TAYLOR
1-	"	"	G. TAYLOR	- "	L. THOMPSON
1-	"	"	M. C. THOMPSON	- "	J. TUCKER
1-	"	"	L. TUCKER	- "	H. VOIGT
1-	"	"	E. VOLKER	- "	L. WARD
1-	"	"	M. E. WARD	- "	M. WEENS
1-	"	"	A. C. WEGENER	- "	C. WHITENER
1-	"	"	S. WHITESIDE	- "	T. WILLIAMS
1-	"	"	W. WILLIAMS	- "	F. A. WOLFE
1-	"	"	J. WOLFE	- "	LEE YOUNG
1-	"	"	LLOYD YOUNG	- "	A. ZURICK
1-	"	"	XYLANDER	- "	ZURICK

O'KEEFE, NIEDENTHOL, RICH.
(Worker's full name)

11-19-39
(Date)

#147
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPT. OF WELFARE, PSYCHOPATHIC HOSPITALIZATION DIVISION
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 ST PAUL PLACE ROOM #207
(Name of building, room number, street address)

1. Title CASE HISTORIES OF PSYCHOPATHIC PATIENTS SENT TO CITY & STATE
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
INSTITUTIONS, BY DEPT. OF WELFARE HOSPITALIZATION DIVISION "ACTIVE"
or both)
2. Dates 1926 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 16 DOUBLE DRAWERS AVER. 1000 ENVELOPES TO DRAWER
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling SEE APPENDIX
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another
record. Explain why records are missing, if possible)

6. Contents THIS CONTAINS CASE HISTORIES OF PSYCHOPATHIC PATIENTS SENT
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
TO CITY & STATE INSTITUTIONS BY DEPT. OF WELFARE. THESE
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
ARE ACTIVE CASES. HISTORY SHEET FORM IS IDENTICAL
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
AS USED IN (SERIAL #146 INACTIVE CASES) ATTACHED
TO HISTORY SHEET ARE COMMITMENT CERTIFICATES,
CERTIFICATE FORM SHOWS: TOP OF FORM IS A CERTIFICATION
OF A PRACTICING PHYSICIAN, GIVING STATUS TO PASS
JUDGEMENT ON PATIENTS AS TO THEIR MENTAL STATE

6. Contents—continued PHYSICIAN REPORT SHOWS, DATE OF EXAMINATION
SEX, MARITAL STATUS AND COLOR OF PATIENT. ON BOTTOM OF
CERTIFICATION, HIS STATEMENT, THAT PHYSICIAN UPON EXAMINATION
HAS FOUND IN HIS OPINION, THE PATIENT TO BE OF UNSOUND
MIND AND, SAID PATIENT TO BE CONFINED IN HOSPITAL OR ^{SEE NOTE}
7. Arrangement ALPHABETICAL BY SUR NAME OF PATIENT
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing SEPERATE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing HAND WRITTEN ON PRINTED FORM
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size DOUBLE DRAWER 11 1/2" x 16" x 2 1/4" AV. NUMBER OF ENVELOPES 1000
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities: 1926 - - AGAINST S. WALL ROOM # 207
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information RECORDS & EQUIPMENT GOOD -
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)
INSTITUTION FOR TREATMENT ALSO NAME & ADDRESS OF NEAREST
RELATIVE OR GUARDIAN OF PATIENT, WHETHER PATIENT HAD
OTHER PHYSICAL DEFECTS OR DEFORMITIES AT TIME OF
EXAMINATION, DATE OF FIRST SYMPTOMS NOTED, WHEN PATIENT
FIRST BECAME UNABLE TO WORK, WHAT WORK HAS PATIENT
DONE AND WITH WHAT SUCCESS, IS THE PATIENT SUICIDAL,
13. ~~(For use in Florida.)~~ Early imprints HAS PATIENT DELUSIONS AND HALLUCIN
(Author) (Publisher)
ATIONS, WHICH MAY SEEM DANGEROUS TO PATIENT OR OTHERS.
(Place of publication) (Date of publication)

U. S. GOVERNMENT PRINTING OFFICE O 16-0410

WHETHER WAS EVER CONFINED IN INSTITUTION BEFORE, WHETHER
OTHER MEMBERS OF FAMILY SUFFERED FROM MENTAL DISEASES
CERTIFICATION FROM EXAMING PHYSICIAN, THAT HE IS NOT RELATED TO
PATIENT BY BLOOD OR MARRIAGE, SIGNATURE & ADDRESS OF PHYSICIAN.



STATE OF MARYLAND
BOARD OF MENTAL HYGIENE
BALTIMORE, MARYLAND

Commitment Certificate

I. On this day of, 19....., in the STATE OF MARYLAND,
and in the COUNTY or CITY of.....

I,, a graduate of
..... Medical College, and having practiced as a physician
for five years, DO HEREBY CERTIFY that on the day of, 19.....;

I personally examined age.....;
male, female, single, married, widowed, white, colored, and do believe that the said.....

..... is insane, and that the disease is of
a character which, in my opinion, requires that the above mentioned person be placed in a hospital or
institution in which the insane are detained for care and treatment.

II. I further certify, that the following information is based on a personal examination of the above
mentioned patient and on other information obtained from sources I believe to be reliable.

The patient's nearest relative or guardian, to be notified in case of emergency, is:

Mr. (s) Address

The patient showed the following physical defects, deformities or injuries at the time of the ex-
amination:

.....
.....
.....
.....
.....

The patient's mental condition at the time of the examination was (state what the patient did and
what the patient said during the examination):

.....
.....
.....
.....
.....

The present condition began about: (Date).....

What were the first symptoms noted?.....

.....

.....

.....

.....

What work has the patient done and with what success?.....

.....

When did the patient become unable to work?.....

Is the patient suicidal?.....

Has the patient delusions or hallucinations which seem dangerous to the patient or others? If so, please specify.....

.....

.....

.....

Has this patient ever been in an institution for the insane before?.....

If so, give name and date.....

What history of mental disease is there in the patient's family?.....

.....

.....

.....

III. I further certify that I am not related, by blood or marriage, to the said

..... and am not connected as medical attendant or otherwise with the institution in which the above patient will be detained; and that this certificate is signed and made within one week of the examination of the patient.

Signed M. D.

..... Address

No certificate shall be of force which shall be presented for the commitment of any patient more than thirty days after the examination. Art. 59, Sec. 32, An. Code.

Separate certificates, made and signed by two physicians, must accompany each patient committed to any institution as the institution's authority for detaining the patient. Art. 59, Sec. 32, An. Code.

Special provisions are made for voluntary patients. Art. 59, Sec. 38, An. Code.

Patients sent to any State Hospital as charges against any County (or Baltimore City) must be accompanied by an order from the County Commissioners (in Baltimore City, the Department of Public Welfare) authorizing the Superintendent to receive the patient as a charge against the specified County. Art. 59, Sec. 4, An. Code.

CASE HISTORIES OF PSYCHOPATHIC PATIENTS SENT TO CITY AND STATE INSTITUTIONS,

By DEPT. OF WELFARE HOSPITALIZATION DIVISION; "ACTIVE"

LABELING ITEM #4 CONTINUED

ADDENDA

DOUBLE DRAWERS LABELED, AS BELOW.

A. AAMOUTH - TO - I. BARR	J. BARRACK - TO - R. BLUM
M. BLUMBERG - " - BRUCKEY	H. BRUCKSCH - " - K. CHILLE
H. B. CHENOWITH - " - J. CREWS	L. CRIPPO - " - M. DORNER
E. DORNER - " - D. FAITHFUL	S. FALK - " - L. GABRIEL
L. GAFF - " - C. GRATZ	W. GRATZEL - " - G. HAWKINS
I. HAWKINS - " - W. HORN	F. HORNBERGER - " - JAS. JOHNSON
JESSIE JOHNSON - " - M. A. KEENER	N. KEENER - " - L. KRESJLE
J. KREMEYER - " - W. LIEBERMAN	S. LIEBOWITZ - " - A. MAC DOUGALL
J. MACK - " - A. MENN	W. MENTZEL - " - J. W. MORRISON
M. MORROW - " - H. F. ORTEL	M. ORTMAN - " - W. J. POOLE
F. POPP - " - M. RHONE	G. ARIAL - " - W. J. RUTH
J. RYALL - " - H. SCOTT	M. SCOTT - " - C. SMITH
C. E. SMITH - " - T. STEVENS	E. STEVENSON - " - M. THOMAS
R. L. THOMAS - " - W. WAGNER	H. WAH - " - V. WHEELER
M. WHEELTON - " - R. WOLFGAM	M. R. WOLSKI - " - L. P. ZUROROSKI

ROSEWOOD STATE TRAINING SCHOOL.

Identification Number

Employed Through:

1. (Last name of applicant) (First) (Middle)

2. Address

Reemployment service

3. Sex: Male Female

5. Date of birth

4. Race: White Negro Indian Chinese Japanese Filipino Other (Specify)

6. Economic head of a family: Yes No

(Location of service)

Relief organization

7. Persons in family: Total persons No. (Name of relief organization) Dependent persons No.

8. Record all changes in occupation or wage rates of employee (Enter first assignment on line(A):

Table with 5 columns: Date of Change, Occupation, Hourly Rate, Reason for Change, Person Authorizing Change. Rows A, B, C, D.

9. Earnings Record:

Table with 12 columns: Week ending, Hours worked, Payment, Week ending, Hours worked, Payment, Week ending, Hours worked, Payment, Week ending, Hours worked, Payment.

PERSONNEL RECORD CARD FOR EMPLOYEES Civil Works Administration of

(Print name)

16-1501

16-1501

(Print name)

PERSONNEL RECORD CARD FOR EMPLOYEES CIVIL WORKS ADMINISTRATION OF

Table with 12 columns: Week ending, Hours worked, Payment, Week ending, Hours worked, Payment, Week ending, Hours worked, Payment, Week ending, Hours worked, Payment.

9. Earnings Record:

Table with 5 columns: Date of Change, Occupation, Hourly Rate, Reason for Change, Person Authorizing Change. Rows A, B, C, D.

8. Record all changes in occupation or wage rates of employee (Enter first assignment on line(A):

(Specify)

Total persons No. (Name of relief organization)

7. Persons in family: Yes No

6. Economic head of a family: Yes No

(Location of service) Relief organization

5. Date of birth

Reemployment service

2. Address

1. (Last name of applicant) (First) (Middle)

Identification Number Employed Through:

NIEDENTOHLE - RICH - O'KEEFE 11-9-39 #198
(Worker's full name) (Date) (Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPT. PUBLIC WELFARE - PSYCHOPATHIC HOSPITALIZATION DIVISION
(Office of custody) (Office which made the record, if different)

Address of office of custody #327 ST. PAUL PLACE, ROOM #207.
(Name of building, room number, street address)

1. Title (CARD RECORD OF PSYCHOPATHIC CASE HISTORIES OF PATIENTS SENT TO CITY HOSPITALS & STATE INSTITUTIONS BY DEPT. PUBLIC WELFARE UNDER CONTRACT - ACTIVE AND INACTIVE)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities)
2. Dates 1926 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 1 STL. CABINET, 8 DRAWERS, AVER. 650 CARDS PER DWR.
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling SEE ADDENDA SHEET ATTACHED.
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records NONE.
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINS CARD RECORD OF PSYCHOPATHIC CASE HISTORIES OF PATIENTS SENT TO CITY HOSPITALS & STATE INSTITUTIONS BY DEPT. OF PUBLIC WELFARE UNDER CONTRACT, BETWEEN HOSPITALIZATION DIVISION OF DEPT. OF PUBLIC WELFARE AND VARIOUS CITY & STATE HOSPITALS AND INSTITUTIONS THESE RECORDS REFER TO BOTH INACTIVE AND ACTIVE CASE RECORDS (SEE SERIALS #146 & #147)
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued FOR CASE HISTORIES). CARD GIVES NAME OF PATIENT, NAME OF INSTITUTION, DATE OF COMMITMENT, DATE ADMITTED, DISPOSITION OF CASE—(PAROLE OR DISCHARGE). NOTE:—EACH FILE CARRIES A CARD RECORD OF PATIENTS IN INSTITUTIONS AS—
(CONTINUED TO ITEM #12)

7. Arrangement ALPHA. BY SURNAME OF PATIENT.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPE WRITTEN ON PLAIN WHITE CARD.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL DRAWERS, 9" X 5 1/2" X 14" APPROX. 650 CARDS PER DRAWER. SIZE OF CARD 3" X 5"
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1926-- IN STEEL CABINET AGAINST WEST WALL ROOM #207, PSYCHOPATHIC DIVISION, DEPT. PUBLIC WELFARE.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information CONDITION OF RECORDS & EQUIPMENT GOOD (CONTINUED FROM ITEM #6) ~ SHOWN ON LABELING ON DRAWER.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

(CARD RECORD OF PSYCHOPATHIC CASE HISTORIES OF PATIENTS SENT TO CITY HOSPITALS AND STATE INSTITUTIONS, BY DEPT. PUBLIC WELFARE, UNDER CONTRACT - ACTIVE + INACTIVE.)

LABELING ITEM #4 CONTINUED

ADDENDA

2-DRAWERS	LABEL	-	SPRING GROVE.
1-	"	"	- CROWNSVILLE, FEEBLE MINDED.
1-	"	"	- MT. HOPE.
1-	"	"	- SPRINGFIELD - MEN.
1-	"	"	- " - WOMEN.
1-	"	"	- CROWNSVILLE.
1-	"	"	- ROSEWOOD.

O'KEEFE RICH NIEDENTHAL
(Worker's full name)

Nov-10-1939 -
(Date)

149
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPT. OF WELFARE (HOSPITALIZATION DIVISION)
(Office of custody) (Office which had the record, if different)

Address of office of custody 327 ST PAUL PLACE ROOM # 307
(Name of building, room number, street address)

1. Title (HOSPITAL REPORTS TO DEPT. OF WELFARE ON PSYCHOPATHIC PATIENTS, THAT HAVE BEEN RECEIVED, DISCHARGED, DIED OR PAROLED)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1933 - - -
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 7 VOLUMES LOOSE LEAF BINDER TYPE.
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling SEE ADDENDA
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINS WEEKLY HOSPITAL REPORTS, TO DEPT. OF WELFARE ON PSYCHOPATHIC PATIENTS, THAT HAVE BEEN RECEIVED, DISCHARGED, DIED OR PAROLED. REPORT SHOWS: NAME & ADDRESS OF HOSPITAL OR INSTITUTION. PATIENTS ARE CONFINED, DATE WEEKLY REPORT ENDING, NAME OF PATIENT, SEX, COLOR, DATE OF RECEPTION IN HOSPITAL, DATE OF LEAVING HOSPITAL, DISPOSITION OF CASE (PAROLED, DISCHARGED, DIED) ATTACHED TO WEEKLY REPORT IS AN ENUMERATED COMPOSITE REPORT GIVING THE NUMBER OF MEN, WOMEN & CHILDREN, THAT HAVE BEEN

PAROLED, DISCHARGED, RETURNED AFTER PAROLE, TRANSFERS FROM ONE INSTITUTION TO ANOTHER. NOTE: SEE ATTACHED FORM OVER

6. Contents—continued THESE REPORTS ARE MADE ON A MONTHLY BASIS, FROM WEEKLY REPORTS, AND ARE SENT TO DIRECTOR, DEPT. OF WELFARE. REPORTS ARE MADE UP IN TRIPLICATE; ONE COPY TO DIRECTOR, ONE COPY TO BUREAU OF RECEIPTS AND ONE COPY RETAINED

7. Arrangement CHRONOLOGICALLY, BY DATE
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPEWRITTEN, PRINTED FORM
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of volume 12"x9"x2" AVERAGE 500 PAGES PER VOLUME
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1933-- AGAINST W. WALL ROOM # 307. 327
(Room. vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
ST PAUL PLACE, HOSPITAL DIVISION, DEPT. OF WELFARE

12. Other information RECORDS TEQUIPMENT, GOOD
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

(HOSPITAL REPORTS TO DEPT., OF WELFARE ON PSYCHOPATHIC PATIENTS,
THAT HAVE BEEN RECEIVED, DISCHARGED, DIED, OR PAROLED.

LABELING ITEM # 4. CONTINUED)

ADDENDA

3 Volumes NOT LABELED	}	EASTERN SHORE STATE HOSPITAL
		ROSEWOOD STATE TRAINING SCHOOL
		MT. HOPE RETREAT

1 VOLUME LABELED	SPRINGFIELD
1 " "	CROWNSVILLE
1 " "	SPRING GROVE HOSPITAL
1 " "	BALTIMORE CITY HOSPITALS.

1. Identification Number _____ Employed Through: _____
 (Last name of applicant) (First) (Middle)
2. Address _____ Reemployment service _____
3. Sex: Male _____ Female _____
4. Race: White _____ Negro _____ Indian _____
 Chinese _____ Japanese _____ Filipino _____
 Other _____ (Specify) _____
5. Date of birth _____
6. Economic head of a family: Yes _____ No _____ (Location of service) _____
 Relief organization _____
7. Persons in family: Total persons No. _____ (Name of relief organization) _____
 Dependent persons No. _____
8. Record all changes in occupation or wage rates of employee (Enter first assignment on line(A):

Date of Change	Occupation	Hourly Rate	Reason for Change	Person Authorizing Change
A				
B				
C				
D				

9. Earnings Record:

Week ending	Hours worked	Payment	Week ending	Hours worked	Payment	Week ending	Hours worked	Payment	Week ending	Hours worked	Payment

PERSONNEL RECORD CARD FOR EMPLOYEES Civil Works Administration of _____ (Print name) 16-1501

INDEX OF DEPT. PUBLIC WELFARE, ESTATE DIVISION

327 ST. PAUL ST.

SERIAL NO.	SERIAL DATE	TITLE OF RECORD	DATE OF RECORD
150.	Nov. 13-1939	(INSURANCE ADJUSTMENTS, ON POLICIES HELD BY CLIENTS UNDER AID TO DEPENDENT CHILDREN & GENERAL PUBLIC ASSISTANCE)	1936--
151.	Nov. 13-1939	(INSURANCE ASSIGNMENTS, ON POLICIES HELD BY CLIENTS UNDER OLD AGE PENSION - "COMPLETED CASES")	1936--
152.	Nov. 13-1939	(INSURANCE CLAIM ADJUSTMENTS, ON POLICIES HELD BY CLIENTS, UNDER OLD AGE PENSION, - "NOW DECEASED")	1936--
153.	Nov. 16-1939	(CARD INDEX TO INSURANCE ADJUSTMENTS, ON POLICIES HELD BY CLIENTS, UNDER AID TO DEPENDENT CHILDREN, & GEN'L PUBLIC ASSISTANCE)	1936--
154.	Nov. 16-1939	(CARD INDEX TO INSURANCE ASSIGNMENTS, ON POLICIES HELD BY OLD AGE PENSIONERS, - COMPLETED CASES)	1936--
155.	Nov. 16-1939	(CARD INDEX TO INSURANCE CLAIM ADJUSTMENTS, ON POLICIES, HELD BY CLIENTS UNDER OLD AGE PENSION, NOW DECEASED)	1936--
156.	Nov. 17-1939	(DEATH REPORTS OF CLIENTS, UNDER OLD AGE PENSIONS)	1936--
157.	Nov. 17-1939	(CLIENTS LEDGER RECORD) (OLD AGE PENSIONERS LEDGER RECORD)	1936--
158	Nov. 24-1939	(LIFE INSURENCE ADJUSTMENT RECORDS.)	1935--

also operation supplies used, such as oil, grease, water, kerosene, and lime. Entered chronologically. (Older records, rarely; current records, daily, official.) $8\frac{1}{2}$ x 14 and $14\frac{1}{2}$ x $17\frac{1}{2}$ vols. (18), 1 ft. 8 in., on closed wooden shelf and on desk. Office (Bldg. Q). (214)

1864. CONSTRUCTION RECORDS FILE, 1921 - 1928. Reports on construction of hospital, non-commissioned officers' quarters, and current training camps of this post. Filed numerically. (Rarely, official.) 10 x 12 bundles, 8 ft., in wooden box. Quartermaster Storeroom (Bldg. K). (11)

1865. PROPERTY RECORDS FILE, 1921 to date. Circular letters and work orders for building and repairs, accounting records of the Quartermaster Corps, for plumbing, roofing, general repairs to quarters, cost reports, abstracts to salvage, etc. Current property records can be found in Quartermaster's office, same building. Filed numerically. (Older records, rarely; current records, daily, official.) $8\frac{1}{2}$ x $10\frac{1}{2}$ bundles, 12 ft. 3 in., in 2 drawers of wooden filing case and in 2 wooden boxes. Quartermaster Storeroom (Bldg. K). (8, 7)

1866. MISCELLANEOUS FILE, INACTIVE, 1924 - 1935. Circular proposals; abstracts of proposals, 1926 - 1932; fuel record, 1926 - 1931; bills of lading, correspondence, special orders, bulletins, authorization for payrolls, reports on the CCC, annual inventories, old memorandum receipts, procurement authorities, etc. Filed numerically. (Rarely, official.) 10 x 12 bundles, 42 ft., in 6 wooden boxes. Quartermaster Storeroom (Bldg. K). (15, 14)

1867. UTILITY RECORDS FILE, 1924 to date. Building and repairs, accounting records of the Quartermaster Corps, for plumbing, woodwork, roofing, general repairs to quarters, cost reports, work orders, contracts, abstracts of salvage, and maps of the post and of utilities. Current utility records can be found in Quartermaster's Office. Filed numerically. (Older records, rarely; current records, daily, official.) 10 x 12 folders, 22 ft. 10 in., in 4 drawers of wooden filing case and in 2 wooden boxes. Quartermaster Storeroom (Bldg. K). (13, 12)

1868. STOCK RECORD CARDS FILE, 1925 - 1928. Stock cards for fuel, forage, commissaries, building materials, cartridges, weapons, plumbing supplies, fire equipment, motor vehicles, etc. Filed numerically. (Rarely, official.) 10 x 12 bundles, 8 ft., in wooden box. Quartermaster's Office (Bldg. K). (6)

1869. SALES RECORDS FILE, 1926 - 1931. Duplicate copies in book form of all Quartermaster sales made through commissary, both cash and charge. Filed numerically. (Rarely, official.) 5 x 8 vols., 30 ft. 6 in., in 3 wooden boxes. Quartermaster's Office (Bldg. K). (9)

O'KEEFE, RICH. NIEDENTON
(Worker's full name)

NOV. 13 '39
(Date)

150
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPT. OF WELFARE, ESTATE DIVISION
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 ST. PAUL PLACE ROOM #310
(Name of building, room number, street address)

1. Title (INSURANCE ADJUSTMENTS; ON POLICIES, HELD BY CLIENTS
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
UNDER AID TO DEPENDENT CHILDREN, & GENERAL PUBLIC ASSISTANCE)
or both)

2. Dates 1936 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2 STEEL FILE DRAWERS - 15 FOLDERS OVER, 20 PAGES TO FOLDER
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling SEE ITEM #12
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINS INSURANCE ADJUSTMENTS TO CLIENTS IN CATEGORY OF;
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
"AID TO DEPENDENT CHILDREN," "GENERAL PUBLIC ASSISTANCE,"
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
RECORD SHOWS: WORKERS REPORT ATTACHED, TO INSURANCE COMPANY'S
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
ADJUSTMENT. "SEE FORMS ATTACHED"

6. Contents—continued _____

7. Arrangement ALPHABETICALLY, BY SUR NAME OF CLIENT.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing SEPARATE - SEE SERIAL #153
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPEWRITTEN ON PRINTED FORM
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size FILE DRAWER 11" x 13 1/2" x 29" AVERAGE 300 PAGES PER DRAWER
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1936--AGAINST E. WALL ESTATE DIVISION ROOM #210
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
327 ST. PAUL PLACE. DEPT. OF PUBLIC WELFARE

12. Other information RECORDS Y EQUIPMENT - GOOD
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
(LABELING CONT'D FROM ITEM #4) DRAWERS LABELED AS FOLLOWS
Whether record is known to have been kept earlier than dates shown in item 2)
1-DRAWER - A.D.C. Y GENERAL PUBLIC ADJUSTMENT - A-H
1- " " " " " " I-X.Y.Z.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Name _____

G.P.A. A.O.C.

Date _____

150

Address _____

Worker _____

1. REPORT ON INSURANCE ADJUSTMENT

The client has received check for adjustment For \$ _____

Deduct for premiums _____
To be budgeted _____

(Section below to be filled in by Supervisor and returned to Insurance Advisor)

11. DISPOSITION OF CASE

- 1. Case Continued Reason _____
- 2. Relief discontinued From _____
- 3. Case Closed Date _____

Normal Budget \$ _____

Give details of how cash is being budgeted below:

_____ weeks @ Normal Budget \$ _____

Special Items Allowed:

_____ \$ _____

_____ \$ _____

_____ \$ _____

TOTAL _____

REMARKS:

SUPERVISOR

To be forwarded attached to First Sheet

Social Agency Case No.

Social Agency (Print)

Name of Family..... (Last Name) (Print) (First Name)

Address..... (Print) City..... State.....

Address (Print)

Signed..... Date.....
 (Case Worker's Name)

- 1. Number of persons in family.....1a. Color.....
- 2. Date agency accepted case.....
- 3. Facts to aid in the adjustment:
 - a. Cause of and estimated length of dependency.....
 - b. Health condition of each insured member of family that might affect reinsurance—Good, Fair or Poor.....
 - c. Amount of cash needed immediately and for what.....
 - d. Approximate amount of premiums after adjustment.....
- 4. Total income now, excluding relief—per week \$.....
 - 5. a. Cash Relief..... b. Work Relief..... c. Relief in Kind.....

Metropolitan **POLICY DATA** **Prudential**

Address..... (To Be Copied From Policies) Address.....

Name of District..... City & No. of District.....

1	2	3	4	5	6	7 Premium		9	10	11
						Amount	DATE TO WHICH Premiums are Paid Obtain from Premium Book or receipts *			
Name of Company, Met, Pru, or J. H.	Policy Number	Date of Issue	Kind of Policy	Face Amount of Policy	Age Stated on Policy	Amount	DATE TO WHICH Premiums are Paid Obtain from Premium Book or receipts *	Liens or Waivers Stamped on Policies Give Amounts and Dates	Name of Insured	Father, Mother, Son, Grandson, etc.

- INSTRUCTIONS:**
1. Group all policies in the John Hancock, Metropolitan and Prudential for each member of the family, placing the father's first, the mother's second, and the children's according to age, after those of the parents. On each individual life, if there is more than one policy, put the oldest policy first, and the succeeding ones according to age of policy, irrespective of the insurance company. ALL policies in these companies must be reported for adjustment.
 2. See 3-B. If health of any insured member is poor, state nature of impairment or illness.
 3. See 3-C. Outline the amounts of cash needed for current necessities—food, fuel, clothing and rent.
 4. It is important that you list fully the correct address of the district office where premiums are paid, or of the district covering the address of the policies that are lapsed. Check with the client as to address and name of Metropolitan district and address and number of Prudential district.

PLEASE DO NOT WRITE BELOW
FOR USE OF L.I.A.B. ONLY

Policy To Cont. Yes or No	Paid-Up Value	Ext. Ins.		With Pure End't	Cash Value	Changed to W. L. or E. @ 80 Paid-up at 70 or 75			Memorandum	
		Yrs.	Days or Wks.			For	Weekly Prem. of	And Paid-up Ins.		And Cash Payt.

N.B. Explain to clients non-forfeiture values and change from Endowment to Whole Life, with difference in values returned as paid-up endowment policy or cash (SEE HAND BOOK ON LIFE INSURANCE).
 *For other policies see receipts; state if paid Monthly (M), Quarterly (Q), Semi-annually (S.A.), Annually (A). Give date to which paid.

**Form 1
NOTICE TO SOCIAL AGENCY**
Please follow instructions on second sheet
and be sure Form is completed before
mailing to L.I.A.B.. Retain third sheet
for your file.

Retain this Copy

LIFE INSURANCE ADJUSTMENT BUREAU
450 Seventh Avenue, New York, N. Y.

For L.I.A.B. use only
L.I.A.B. No.
Date

Social Agency
(Print)

Social Agency Case No.....

Address..... City..... State.....
(Print)

Name of Family.....
(Last Name) (Print) (First Name)

Address
(Print)

Signed..... Date.....
(Case Worker's Name)

If case sent in before give L.I.A.B. number.....

1. Number of persons in family.....
- 1a. Color.....
2. Date agency accepted case.....
3. Facts to aid in the adjustment:
 - a. Cause of and estimated length of dependency.....
 - b. Health condition of each insured member of family that
might affect reinsurability—Good, Fair or Poor.....
 - c. Amount of cash needed immediately and for what.....
 - d. Approximate amount of premiums after adjustment.....
4. Total income now, excluding relief—per week \$.....
5. a. Cash Relief..... b. Work Relief..... c. Relief in Kind.....

Metropolitan

POLICY DATA

Prudential

Address..... (To Be Copied From Policies) Address.....
Name of District..... City & No. of District.....

1 Name of Company: Met. Pru. or J. H.	2 Policy Number	3 Date of Issue	4 Kind of Policy	5 Face Amount of Policy \$	6 Age Stated on Policy	Premium		9 Liens or Waivers Stamped on Policies Give Amounts and Dates	10 Name of Insured	11 Father, Mother, Son, Grandson, etc.
						7 Amount \$	8 DATE TO WHICH Premiums are Paid Obtain from Premium Book or receipts *			

**N.B. Explain to clients non-forfeiture values and change from Endowment to Whole Life, with difference in values returned as paid-up
endowment policy or cash (SEE HAND BOOK ON LIFE INSURANCE).
*For other policies see receipts; state if paid Monthly (M), Quarterly (Q), Semi-annually (S.A.), Annually (A). Give date to which paid.**

O'KEEFE, RICH. NIEDENTOHLE
(Worker's full name)

Nov. 19, 39
(Date)

151
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPT. OF WELFARE, ESTATE DIVISION.
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 ST. PAUL PLACE, ROOM # 210
(Name of building, room number, street address)

1. Title INSURANCE ASSIGNMENTS, ON POLICIES HELD BY CLIENTS
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
"UNDER OLD AGE PENSION - COMPLETED CASES"
or both)

2. Dates 1936 - -
(Earliest and latest dates; missing dates. Show exact date of breaks) IN DRAWERS

3. Quantity 5 STEEL FILE DRAWERS, AVER. 15 FOLDERS, 20 PAGES TO FOLDER
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling SEE ITEM # 12
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINS INSURANCE ADJUSTMENTS TO CLIENTS UNDER OLD AGE PENSION.
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
RECORD SHOWS: WORKERS REPORT ATTACHED TO INSURANCE COM- PANYS ADJUSTMENT. "SEE FORMS ATTACHED"
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued _____

7. Arrangement ALPHABETICALLY, BY SUR NAME OF CLIENTS.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing SEPARATE - SEE SERIAL # 154
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPE WRITTEN ON PRINTED FORM
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size FILE DRAWER 11" x 13 1/2" x 29" AVERAGE 300 PAGES PER DRAWER
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1936 AGAINST E. WALL, ESTATE DIVISION
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
ROOM # 210, 327 ST, PAUL PLACE.

12. Other information RECORDS Y EQUIPMENT - GOOD
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

(LABELING CONT'D FROM ITEM #4) LABELING OF DRAWERS AS FOLLOWS
Whether record is known to have been kept earlier than dates shown in item 2)

1-DRAWER - SMALLER CASES - A - E.
1 - " " " " FO KO.
1 - " " " " L - R.
1 - " " " " S - SU.
1 - " " " " T - X Y Z.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

100-AGE PENSION # 151

METROPOLITAN LIFE INSURANCE COMPANY

(INCORPORATED BY THE STATE OF NEW YORK)

INVESTIGATION DIVISION: ASSIGNMENT OF POLICY

INDUSTRIAL DEPARTMENT

subject to the provisions of the Act of 1907, (special session) chapter 12, § 390.00 of the

I hereby revoke any designation heretofore made of any person to receive the proceeds of Policy No. ... Insurance of persons who are not named old and ... Insurance Company on the life of

For value received, I hereby assign said policy, together with all the proceeds thereof and all sums of money, interest, benefit, and advantages whatsoever accrued and to accrue thereunder unto

address: Number Street City State

and to executors, administrators, successors, or assigns. Relationship to Insured (If creditor, so state)

This assignment is subject to any existing indebtedness to the METROPOLITAN LIFE INSURANCE COMPANY under this policy and shall not be binding upon the Company unless it be filed with and recorded by the Company at its Home Office.

Signature of Witness Signature of Insured [SEAL]

I hereby consent to the foregoing assignment:

Signature of Witness Signature of Premium Payer [SEAL]

DATED AT THIS DAY OF 19

Filed and recorded

This Company assumes no obligation as to the validity and sufficiency of this assignment and does not pass upon its legality, but reserves the right to demand proof of interest in case of claim by assignee.

METROPOLITAN LIFE INSURANCE COMPANY,

Secretary.

INSTRUCTIONS

Assignments must be made in duplicate.

After execution, both assignment forms and policy should be sent at once to the Metropolitan Life Insurance Company, 1 Madison Avenue, New York, N. Y., to be recorded. One will be retained, and the other returned, together with the policy.

DISTRICT DEBIT FILE NUMBER

FOR HOME OFFICE USE

Checked by Duplicate sent to Date

O. A. P

151

THE PRUDENTIAL INSURANCE COMPANY OF AMERICA



NOTE: This assignment is taken under the laws of the State of New Jersey, Chapter 12, section 12-12 of the Act of 1937 (IND. PRUDENTIAL ASSURANCE COMPANY) OFFICE, NEWARK, NEW JERSEY effective June 1, 1937, which provides that \$300.00 of insurance *For Use Only in Connection with Old Age Relief* assistance recipients shall remain their property.

ORIGINAL

NOTE—The Prudential Insurance Company of America shall not be deemed to have knowledge of this assignment until the original or duplicate is filed at the Home Office of the Company, together with the policy for proper indorsement.

The rules of the Company require that if a policy shall be assigned, the assignment must be in writing. The Company will not assume any responsibility for the validity of an assignment.

Both copies of the assignment should be sent to the Home Office together with the policy, the duplicate to be retained by the Company and the original returned with the policy properly indorsed.

If this assignment shall be canceled, the cancellation must be in writing and the Company shall not be required to notice such cancellation until the original assignment is canceled on the back and forwarded to the Home Office of the Company together with the policy for proper recordation. The Company will not assume any responsibility for the validity of such release.

ASSIGNMENT OF POLICY

For Value Received,.....hereby assign and transfer unto.....

.....the policy of insurance known as No.....

issued by **THE PRUDENTIAL INSURANCE COMPANY OF AMERICA**, upon the life of.....

.....of.....

and all dividends now due or credited to paid-up additions or which may hereafter accrue thereon, and all benefit and advantage to be had or derived therefrom, subject to the terms and conditions of the said policy, and to the rules and regulations of said Company. This assignment is made expressly subject to the lien of the Company on said policy for any indebtedness of the insured or policyholder to said Company existing at the time this assignment is filed with said Company and in making settlement of the said policy there shall first be deducted all such indebtedness.

Witness.....hand and seal, this.....day of.....

one thousand nine hundred and thirty.....

(SEAL)

I hereby certify that the above assignment was signed in my presence by....., to me known to be the individual insured under policy No....., and after having first made known to him the contents thereof he thereupon acknowledged that he executed the same as his free and voluntary act and deed and for the uses and purposes therein expressed.

.....
Company representative or Commissioner of Old Age Security

Agent.....

District.....

RELEASE

Date,....., 19....

For Value Received, the within assignment is hereby fully canceled.

Each person executing this release represents to The Prudential Insurance Company of America that he (or she) has attained to majority according to the laws of the State in which he (or she) resides, or that he (or she) is empowered by law to execute this form even though majority has not been attained.

Assignee

Witness

THE PRUDENTIAL INSURANCE COMPANY OF AMERICA,

in accordance with its rules, has filed the original of the above release.

President

Per-----

Newark, N. J.,....., 193....

THE PRUDENTIAL INSURANCE COMPANY OF AMERICA

Incorporated under the laws of the State of New Jersey

EDWARD D. DUFFIELD, *President* HOME OFFICE, NEWARK, NEW JERSEY

DUPLICATE



For Use Only in Connection with Old Age Relief

NOTE—The Prudential Insurance Company of America shall not be deemed to have knowledge of this assignment until the original or duplicate is filed at the Home Office of the Company, together with the policy for proper indorsement.

The rules of the Company require that if a policy shall be assigned, the assignment must be in writing. The Company will not assume any responsibility for the validity of an assignment.

Both copies of the assignment should be sent to the Home Office together with the policy, the duplicate to be retained by the Company and the original returned with the policy properly indorsed.

If this assignment shall be canceled, the cancelation must be in writing and the Company shall not be required to notice such cancelation until the original assignment is canceled on the back and forwarded to the Home Office of the Company together with the policy for proper recordation. The Company will not assume any responsibility for the validity of such release.

ASSIGNMENT OF POLICY

For Value Received, _____ hereby assign and transfer unto _____
_____ the policy of insurance known as No. _____
issued by THE PRUDENTIAL INSURANCE COMPANY OF AMERICA, upon the life of _____
_____ of _____

and all dividends now due or credited to paid-up additions or which may hereafter accrue thereon, and all benefit and advantage to be had or derived therefrom, subject to the terms and conditions of the said policy, and to the rules and regulations of said Company. This assignment is made expressly subject to the lien of the Company on said policy for any indebtedness of the insured or policyholder to said Company existing at the time this assignment is filed with said Company and in making settlement of the said policy there shall first be deducted all such indebtedness.

Witness _____ hand and seal, this _____ day of _____
one thousand nine hundred and thirty _____

_____(SEAL)

I hereby certify that the above assignment was signed in my presence by _____,
to me known to be the individual insured under policy No. _____, and after having first made
known to ^{him} her the contents thereof ^{he} she thereupon acknowledged that ^{he} she executed the same as ^{his} her
free and voluntary act and deed and for the uses and purposes therein expressed.

Company representative or Commissioner of Old Age Security

Agent _____

District _____

RELEASE

Date, _____, 19__

For Value Received, the within assignment is hereby fully canceled.

Each person executing this release represents to The Prudential Insurance Company of America that he (or she) has attained to majority according to the laws of the State in which he (or she) resides, or that he (or she) is empowered by law to execute this form even though majority has not been attained.

Assignee

Witness

THE PRUDENTIAL INSURANCE COMPANY OF AMERICA,

in accordance with its rules, has filed the original of the above release.

President

Per _____

Newark, N. J., _____, 193__

Name of Family (Last Name) (Print) (First Name)

Address

No. in Family Color Date agency accepted case

Cause of and estimated length of dependency

Health condition of each insured member of family that might affect reinsurance—Good, Fair or Poor
 (Where condition is poor, give details of state of health)

Metropolitan POLICY DATA **Prudential**
 Address..... (To Be Copied From Policies) Address.....
 Name of District..... City & No. of District.....

1 Name of Company: Met, Fru, or J. H.	2 Policy Number	3 Date of Issue	4 Kind of Policy	5 Face Amount of Policy \$	6 Age Stated on Policy	Premium		9 Liens or Waivers Stamped on Policies Give Amounts and Dates	10 Name of Insured	11 Father, Mother, Son, Grandson, etc.
						7 Amount \$	8 DATE TO WHICH Premiums are Paid Obtain from Premium Book or receipts *			

N.B. Explain to clients non-forfeiture values and change from Endowment to Whole Life, with difference in values returned as paid-up endowment policy or cash (SEE HAND BOOK ON LIFE INSURANCE).
 *For other policies see receipts; state if paid Monthly (M), Quarterly (Q), Semi-annually (S.A.), Annually (A). Give date to which paid.

O'REEFE, RICH, NIEDENTOHLE
(Worker's full name)

Nov. 13, '39
(Date)

#152
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPT. OF WELFARE ESTATE DIVISION
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 ST. PAUL PLACE ROOM # 210
(Name of building, room number, street address)

1. Title (INSURANCE CLAIM ADJUSTMENTS, ON POLICIES, HELD BY CLIENTS UNDER OLD AGE PENSION, "NOW DECEASED")
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1936 - -
(Earliest and latest dates; missing dates. Show exact date of breaks) FOLDER

3. Quantity 3-STEEL FILE DRAWERS, 10 FOLDERS TO DRAWER, 150 PAGES PER
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling SEE ITEM #12
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINS INSURANCE ADJUSTMENT OF OLD AGE PENSION CLIENTS, ^{NOW} DECEASED. RECORD CONTAINS FORMS AS USED IN SERIAL #151, WITH CASHIER'S SLIP & FINANCIAL STATEMENT FROM FINANCIAL DEPT., COVERING INSURANCE BENEFITS, DUE TO RELATIVES OF DECEASED, AND TO DEPT. OF PUBLIC WELFARE AS OF AGREEMENT ENTERED INTO, BETWEEN CLIENTS AND DEPT. OF PUBLIC WELFARE.
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

KOVAKA.

OKEEFE RICH NIEDENTHAL

(Worker's full name)

NOV. 16, 1939

(Date)

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
Washington, D.C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPT. OF PUBLIC WELFARE, 'ESTATE DIVISION'
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 ST. PAUL PLACE, ROOM # 210
(Name of building, room number, street address)

1. Title CARD INDEX TO INSURANCE ADJUSTMENTS ON POLICIES HELD BY CLIENTS UNDER AID TO DEPENDENT CHILDREN UNDER PUBLIC ASSISTANCE
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1936 - - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 12 STEEL CARD INDEX DRAWERS, 1500 CARDS TO DRAWER
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling SEE APPENDIX
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state

whether same information shown in another record. Explain why records are missing, if possible)

6. Contents THIS IS A CARD INDEX TO FILES "SEE SERIAL # 150
(Purpose and general nature of record. Principal items of information

RECORD SHOWS: GIVING NAME & ADDRESS OF CLIENTS, NAME OF WORKER
shown. Summary of forms used in making record, their headings, etc. If a very

CATEGORY OF RELIEF, POLICY NO., NAME OF INSURANCE CO.
general or miscellaneous record, detailed information as to type of records

REMARKS, INSURANCE POLICY RECEIVED SIGNATURE, ETC.
contained and dates covered by each should be given. Unless contents of these

records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents--continued _____

7. Arrangement ALPHABETICALLY BY SUR NAME OF CLIENT.
 (Chronologically--by what? Numerically--by what? Alphabetically--by what?)
8. Indexing NONE - THIS IS AN INDEX TO SERIAL #150
 (Self-contained--describe what it shows. If separate, fill out a form for it,

 and place cross reference here to that form by title and identification number)
9. Writing TYPE WRITTEN, PRINTED FORM
 (Handwritten. Handwritten printed form. Handwritten printed head. Typed.

 Typed printed form. Typed printed head. Printed. Photostat. Other. Give months

 and years covered by each kind of writing)
10. Size FILE DRAWER 5 1/4" x 4" x 15" CARD 3" x 5" 1500 CARDS TO
 (Of record or container. Height, width, thickness or depth. Average number of

DRAWER APPROX 18000 CARDS
 pages or documents)
11. Location by dates and quantities 1936-- ON SHELF N. SIDE ROOM #210
 (Room, vault, wall--N.E.S.W., section, bin, shelf,

DEPT. OF WELFARE, 327 ST. PAUL PLACE.
 cabinet, on floor)
12. Other information RECORDS & EQUIPMENT - GOOD.
 (Condition of record if not good. Relation to other records.

 Information on prior, subsequent, or similar records. Whether record is known

 to have been kept earlier than dates shown in item 2)
13. (For use in Florida.) Early imprints _____
 _____ (Author) _____ (Publisher)
 _____ (Place of publication) _____ (Date of publication)

CARD INDEX TO INSURANCE ADJUSTMENTS, ON POLICIES HELD BY CLIENTS UNDER AID TO DEPENDENT CHILDREN & GENERAL PUBLIC ASSISTANT.

LABELING ITEM #4 CONTINUED

ADDENDA

1	DRAWER LABELED	A - B.
1	" "	BR - CE
1	" "	Co - D.
1	" "	E - Go.
1	" "	GR - HE
1	" "	Ho - J
1	" "	K - ME
1	" "	M - N
1	" "	O - ROD
1	" "	ROE - SR.
1	" "	ST - WAN
1	" "	WAR - XYZ.

and monthly duty rosters, miscellaneous notices, movement orders, organization and post exchange credit allowances, laundry receipts, statements, special orders (local and regimental), physical examination reports, company fund vouchers showing receipts and expenditures for reports, company fund vouchers showing receipts and expenditures for organization activities; also correspondence relating to the personnel. Filed by subject. (Older records, rarely; current records, daily, official.) 9 x 12 folders, 4 ft. 6 in., in drawer of steel filing case. Orderly Room (Bldg. L). (206)

1876. PAYROLLS, 1932 to date. Date, payroll voucher number, name of organization, regiment, station, signatures of disbursing officer and of organization commander; and names, ranks, and serial numbers of service men receiving pay. Filed chronologically. (Frequently, official.) $4\frac{1}{2}$ x 8 folded sheets, 5 in., in field desk. Orderly Room (Bldg. L). (208)

1877. COMMISSARY ACTIVITY RECORDS, INACTIVE, July 1932 - June 1936. Daily charge sales slips, monthly statements of accounts, daily summary of sales, invitations to bid, contracts, abstracts of bids, requisitions, receiving reports, changes in War Department procurement authority; ice, ration, and savings accounts; tally sheets, purchase orders, vouchers, delivery slips, post and War Department circulars, special orders, memoranda and miscellaneous correspondence relating to the activities of this office. Filed chronologically. (Seldom, official.) Various sized sheets, folders, and pads, 117 ft., in 52 pasteboard boxes. Attic (Bldg. M). (66)

1878. CCC FILE, 1933 - 1935. Personnel reports, ratings, amounts of pay, allotments, discontinuances of allotments, athletic activities, etc. Filed numerically. (Seldom, official.) 10 x 12 folders, 1 ft., in drawer of wooden filing case. Quartermaster's Office (Bldg. K). (2)

1879. MOTOR VEHICLE RECORD BOOK, Jan. 1933 to date. QMC Form 248, showing from whom vehicle was received, date, registration number, make, operation, maintenance cost, and depreciation. These records are retained only during the life of the truck; when the truck is condemned or salvaged the records are sent to the office of the quartermaster. Filed chronologically. (Frequently, official.) $6\frac{1}{2}$ x $9\frac{1}{2}$ loose-leaf books, 1 in., in drawer of steel filing case. E. Side (Bldg. P). (216)

1880. PURCHASE ORDERS, July 1933 to date. Form QMC 308. Contract, purchase order, and requisition numbers; location, date of purchase, authority number, date of bid, from whom purchased, terms of delivery, where inspected, quantities or unit purchased, description of articles, unit price and total amount of purchase, vouchers, delivery and tally slips and relating correspondence.

O'KEEFE ALB. HAN. J. K. (Worker's full name) Nov. 17, '39 (Date) (Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
Washington, D.C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND
Name of agency or office DEPT. PUBLIC WELFARE, 'ESTATE DIVISION'
Address of office of custody 327 ST. PAUL ST. ROOM # 210

1. Title (DEATH REPORTS OF CLIENTS UNDER OLD AGE PENSION)

If record has had other titles, list them with dates or quantities or both)

2. Dates 1936 - - - (Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2 STEEL CARD INDEX DRAWERS APPROX 2300 PER DRAWER

4. Labeling SEE ITEM # 12 (Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE (If record discontinued, give reason and state

whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINS DEATH REPORTS, FOR DESCRIPTION, SEE

ATTACHED FORM. THIS FORM IS FILLED OUT BY CHIEF CLERK, ESTATE DIVISION.

Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to type of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents--continued _____

7. Arrangement ALPHABETICALLY BY SUR NAME OF CLIENT
(Chronologically--by what? Numerically--by what? Alphabetically--by what?)

8. Indexing NONE
(Self-contained--describe what it shows. If separate, fill out a form for it,
and place cross reference here to that form by title and identification number)

9. Writing HAND WRITTEN ON PRINTED FORM
(Handwritten. Handwritten printed form. Handwritten printed head. Typed.
Typed printed form. Typed printed head. Printed. Photostat. Other. Give months
and years covered by each kind of writing)

10. Size OF CABINET 6"x8"x14", CARD 5"x8" 2,300 CARDS
(Of record or container. Height, width, thickness or depth. Average number of
PER DRAWER.
pages or documents)

11. Location by dates and quantities ON SHELF, N. WALL ROOM #210
(Room, vault, wall--N.E.S.W., section, bin, shelf,
ESTATE DIVISION, DEPT. PUBLIC WELFARE.
cabinet, on floor)

12. Other information RECORDS & EQUIPMENT - GOOD
(Condition of record if not good. Relation to other records.
LABELING CONT'D FROM ITEM #4.
Information on prior, subsequent, or similar records. Whether record is known
1-DRAWER LABELED, DEATH REPORTS 1936-1937,
to have been kept earlier than dates shown in item 2)
1- " " " 1938 -

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

CITY OF BALTIMORE
DEPARTMENT OF PUBLIC WELFARE
327 ST. PAUL PLACE

156

REPORT OF DEATH

PENSIONER _____

CPB NO. _____

ADDRESS _____

DPW NO. _____

REPORTED DATE OF DEATH _____ AT _____
(LOCATION)

REPORTED BY _____ RELATIONSHIP _____

REPORT RECEIVED BY _____ (SIGNATURE) _____ ESTATE INVESTIGATOR

DATE OF DEATH VERIFIED AS _____ (DATE) _____ BY _____

CUT-OFF TICKET EFFECTIVE _____ ISSUED BY _____

DATE ISSUED _____

INFORMATION BY MAIL PHONE INTERVIEW HOME VISIT

NIEDENTOHL-KOVAKA-O'KEEFE-RICH 11-16-39
(Worker's full name) (Date) (Form identification number)

#154.

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
Washington, D.C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ BALTIMORE State MARYLAND

Name of agency or office DEPT. OF PUBLIC WELFARE - ESTATE DIVISION
(Office of custody) (Office which made the record, if different)

Address of office of custody # 377 ST. PAUL ST. ROOM # 210.
(Name of building, room number, street address)

1. Title (CARD INDEX TO INSURANCE ASSIGNMENTS ON POLICIES HELD BY OLD AGE PENSIONERS - COMPLETED CASES)
(Give present full title in quotes; assigned title, if any, in brackets.
If record has had other titles, list them with dates or quantities or both)

2. Dates 1936--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 8, STEEL FILE DRAWERS, AVER. 1200 CARDS PER DWR.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling SEE ADDENDA SHEET ATTACHED.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state

whether same information shown in another record. Explain why records are

missing, if possible)

6. Contents CONTAINS CARD INDEX TO INSURANCE
(Purpose and general nature of record. Principal items of information

ASSIGNMENTS ON POLICIES HELD BY OLD AGE
shown. Summary of forms used in making record, their headings, etc. If a very

PENSIONERS - COMPLETED CASES; SEE SERIAL
general or miscellaneous record, detailed information as to type of records

#151. NAME AND ADDRESS OF CLIENTS NUMBER
contained and dates covered by each should be given. Unless contents of these

OF POLICIES, POLICY NUMBER, NAME OF WORKER,
records are described by other Forms 12-13HR, such forms should be filled out

NAME OF INSURANCE COMPANY, NAME OF BENE-
and attached)

6. Contents--continued FICIARY, AMOUNT OF PREMIUMS,
FACE VALUE OF POLICY, WHERE BURIED.

7. Arrangement ALPHA. BY SUR NAME OF CLIENTS.
(Chronologically--by what? Numerically--by what? Alphabetically--by what?)

8. Indexing NONE. (THIS IS AN INDEX TO SERIAL #151).
(Self-contained--describe what it shows. If separate, fill out a form for it,

and place cross reference here to that form by title and identification number)

9. Writing TYPE WRITTEN ON PLAIN CARD.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed.

Typed printed form. Typed printed head. Printed. Photostat. Other. Give months

and years covered by each kind of writing)

10. Size OF DRAWER, 5 1/2" X 9" X 5" OF CARD 3" X 5" AVER.
(Of record or container. Height, width, thickness or depth. Average number of

1200 CARDS PER DRAWER.
pages or documents)

11. Location by dates and quantities 1936-- IN STEEL CABINET,
(Room, vault, wall--N.E.S.W., section, bin, shelf,

ON SHELF AGAINST NORTH WALL ROOM #207.
cabinet, on floor)

ESTATE DIVISION, DEPT. PUBLIC WELFARE.

12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD.
(Condition of record if not good. Relation to other records.

Information on prior, subsequent, or similar records. Whether record is known

to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication)

(Date of publication)

(CARD INDEX TO INSURANCE ASSIGNMENTS OF POLICIES HELD BY OLD AGE PENSIONERS - COMPLETED CASES)

LABELING ITEM #4 CONTINUED

ADDENDA

1	DRAWER LABELED	A - B	
1	"	C - E	
1	"	F - HE	
1	"	HI - K	
1	"	L - M	
1	"	N - R	
1	"	S -	
1	"	T - XYZ	

and monthly duty rosters, miscellaneous notices, movement orders, organization and post exchange credit allowances, laundry receipts, statements, special orders (local and regimental), physical examination reports, company fund vouchers showing receipts and expenditures for reports, company fund vouchers showing receipts and expenditures for organization activities; also correspondence relating to the personnel. Filed by subject. (Older records, rarely; current records, daily, official.) 9 x 12 folders, 4 ft. 6 in., in drawer of steel filing case. Orderly Room (Bldg. L). (206)

1876. PAYROLLS, 1932 to date. Date, payroll voucher number, name of organization, regiment, station, signatures of disbursing officer and of organization commander; and names, ranks, and serial numbers of service men receiving pay. Filed chronologically. (Frequently, official.) $4\frac{1}{2}$ x 8 folded sheets, 5 in., in field desk. Orderly Room (Bldg. L). (208)

1877. COMMISSARY ACTIVITY RECORDS, INACTIVE, July 1932 - June 1936. Daily charge sales slips, monthly statements of accounts, daily summary of sales, invitations to bid, contracts, abstracts of bids, requisitions, receiving reports, changes in War Department procurement authority; ice, ration, and savings accounts; tally sheets, purchase orders, vouchers, delivery slips, post and War Department circulars, special orders, memoranda and miscellaneous correspondence relating to the activities of this office. Filed chronologically. (Seldom, official.) Various sized sheets, folders, and pads, 117 ft., in 52 pasteboard boxes. Attic (Bldg. M). (66)

1878. CCC FILE, 1933 - 1935. Personnel reports, ratings, amounts of pay, allotments, discontinuances of allotments, athletic activities, etc. Filed numerically. (Seldom, official.) 10 x 12 folders, 1 ft., in drawer of wooden filing case. Quartermaster's Office (Bldg. K). (2)

1879. MOTOR VEHICLE RECORD BOOK, Jan. 1933 to date. QMC Form 248, showing from whom vehicle was received, date, registration number, make, operation, maintenance cost, and depreciation. These records are retained only during the life of the truck; when the truck is condemned or salvaged the records are sent to the office of the quartermaster. Filed chronologically. (Frequently, official.) $6\frac{1}{2}$ x $9\frac{1}{2}$ loose-leaf books, 1 in., in drawer of steel filing case. E. Side (Bldg. P). (216)

1880. PURCHASE ORDERS, July 1933 to date. Form QMC 308. Contract, purchase order, and requisition numbers; location, date of purchase, authority number, date of bid, from whom purchased, terms of delivery, where inspected, quantities or unit purchased, description of articles, unit price and total amount of purchase, vouchers, delivery and tally slips and relating correspondence.

NIEDENTOHLE - KOVANA - RICH - O'KEEFE 11-16-39 #155
(Worker's full name) (Date) (Form identification number)

WORKS PROCESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
Washington, D.C.

VOLUMES AND UNBOUND RECORDS FORM

BALTIMORE CITY State MARYLAND.
Name of agency or office DEPT. OF PUBLIC WELFARE - ESTATE DIVISION
(Office of custody) (Office which made the record, if different)
Address of office of custody #327 ST. PAUL ST. ROOM #210.
(Name of building, room number, street address)

1. Title (CARD INDEX TO INSURANCE CLAIM ADJUSTMENTS ON POLICIES HELD BY CLIENTS UNDER OLD AGE PENSION)
(Give present full title in quotes; assigned title, if any, in brackets.
If record has had other titles, list them with dates or quantities or both)
2. Dates 1936-- (NOW DECEASED)
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 2 STEEL DRAWERS, OVER 1200 CARDS PER DWR.
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling 1 DRAWER DECEASED - A-M 1 DWR DECEASED N-Z.
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records NONE.
(If record discontinued, give reason and state

whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CARD INDEX TO INSURANCE CLAIM,
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to type of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
ADJUSTMENTS ON POLICIES HELD BY CLIENTS UNDER OLD AGE PENSION. NOW DECEASED SEE SERIAL #152.
CARD SHOWS NAME AND ADDRESS OF PENSION CLIENT PENSIONER'S NUMBER,
NAME OF INSURANCE COMPANY, NUMBER,

6. Contents--continued OF POLICIES, AMOUNT PAID AND DATE OF DEATH.

7. Arrangement ALPHA. BY SURNAME OF PENSIONER
(Chronologically--by what? Numerically--by what? Alphabetically--by what?)

8. Indexing NONE--THIS IS AN INDEX TO SERIAL # 152.
(Self-contained--describe what it shows. If separate, fill out a form for it,

and place cross reference here to that form by title and identification number)

9. Writing TYPE WRITTEN ON PLAIN CARD.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed.

Typed printed form. Typed printed head. Printed. Photostat. Other. Give months

and years covered by each kind of writing)

10. Size OF DRAWER. 5 1/2" X 9" X 15". SIZE OF CARD
(Of record or container. Height, width, thickness or depth. Average number of
3" X 5" AVER. 1200 CARDS PER DRAWER.
pages or documents)

11. Location by dates and quantities 1936-- INSTEEL CABINET
(Room, vault, wall--N.E.S.W., section, bin, shelf,

ON SHELF AGAINST NORTH WALL OF ROOM # 210
cabinet, on floor)

ESTATE DIVISION, DEPT. OF PUBLIC WELFARE

12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD.
(Condition of record if not good. Relation to other records.

Information on prior, subsequent, or similar records. Whether record is known

to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

_____ (Place of publication)

_____ (Date of publication)

Niedentohl - O'Keefe

Kovaka - Rich

10-17-39

157

(Worker's full name)

(Date)

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
Washington, D.C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City City State Maryland
Name of agency or office Department of Public Welfare - Estate Div.
(Office of custody) (Office which made the record, if different)
Address of office of custody Room # 210 - 327 St. Paul Place.
(Name of building, room number, street address)

- Title (Client's Ledger Record)
(Give present full title in quotes; assigned title, if any, in brackets.)
(Old Age Pensioners Ledger Cards)
If record has had other titles, list them with dates or quantities or both
- Dates 1936--.
(Earliest and latest dates; missing dates. Show exact date of breaks)
- Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)
- Labeling Drawer labeled "Death Reports - 1938"
(Explain fully; years; numbers; letters; number of records so labeled)
- Discontinued and missing records None
(If record discontinued, give reason and state

whether same information shown in another record. Explain why records are missing, if possible)

- Contents Individual card record of cash received
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to type of records contained and dates covered by each should be given. Unless contents of these address of client; Central Payroll Bureau number; Department of Public Welfare number; date, and attached)

6. Contents--continued reference to source of receipts,
amounts under heading Receipts; also date,
voucher numbers, amounts under heading
Withdrawals.
7. Arrangement Alphabetically by names of clients.
 (Chronologically--by what? Numerically--by what? Alphabetically--by what?)
8. Indexing None.
 (Self-contained--describe what it shows. If separate, fill out a form for it,
 and place cross reference here to that form by title and identification number)
9. Writing Typed on printed cards.
 (Handwritten. Handwritten printed form. Handwritten printed head. Typed.
 Typed printed form. Typed printed head. Printed. Photostat. Other. Give months
 and years covered by each kind of writing)
10. Size of drawer 6" x 8" x 14" Approx. 450 cards.
 (Of record or container. Height, width, thickness or depth. Average number of
 pages or documents)
11. Location by dates and quantities 1936 to date, 1 steel file drawer
 (Room, vault, wall--N.E.S.W., section, bin, shelf,
on lower wooden shelf, north wall in room #210.
 cabinet, on floor)
12. Other information Records and container in excellent
 (Condition of record if not good. Relation to other records.
condition. This record was set up in 1936.
 Information on prior, subsequent, or similar records. Whether record is known
 to have been kept earlier than dates shown in item 2)
Note: Clients ledger cards are filed in front
of drawer containing Death Reports.
13. (For use in Florida.) Early imprints _____
 (Author) (Publisher)

 (Place of publication) (Date of publication)

DEPARTMENT OF PUBLIC WELFARE
CLIENT'S LEDGER CARD

#157

NAME _____ CPB NO. _____

DIVISION _____ DPW NO. _____

RECEIPTS

DATE

C. D. S. NO.

AMOUNT

WITHDRAWALS

DATE

VOUCHER NO.

AMOUNT

Cash
Mutual Policy
BK Acct.

Old Age.

Rich, NIEDENTHOL, KOVAKA (Worker's full name) Nov. 24, 1939 (Date) (Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
Washington, D.C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPT. OF PUBLIC WELFARE, ESTATE DIVISION.
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 ST. PAUL ST. ROOM 210
(Name of building, room number, street address)

1. Title LIFE INSURANCE ADJUSTMENTS RECORDS.
(Give present full title in quotes; assigned title, if any, in brackets.)

If record has had other titles, list them with dates or quantities or both)

2. Dates 1935--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 8 STEEL FILE DRAWERS, APPROX. 3000 RECORD PER DRAWER (NOTE SOME RECORDS DUPLICATED)
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling 1 " " F to E 4 " NOT LABELED.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state

whether same information shown in another record. Explain why records are missing, if possible)

6. Contents FORMS PREPARED BY VARIOUS INSURANCE COMPANIES, AND USED
(Purpose and general nature of record. Principal items of information

shown. Summary of forms used in making record, their headings, etc. If a very

ADJUSTMENTS, USED FOR REFERENCE PURPOSES AFTER OFFICIAL
general or miscellaneous record, detailed information as to type of records

TRANSACTIONS WITH INSURANCE COMPANIES, RECORDS SHOW
contained and dates covered by each should be given. Unless contents of these

NAME OF SOCIAL AGENCY (D.P.W.); NAME & ADDRESS OF FAMILY, NAME

OF CASE WORKER, DATE OF RECORD, NUMBER OF PERSONS IN FAMILY,
records are described by other forms 12-13HR, such forms should be filled out

COLOR, DATE AGENCY ACCEPTED CASE, FACTS TO AID IN THE ADJUSTMENTS,
TOTAL INCOME, AMOUNT OF RELIEF NOW RECEIVING; INCLUDING
and attached) POLICY DATA, WHICH IS COPIED FROM THE POLICIES, SHOWING THE NAME

6. Contents--continued OF INSURANCE CO. POLICY NUMBER, DATES ISSUED, KIND OF POLICIES, FACE AMOUNT OF POLICIES, AGE STATED ON POLICIES, AMOUNT OF PREMIUM, LEAS OR WAVERS, NAMES OF INSURED, RELATIONSHIP.
NOTE: THIS FORM IS SENT TO INSURANCE CO'S. FOR VERIFICATION, ADDITIONAL COPIES, ARE RETURNED TO THE AGENCY WITH CORRECT DATA.
7. Arrangement ALPHABETICALLY BY SURNAME OF HEAD OF FAMILY
 (Chronologically--by what? Numerically--by what? Alphabetically--by what?)
8. Indexing NONE
 (Self-contained--describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing HANDWRITTEN AND TYPED ON PRINTED FORMS
 (Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF DRAWERS, 11"X13"X26" AVERAGE 3000 RECORDS PER DRAWER.
 (Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities N.W. CORNER ROOM 210 ESTATE DIVISION
 (Room, vault, wall--N.E.S.W., section, bin, shelf, cabinet, on floor)
DEPT. PUBLIC WELFARE
12. Other information CONDITION OF RECORDS GOOD.
 (Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)
13. (For use in Florida.) Early imprints _____ (Author) _____ (Publisher)
 _____ (Place of publication) _____ (Date of publication)

INDEX, DEPT. PUBLIC WELFARE, CHILD WELFARE DIVISION
 327 ST. PAUL PLACE.

SERIAL NO.	SERIAL DATE	TITLE OF RECORD	DATE OF RECORD
159.	NOV. 21-1939	(CASE HISTORIES OF DEPENDENT AND NEGLECTED CHILDREN PLACED IN VARIOUS INSTITUTIONS - JUVENILE COURT, ACTIVE CASES)	1935--
160.	NOV. 24-1939	(CASE HISTORIES OF DEPENDENT AND NEGLECTED CHILDREN PLACED IN VARIOUS INSTITUTIONS - JUVENILE COURT, INACTIVE CASES.)	1929-1935
161.	NOV. 21-1939	APPLICATION FOR ADOPTION OF DEPENDENT & NEGLECTED CHILDREN TO CHILD WELFARE DIVISION, BY PROSPECTIVE FOSTER PARENTS.)	1935--

Kovaka- Rich.

Niedentoh- O'Keefe

10-21-39

159

(Worker's full name)

(Date)

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
Washington, D.C.

VOLUMES AND UNBOUND RECORDS FORM

~~Agency~~ Baltimore City State Maryland

Name of agency or office Department of Public Welfare-Child Welfare.
(Office of custody) (Office which made the record, if different)

Address of office of custody Room #302 327 St. Paul Place.
(Name of building, room number, street address)

1. Title (Case Histories of Dependent and Neglected Children,
Placed in Various Institutions-Juvenile Court-Active Cases.)
(Give present full title in quotes; assigned title, if any, in brackets.
If record has had other titles, list them with dates or quantities or both)

2. Dates 1935--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 9 Steel file drawers.
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling See addenda sheets for labeling.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None.
(If record discontinued, give reason and state

whether same information shown in another record. Explain why records are
missing, if possible)

6. Contents Individual folders containing case
histories of dependent and neglected children
placed in institutions by orders of Juvenile
Court used for reference purposes by the
(Purpose and general nature of record. Principal items of information
shown. Summary of forms used in making record, their headings, etc. If a very
general or miscellaneous record, detailed information as to type of records
contained and dates covered by each should be given. Unless contents of these
records are described by other Forms 12-13HR, such forms should be filled out
the name of child, name of institution, date
and attached)

6. Contents--continued of commitment, case number; case history includes facts for identification and reference, record of case from Social Service Exchange; summary of case; history of case from case worker or (cont. on line 12)
7. Arrangement Alphabetically by name of child.
(Chronologically--by what? Numerically--by what? Alphabetically--by what?)
8. Indexing None.
(Self-contained--describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Handwritten on printed form; typed on printed form; typed on plain paper;
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of drawer 11 1/2" x 15" x 24" 1087 Cases.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
Average 9 documents per folder.
11. Location by dates and quantities 1935 to date, 9 drawers on east wall in room # 302.
(Room, vault, wall--N.E.S.W., section, bin, shelf, cabinet, on floor)
12. Other information Records and containers in excellent condition.
(Condition of record if not good. Relation to other records.)
Continued from line 6 ~~~~~ from other source;
Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)
Verification of birth, marriage or death;
Psychiatric report; medical record; school reports from Educational Departments; Baptismal Certificate report.
(Author) (Publisher)

Note: 7 drawers shown on addenda sheet #1
(Place of publication) (Date of publication)
contain Baltimore City Cases; 2 drawers shown on addenda sheet

Continued from item 4

(Case Histories of Dependent and Neglected Children
Placed in Various Institutions - Juvenile Court. Active Cases.)

Drawers labeled as follows.

- | | |
|----------|---|
| 1 Drawer | St. Mary's Female Orphan Asylum. |
| 1 Drawer | { <ul style="list-style-type: none"> St. Elizabeth's Home. St. Francis Home. St. Vincent's Male Orphan Asylum. A. to G. |
| 1 Drawer | { <ul style="list-style-type: none"> St. Vincent's Male Orphan Asylum. St. Vincent's Infant Asylum. |
| 1 Drawer | Henry Watson Children Aid Society
A - L. |
| 1 Drawer | Henry Watson Children Aid Society
M - Z. |
| 1 Drawer | { <ul style="list-style-type: none"> Florence Crittenton Mission. Nursery and Child Study Home. of Maryland |
| 1 Drawer | Jewish Children's Home |

#159

(Item #4)

Continued from addenda sheet #1
(Case Histories of Dependent and Neglected Children

Placed in Various Institutions - Juvenile Court - Active Cases)

Drawers labeled as follows

1 Drawer	C.E. Athey	County History
1 Drawer	R.E. Maggio	County History

DEPARTMENT OF PUBLIC WELFARE
BALTIMORE, MARYLAND

FACTS FOR IDENTIFICATION AND REFERENCE

Number _____

Surname _____

Address in full at
Time of acceptance _____

Date of
Commitment _____

Alias _____

(LATER ADDRESSES SEE REVERSE SIDE)

Key No.	PARENTS (Present Marriage)	Birth Date (Mo. Da. Yr.)	Birth Place (City — State)	Death Date (Mo. Da. Yr.)	✓	Present Marriage		✓
						Date	Place	
1	Father							
2	Mother (Maiden Name)							
	CHILDREN (Of present marriage)	*				School Grade	School or Work or Whereabouts if not at Home	
3								
4								
5								
6								
7								
8								
9	Unmarried Mother					Paternity established:		
						Date		
10	Alleged Father					Court		
11	1st { Husband or Wife (Maiden Name)		Death or Divorce	Date		1st Marriage Date:		
				Place		Place		
	CHILDREN (Of above unions)	*	Birth Date (Mo. Da. Yr.)	Birth Place (City — State)	Death Date (Mo. Da. Yr.)	School Grade	School or Work or Whereabouts if not at Home	
12								
13								
14								
15								
16								
OTHERS IN HOUSEHOLD		Sex	Age	Relationship or Connection		Usual occupation and weekly earnings		
17								
18								
Indicate which Parent	Time in Balto. — Md. — State — U. S.:		Citizen	Race	Nationality	Religion	Usual occupation and weekly earnings	
*Check Children Accepted							✓ Check if Verified	

ADDRESSES OF PARENTS (Indicate which Parent, if living apart)

✓	Date	Location	Rent	No. Rms.	Date	Location	Rent	No. Rms.

RELATIVES (Including Married Children. State whether relatives are paternal or maternal)

Key No.	✓	Relationship to Child	Full Name	Address (or, if dead, age and cause)
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				

REFERENCES AND OTHERS WHO KNOW FAMILY

AGENCIES REGISTERED WITH SOCIAL SERVICE EXCHANGE

Key No.	✓	Connection (as employer, physician, etc.)	Name and Address	AGENCIES REGISTERED WITH SOCIAL SERVICE EXCHANGE		✓
				Registered (Date)	Known Not Known	
32						
33						
34						
35						
36						
37						
38						
39						
40						
41						
42						
43						

✓ Check if consulted

DEPARTMENT OF PUBLIC WELFARE

BALTIMORE, MARYLAND

Name	Date of birth
Name of father	of mother
Address	No. of School
Date began going to school	Present grade
Years in each grade	1/ 2/ 3/ 4/ 5/ 6/ 7/ 8/ 9/
Sp. Cl. S. C. Op. P. V. Scholarship	
No. Schools attended	No changes of residences
Remarks — Attendance Officer:	

(Signed) _____
Principal

Approved _____

General Statements: (1) Health (2) Behavior

Miss Esther Lazarus, Training Supervisor,

To: ~~Miss James O. Dancy, Assistant Director,~~ Department of Public Welfare.

From:

Re: Doe Family

Parents: Theodore Doe - - - - - Born: 5-6-1892 - Baltimore, Md.
Lila Doe - nee Duvall, Born: 12-13-1898 (dead)

Siblings: Donald Wilson Doe - - - " 8-6-22 (verified)
James Richard " - - - " 2-4-25 "
Florence " - - - " 2-4-31 "

Reason for referral: Dependency.

Social Service Exchange: This case is identified in S.S.E. as follows:

F.W.A. Southern District - - - - - 5-8-34
School Attendance Department (James R.) 11-4-35

Explanation of Original Contact: The Doe family first became known to the F.W.A. on 5-8-34 when Lila Doe applied to the office asking assistance in planning for herself and three children. Upon investigation it was found that Lila was a very deserving mother who tried very hard to keep the family together. Through the efforts of the F.W.A. Theodore was brought into the court and charged with desertion and failing to support his family. He was placed on probation and ordered to pay \$10.00 a week for their support. The case was followed for six months, and Theodore was paying the money regularly. As no further service was necessary, the case was closed.

On 12-28-35 the case was again referred to the F.W.A. by a neighbor, as Mrs. Doe was sick and needed care. A visit was paid and worker found Mrs. Doe critically ill. Arrangements were made for her to be hospitalized at Johns Hopkins Hospital, where a diagnosis of lobar pneumonia was made. Theodore had not been home for several days and his whereabouts were unknown. Learned from neighbor that for the past month he was working irregularly at Sparrows Point, and had been drinking very heavily. Arrangements were made by the F.W.A. to place the children in a boarding home until the mother returned from the hospital. Mrs. Doe died at Johns Hopkins Hospital on January 12, 1936.

School Attendance Department's Contact: James Richard had been referred to the School Attendance Department for non-attendance in school. He could give no good reason for his absence. Since that time, however, his attendance in school has been satisfactory.

Paternal Grandparents: The paternal grandfather was Tilghman Doe. He was born in 1864 in Pocomoke, Maryland and was the oldest of five boys. Although he had no formal education, by his own efforts he learned to read and was able to write his own name. As a young man, he worked on the farm of Mr. Malcolm Truitt, and was reputed to be temperate and industrious. When he was about twenty-two years of age, he came to Baltimore to live with a paternal uncle, Peter Thomas Doe, and worked as a laborer at the Steel Mills in Sparrows Point. He married Hattie Pindell in Baltimore, Maryland, in 1887, and they had five children. He died in 1897 from a cerebral hemorrhage.

- 2 -

The paternal grandmother, Hattie Pindell Doe, is still living. She was born in Baltimore, Maryland in 1868, and was the only child.

Little is known concerning her early education, but she could read and write. At present, she is living with her married daughter, Mrs. Martha Diggs, upon whom she is dependant for support. Mrs. Diggs is separated from her husband and is obliged to work out to support herself and three minor children. Mrs. Doe is worried over her grandchildren, as she feels her son is shiftless and unreliable, and would like to see the children placed in a good home where they will receive the proper care and training.

Maternal Grandparents:

The maternal grandfather, Randolph Duvall, was born in Richmond, Virginia, in 1865, the second of seven children. As a young boy he worked as a carpenter's apprentice. Mr. Duvall was a steady worker and took care of his family adequately. He married Lizzie May Duvall on December 20, 1887, and they had six children, of whom Lila Doe was the youngest. He died in 1909 - cause of death unknown.

The maternal grandmother, Lizzie May Duvall, was the only daughter of an itinerant Baptist Minister. She was born in Winston-Salem, North Carolina in 1869. Mrs. Duvall had a seventh grade education. She died shortly after Mrs. Doe's birth.

Father:

Mr. Theodore Doe was born in Baltimore, Maryland, in 1892, the second oldest of five children. He obtained a fifth grade education and then stopped because he had no interest in school. He married Lila Duvall in Baltimore, Maryland, October 30, 1920. The ceremony was performed by the Reverend Albert Kennard, a Lutheran Minister (marriage verified). Mr. Theodore Doe is of slight build, with straight, dark hair and shifty eyes. He has never supported his family adequately and drinks to excess. He has always been abusive to his wife, and takes very little interest in the children. At present he is unemployed, having lost his job at the Sparrows Point Mill because of drunkenness.

Mother:

Mrs. Lila Duvall Doe was born in Baltimore, Maryland, December 13, 1898, the youngest of six children. Her mother died when Lila was an infant, and she was raised by her paternal aunt. She attended public school until she had completed the eighth grade. She obtained employment as a packer at the Stewart Candy Company, where she worked until her marriage to Mr. Doe. She was a good mother and took excellent care of her home and children. She died of lobar pneumonia at the Johns Hopkins Hospital, on January 12, 1936.

Siblings:

Donald W. Doe A. Developmental

Full term baby, normal delivery, bottle fed. Walked at fourteen months, dentition at seven months.

B. Illnesses Donald W. had measles and chicken pox at three years. He had mumps at four years.

C. Character Donald W. is a well-developed boy with a frank, pleasing manner. He has always been very easily disciplined, and has presented no behavior problems either in school or at home. He is interested in sports and takes an active part in school athletics, especially basketball. He is a member of the Boy Scouts and enjoys going on week-end hikes.

D. School Donald W. attends school A and is in the accelerated class 7-B. He is doing good work in all of his studies and excels in history and mathematics. His department is excellent except that he is inclined to be talkative.

E. Environmental Influences

1. Relationship to parents

Donald W. is resentful towards his father because of the way he has neglected the family. His father has never displayed any particular interest in him. Donald is extremely loyal to his mother, and feels that his progress has been chiefly due to her good influence.

2. Home Standards and Sleeping Arrangements

The family occupied a two-story house on A Street in South Baltimore. The house consisted of six rooms and bath, for which the rent was \$20.00 a month. The rooms were small and plainly furnished. When Mrs. Doe was living, she kept them in good condition, as she was an excellent housekeeper. Donald Wilson and James Richard slept in the same room in a large double bed. Florenco slept alone in an adjoining room.

3. Neighborhood

The house is one of a row of small, unpretentious, brick houses, occupied by the laboring class. There is a public school within a few blocks, and a playground within walking distance.

F. Religion

The family attends the Lutheran Church on Charles and Hill Streets, where the children were baptized.

G. Dietetic Regime

The children receive a well-balanced diet since going into the boarding home, and have no special preference for food.

H. Mental Status

Donald W. has a chronological age of thirteen years, seven months, and a mental age of fourteen years, eight months. His I. Q. is 108. For further information, see psychiatric report filed with summary.

I. Physical Status

Normal physically except for dental caries. See physical report attached to summary.

James Richard

A. Developmental

Normal delivery, bottle fed. Walked at eighteen months, dentition at ten months.

B. Illnesses

James Richard had measles, whooping cough and mumps at the age of four.

C. Character

James Richard is small for his age and infantile in his behavior. He is docile and easily led.

D. School James Richard is in the Opportunity Class at School A. His scholarship is fair, deportment is good, and his attendance is regular.

E. Environmental Influences

1. Relationship to parents

James Richard is shy and seems to miss his mother, and has no special yearning to return to his father. He adjusts well with his brother and sister, and presents no problem in the boarding home.

2. Home Standards and Sleeping Arrangements

See data under this topic on Donald Wilson Doe.

3. Neighborhood " " " " " " " " "

F. Religion " " " " " " " " "

G. Dietetic Regime " " " " " " " " "

H. Mental Status

James Richard has a chronological age of eleven years, one month, and a mental age of nine years. His I. Q. is 81. For further information, see psychiatric report filed with summary.

I. Physical Status

Normal physically. See physical report attached to summary.

Florence

A. Developmental

Full term baby, normal delivery. Walked at eighteen months, dentition at nine months.

B. Illnesses

Florence had measles at the age of three years.

C. Character

Florence is bright and responsive. She is easily disciplined and adjusts very well with her brothers.

D. Mental Status

Florence has a normal I.Q. See report.

E. Physical Status

Florence is normal physically except that she is five pounds underweight. See physical report attached.

DEPARTMENT OF PUBLIC WELFARE

122 CITY HALL

BALTIMORE, MARYLAND

.....19

Gentlemen:

Please verify the birth of.....
death

....., which is said to have taken place in

Address on the..... day of..... 19.....

Maiden name of mother wife.....

Name of husband father.....

Thank you for your cooperation.

Very truly yours,

T. J. S. Waxter,
Director.

Requested by.....
Worker

* * * * *

REPORT

Our records show that.....
was born.....
was married..... on the..... day of
died..... 19..... by.....

Witness..... Address.....

Witness..... Address.....

Our files between and
show no record of the above birth
marriage
death

Reported by:-

Agency

City State.....

PSYCHIATRIC REPORT

MEDICAL RECORD

(To be filled in by case worker.)

CHILD'S NAME: _____

With whom living: _____ Type of Home: _____

Address: _____

Date and Place of Birth: _____

Caseworker: _____ Agency: _____

FAMILY HISTORY: (Make negative or positive notations - Every space must be used.)

	Race or Nationality	Marital State	Miscarriages or Still Births	Venereal Infection	Tuberculosis	If dead state cause of death
Father's Name: _____						
Mother's Name: _____						

Number of other children living _____ Dead _____

CHILD'S PHYSICAL HISTORY:

Where delivered: _____ Term: _____ Normal: _____ Weight: _____

Infant feeding: (Kinds, changes, and age weaned.) _____

DEVELOPMENT: First teeth: (age) _____ Walked alone: (age) _____ Talked in sentences (age) _____

HABITS: Enuresis: _____ Mouth breathing: _____ Masturbation: _____ Night Terrors: _____

PREVIOUS ILLNESSES: (with age)

Measles at _____	Tendency to colds _____	Typhoid Fever at _____
Scarlet Fever at _____	Tonsillitis _____	Meningitis at _____
Diphtheria at _____	Rheumatism at _____	Hay Fever or _____
Mumps at _____	Chorea _____	Asthma at _____
Whooping cough at _____	(St. Vitus' Dance) _____	Convulsions at _____
Pneumonia at _____	Growing pains _____	Venereal disease _____
Chicken Pox at _____	Earache _____	

Other illnesses and remarks on past history _____

IMMUNIZATIONS

Date	Result	Date	Result
Vaccination _____		Whooping cough _____	
Diphtheria _____		Typhoid Fever _____	
Scarlet Fever _____		Others _____	
Tuberculosis _____			

BAPTISMAL CERTIFICATE

NIEDENTOHL-KOVAKA-O'KEEFE-RICH 11-24-39 #160
(Worker's full name) (Date) (Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
Washington, D.C.

VOLUMES AND UNBOUND RECORDS FORM

BALTIMORE City State MARYLAND

Name of agency or office DEPARTMENT PUBLIC WELFARE - CHILD WELFARE
(Office of custody) (Office which made the record, if different)

Address of office of custody ROOM #302 #327 ST. PAUL PLACE
(Name of building, room number, street address)

1. Title [CASE HISTORIES OF DEPENDENT AND NEGLECTED CHILDREN PLACED IN VARIOUS INSTITUTIONS - JUVENILE
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1929-1935 [COURT-INACTIVE CASES.]
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 9, STEEL DRAWERS, 6 DWRS. AVER. 240 CASES, 3 DWRS. 50,
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling SEE APPENDIX SHEET FOR LABELING.
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records NONE
(If record discontinued, give reason and state

whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINS INDIVIDUAL ENVELOPES CON
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to type of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

TAINING CASE HISTORIES OF DEPENDENT AND
NEGLECTED CHILDREN PLACED IN INSTITU-
TIONS BY ORDERS OF JUVENILE COURT USED
FOR REFERENCE PURPOSES BY THE DEPT.
OF PUBLIC WELFARE, THESE RECORDS

6. Contents--continued ARE CASE HISTORIES, SUPERVISED BY SUPERVISOR OF CITY CHARITIES PRIOR TO SETTING UP OF CHILD WELFARE DIVISION ENVELOPES, SHOW ON OUTSIDE NAME OF CHILD
(CONTINUED TO ITEM #12)
7. Arrangement ALPHA. BY NAME OF CHILD COMMITTED.
(Chronologically--by what? Numerically--by what? Alphabetically--by what?)
8. Indexing NONE.
(Self-contained--describe what it shows. If separate, fill out a form for it,

and place cross reference here to that form by title and identification number)

9. Writing HAND WRITTEN AND TYPED ON PRINTED FORM
(Handwritten. Handwritten printed form. Handwritten printed head. Typed.

Typed printed form. Typed printed head. Printed. Photostat. Other. Give months

and years covered by each kind of writing)

10. Size OF STEEL DRAWER, 19 1/2" X 15" X 24. - 6 DWRS.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
AVER. 2900 CASES, 3 DWRS. AVER. 50 CASES
OR APPROX. 19,550 CASES IN ALL.

11. Location by dates and quantities 1929-1935, IN STEEL CABINET
(Room, vault, wall--N.E.S.W., section, bin, shelf,

AGAINST EAST WALL IN ROOM #302, CHILD WELFARE DIVISION DEPT. OF PUBLIC WELFARE.

12. Other information CONDITION OF RECORDS & EQUIPMENT GOOD
(Condition of record if not good. Relation to other records.

(CONTINUED TO ITEM #6) -- NAME OF INSTITUTION
Information on prior, subsequent, or similar records. Whether record is known

DATE OF COMMITMENT, CASE NUMBER, CASE HISTORY
to have been kept earlier than dates shown in item 2)

INCLUDES, FACTS FOR IDENTIFICATION AND REFERENCE FORMS (SEE SERIAL #139 FOR DESCRIPTION OF

13. ~~(For use in Florida)~~ Early imprints FORMS) HISTORY OF CASE FROM
(Author) (Publisher)

CASE WORKER VERIFICATION OF BIRTH, MARRIAGE OR DEATH, PSYCHIATRIC REPORT, MEDICAL REC-
(Place of publication) (Date of publication)

ORD ~~U. S. GOVERNMENT PRINTING OFFICE~~ AND BAPTISTAL CERTIFICATE REPORT.

CASE HISTORIES OF DEPENDENT AND NEGLECTED CHILDREN PLACED IN VARIOUS INSTITUTIONS BY JUVENILE COURT.

CLOSED CASES

LABELING ITEM #4 CONTINUED

ADDENDA

1	DOUBLE DRAWERS LABELED	A - TO - L,	- JAN. 1935 - TO DATE
1	" " "	M - " - Z -	" " " "
1	" " "	ACKERMAN - TO -	DIXON.
1	" " "	DOBBINS - TO -	ISREAL.
1	" " "	JACKSON - " -	MOUNT.
1	" " "	MYER - " -	THOMSON.
1	" " "	TILGHMAN - " -	ZIOBSON.
1	" " "	NOT LABELED.	
1	" " "	} CASES REFERRED TO S. C. C.	
		{ BUT NOT ACCEPTED.	

expenditures for entertainment and various other organization activities. Filed chronologically. (Frequently, official.) 10 x 15 envelopes, 9 in., in desk drawer. Orderly Room (Bldg. E). (129)

1979. MISCELLANEOUS FILES, 1933 to date. Correspondence pertaining to the personnel of this company; weekly and monthly rosters; Fort Howard and 3d Corps Area special and general orders; Battalion, Fort Howard, 12th Infantry, and Brigade training memoranda; War Department and 3d Corps Area circular letters; special and general courts-martial memoranda; final statements; foreign service data; company payrolls; clothing settlements; transmittals and enlisted men's monthly credits and collections. Filed by subject. (Older records, rarely; current records, daily, official.) 9 x 12 folders, 3 ft. 8 in., in 3 drawers of steel filing case. Orderly Room (Bldg. E). (130)

1980. CORRESPONDENCE BOOK ON DOCUMENTS, 1934 to date. Document number, organization, station, description of document, and where filed; also a small number of documents. Entered alphabetically. (Seldom, official.) 4 x 8½ vols. (3) and envelopes, 3 in., in field desk. Orderly Room (Bldg. E). (123)

1981. SERVICE RECORDS, Apr. 1934 to date. Name, address, and serial number of each one of the enlisted personnel; grade, special rating, record of immunization, educational qualifications, address of nearest relative, remarks on current enlistment, military record, clothing accounts, and administrative remarks. Filed alphabetically and according to rank. (Frequently, official.) 4¼ x 8½ envelopes, 1 ft., in field desk. Orderly Room (Bldg. E). (121)

1982. DUTY ROSTERS, 1936 to date. Form AGO 6; date, name of organization, name and rank of enlisted person performing duty, nature of duty, and when last performed. Filed chronologically. (Daily, official.) 4 x 8½ vols., 2 in., in field desk. Orderly Room (Bldg. E). (125)

(Company D)

1983. COMPANY FUND VOUCHERS, 1920 to date. Collections through payroll deductions and from various other sources; also expenditures for entertainment and various other organization activities. Filed chronologically. (Frequently, official.) 10 x 15 and 5 x 10 folders and sheets, 3 ft., on open wooden shelf and in wooden box. Orderly Room (Bldg. F). (119)

1984. DAILY SICK REPORT, 1920 to date. Name of organization or detachment, period of report; name, serial number, and grade of enlisted person taken sick; when taken sick, whether or not incurred in line of duty, signature of medical officer, and remarks showing disposition of case. Filed chronologically. (Older records,

NIEDENTOM-KOVAKA-O'KEEFE-RICH. 11-21-39. #161
(Worker's full name) (Date) (Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
Washington, D.C.

VOLUMES AND UNBOUND RECORDS FORM

BALTIMORE CITY State MARYLAND.

Name of agency or office DEPARTMENT PUBLIC WELFARE - CHILD WELFARE -
(Office of custody) (Office which made the record, if different) DIVISION

Address of office of custody #327 ST. PAUL PLACE.
(Name of building, room number, street address)

1. Title (APPLICATION FOR ADOPTION OF DEPENDENT & NEGLECTED CHILDREN TO CHILD WELFARE DIVISION BY PROSPECTIVE FOSTER PARENTS.)
(Give present full title in quotes; assigned title, if any, in brackets.
If record has had other titles, list them with dates or quantities or both)

2. Dates 1935--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 STEEL FILE DRAWER AVER. 50 ENVELOPES
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling 1 DRAWER - FOSTER HOMES - 1000 CHILDREN'S HOMES BALTO.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE.
(If record discontinued, give reason and state

whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINS DEPT. OF PUBLIC WELFARE APPLICATION FOR ADOPTION FORMS FOR FOSTER PARENTS DESIRING TO ADOPT A CHILD. THESE CHILDREN ARE FOUNDLINGS OR DEPENDENT AND NEGLECTED CHILDREN WHO HAVE BEEN PLACED IN VARIOUS INSTITUTIONS, AND NOW ARE WARDS
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to type of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents--continued OF THE STATE. FOR DESCRIPTION OF APPLICATION, SEE FORM ATTACHED. ALSO FILED WITH APPLICATION IS CHILD'S WELFARE INVESTIGATOR'S REPORT ON. -
(CONTINUED TO ITEM #12)
7. Arrangement ALPHA. BY NAME OF APPLICANT FOR ADOPTION.
(Chronologically--by what? Numerically--by what? Alphabetically--by what?)
8. Indexing NONE.
(Self-contained--describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing TYPE WRITTEN ON PRINTED FORM
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF DRAWER 11 1/2" X 15" X 24" SIDE OF ENVELOPE
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11" X 7", AVER. 50 ENVELOPES, 1 CASE PER ENVELOPE.
11. Location by dates and quantities 1935-- IN STEEL CABINET,
(Room, vault, wall--N.E.S.W., section, bin, shelf, cabinet, on floor)
AGAINST EAST WALL, ROOM #302, CHILD WELFARE DIVISION, DEPT. PUBLIC WELFARE.
12. Other information CONDITION OF RECORDS & EQUIPMENT, GOOD
(Condition of record if not good. Relation to other records.)
(CONTINUED FROM ITEM #6) PROSPECTIVE FOSTER PARENTS, HOME, ENVIRONMENT, CHARACTER, AND FINANCIAL STATUS, ETC, TO CARE FOR CHILD. VERIFYING FOSTER PARENTS
Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)
13. ~~(For use in Florida)~~ ~~Early imprints~~ A NEWSPERSON APPLICATION FORM.
(Author) (Publisher)
(Place of publication) (Date of publication)

#160

DEPARTMENT OF PUBLIC WELFARE
327 St. Paul Place
Baltimore, Maryland

APPLICATION FOR ADOPTION

Thomas J. S. Waxter,
Director

~~Anna M. [redacted],
Assistant Director~~

Mr. and Mrs.

Street.....

City and State.....

Your application for a child has been received. Before we can give a definite reply, we must ask you to tell us frankly what kind of a home yours is, and also what type of a child you desire. Will you not, therefore, answer as fully as possible the following questions?

1. Do you want a boy or girl, or both? _____

2. What should be the age, from _____ to _____
Indicate months or years.
Give widest range possible.

3. Would the child have a room to itself? _____ If not, with whom would it share a room? _____

4. Have you taken any child before? _____ If so, from whom and for how long? _____

5. Have you had any experience in the care of children?

6. Please give your age, and the names and ages of the members of your family:

Name	Age
_____	_____
_____	_____
_____	_____
_____	_____

Post Office..... State.....County.....

7. Street No. or R.F.D. _____
(If home is in city, be careful to give street and number)
8. Have you hired help or boarders at any season of the year? _____
9. If the former, do they live in the house, and are they men or women, and of what age? _____

10. Do you own the house in which you live? _____
(If not, state amount of rent paid)
11. How many rooms are in the house? _____
12. Marriage _____ Date _____ Place _____
Performed by _____
13. What is your occupation? _____ Average weekly income _____
Property investments _____ Savings _____
Insurance: what company; how much? _____
14. How long have you lived at your present residence? _____
15. How far do you live from the nearest school? _____
16. Do what church are you affiliated: Roman Catholic, Protestant or Jewish _____
_____ and what is the name and address of your priest, clergyman or rabbi? _____

17. What is the name and address of your family physician? _____

18. What magazines or newspapers do you take? _____
What social affiliations have you? _____

19. What is your object in taking a child? _____

20. Give names and addresses of five citizens not members of your family, who know you and to whom we may write for references:

Name	Address	Occupation
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Kindly fill in the above form, and if you will return it to us we shall be glad to consider your application fully and, if satisfactory, give you a child as soon as possible.

If you have a preference to any particular kind of a child, please write us explaining your preference. When we have a child such as you desire, we shall notify you.

Yours very truly

Director,
Department of Public Welfare

Intake Division

- 162 (Applications for Public Assistance -
Rejected Cases) 1936 - Sept. 1939
- 163 (Applications for Public Assistance -
Accepted Cases.) 1936 - Sept. 1939.
- 164 (Applications for Public Assistance -
Rejected and Accepted Cases) Oct. 1939 - Oct 1940
- 165 (Intake Application Interview Record -
No Case Made) 1927 - - .

Kovaka

(Worker's full name)

10-28-39

(Date)

167

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
Washington, D.C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland
Name of agency or office Department of Public Welfare - Intake Division
(Office of custody) (Office which made the record, if different)
Address of office of custody 327 St. Paul Place,
(Name of building, room number, street address)

1. Title (Applications for Public Assistance - Rejected Cases)
(Give present full title in quotes; assigned title, if any, in brackets.
If record has had other titles, list them with dates or quantities or both)

2. Dates 1936 - Sept 1939.
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 18 steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Not labeled
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None.
(If record discontinued, give reason and state

whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Record of cases identified only in this office consists of applications for relief but have not been accepted; data from this record prepared for the State Welfare Board also for the statistical division of Dept. of Public Welfare; individual cards show name and address of applicant;
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to type of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents--continued: case number, worker's name; status of application under category of assistance;
reverse side of cards show summary and disposition of case.
7. Arrangement Alphabetically by names of applicants
 (Chronologically--by what? Numerically--by what? Alphabetically--by what?)
8. Indexing None.
 (Self-contained--describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Typed on printed cards.
 (Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of drawer 6" x 8 1/2" x 18" Average 1500 cards
 (Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities 1936-Oct. 1939, 18 drawers near
 (Room, vault, wall--N.E.S.W., section, bin, shelf, cabinet, on floor)
south wall in intake office on first floor.
12. Other information Records and containers are in
 (Condition of record if not good. Relation to other records.)
excellent condition
 Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)
13. (For use in Florida.) Early imprints _____
 (Author) (Publisher)

 (Place of publication) (Date of publication)

Kovata

(Worker's full name)

10-30-39

(Date)

163

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
Washington, D.C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare - Intake Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place
(Name of building, room number, street address)

1. Title (Applications for Public Assistance - Accepted Cases)
(Give present full title in quotes; assigned title, if any, in brackets.)

If record has had other titles, list them with dates or quantities or both

2. Dates 1936 - Sept. 1939
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 18 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Drawers not labeled
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state

whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Accepted cases of applications for Public Assistance; data from this record prepared for the State Welfare Board also for the Statistical Division of the Department of Public Welfare; individual application card shows name and address of applicant; case number, worker's name; status
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to type of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents--continued of application under category of assistance; reverse side of card shows summary and disposition of case.
7. Arrangement Alpha. by names of applicants
(Chronologically--by what? Numerically--by what? Alphabetically--by what?)
8. Indexing None
(Self-contained--describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Typed on printed cards.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of drawers 6"x8 1/2"x18" Average 1500 cards
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities 1936-Oct. 1939, 18 drawers near south wall in intake office on 1st. floor.
(Room, vault, wall--N.E., S.W., section, bin, shelf, cabinet, on floor)
12. Other information Records and containers are in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Kovack

(Worker's full name)

10-29-39

(Date)

164

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
Washington, D.C.

VOLUMES AND UNBOUND RECORDS FORM

~~City~~ Baltimore City State Maryland

Name of agency or office Department of Public Welfare-Intake Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place
(Name of building, room number, street address)

1. Title (Applications for Public Assistance -
Rejected and Accepted Cases)
(Give present full title in quotes; assigned title, if any, in brackets.
If record has had other titles, list them with dates or quantities or both)

2. Dates Oct., 1939 - Sept. 1940
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 3 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Not labeled
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None.
(If record discontinued, give reason and state

whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Contains applications for public
assistance of cases that have been
rejected also cases accepted; data from
this record is prepared for the State Welfare
Board also for the statistical division of the
Department of Public Welfare; individual cards
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to type of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents--continued show name and address of applicant;
case number, worker's name; status of application
under category of assistance; reverse side of
cards show summary and disposition of case.
7. Arrangement Alpha. by names of applicants.
 (Chronologically--by what? Numerically--by what? Alphabetically--by what?)
8. Indexing None
 (Self-contained--describe what it shows. If separate, fill out a form for it,

 and place cross reference here to that form by title and identification number)
9. Writing Typed on printed cards.
 (Handwritten. Handwritten printed form. Handwritten printed head. Typed.

 Typed printed form. Typed printed head. Printed. Photostat. Other. Give months

 and years covered by each kind of writing)
10. Size of steel file drawer 6"x8"x18" Average 1200
 (Of record or container. Height, width, thickness or depth. Average number of
cards per drawer.
 pages or documents)
11. Location by dates and quantities Oct. 1939-Sept. 1940, 3 drawers
 (Room, vault, wall--N.E.S.W., section, bin, shelf,
near south wall in intake office on first
 cabinet, on floor)
floor.
12. Other information Records and containers are in
 (Condition of record if not good. Relation to other records.
excellent condition.
 Information on prior, subsequent, or similar records. Whether record is known

 to have been kept earlier than dates shown in item 2)
13. (For use in Florida.) Early imprints _____ (Author) _____ (Publisher)
 _____ (Place of publication) _____ (Date of publication)

Kovacka

(Worker's full name)

10-30-39

(Date)

165

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
Washington, D.C.

VOLUMES AND UNBOUND RECORDS FORM

~~6~~ Baltimore City State Maryland

Name of agency or office Department of Public Welfare-Intake Division
(Office of custody) (Office which made the record, if different)

Address of office of custody 327 St. Paul Place.
(Name of building, room number, street address)

1. Title (Intake Application Interview Record -
(Give present full title in quotes; assigned title, if any, in brackets.)
No Case Made)

If record has had other titles, list them with dates or quantities or both)

2. Dates 1927--.
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 19 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling See addenda sheet for labeling of drawers.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state

whether same information shown in another record. Explain why records are

missing, if possible)

6. Contents Intake application interview sheets kept
(Purpose and general nature of record. Principal items of information

for future reference purposes; individual interviews
shown. Summary of forms used in making record, their headings, etc. If a very

of persons applying for relief and no case
general or miscellaneous record detailed information as to type of records

was made as applicant is ineligible; records
contained and dates covered by each should be given. Unless contents of those

show name of worker by whom interviewed;
records are described by other Forms 12-13HR, such forms should be filled out

date; applicants' surname, man's first name,
and attached)

6. Contents--continued birth date, family status, race, birth-
place; woman's maiden name, woman's first name,
birth date, family status, race, birthplace; present
and previous address; previous marriages; (cont. on line 12)

7. Arrangement Alph. by names of applicants.
(Chronologically--by what? Numerically--by what? Alphabetically--by what?)

8. Indexing None.
(Self-contained--describe what it shows. If separate, fill out a form for it,

and place cross reference here to that form by title and identification number)

9. Writing Handwritten on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head? Typed.

Typod printed form. Typod printed head. Printed. Photostat. Other. Give months

and years covered by each kind of writing)

10. Size of drawers 11" x 14" x 26" Approx. 67000 documents.
(Of record or container. Height, width, thickness or depth. Average number of

pages or documents)

11. Location by dates and quantities 1927 to date, 19 drawers on
(Room, vault, wall--N.E.S.W., section, bin, shelf,

south wall in intake office.
cabinet, on floor)

12. Other information Records and containers in excellent condition.
(Condition of record if not good. Relation to other records.

continued from line 6 ~~_____~~ names of children,
Information on prior, subsequent, or similar records. Whether record is known

birth dates and birth places; person or organization
to have been kept earlier than dates shown in item 2)

reporting address, phone number; central file
report; also notes on interview.

~~13. (For use in Florida.) Early imprints~~ Note: Interview sheets
(Author) (Publisher)

of applicants accepted will be found in Case
(Place of publication) (Date of publication)

History Records.

Continued from line 4.

Intake Application Interview Record

List of drawers labeled as follows

No Case Made A - Bel

No Case Made Bels - Brown (R.)

No Case Made Brown (S.) - Clark (R.)

No Case Made Clark (S.) - Davis (V.)

No Case Made Davis (W.) - Fin

No Case Made Fin - Graz

No Case Made Grea - Henz

No Case Made Hlep - Jez

No Case Made Ji - Knight (K.)

No Case Made Knight (L.) - McZe

No Case Made Ma - Most (M)

No Case Made Mot - Pif

No Case Made Pig - Rose (F.)

No Case Made Rose (G.) - Sim

No Case Made Sin - Sul

No Case Made Sun - Yz

No Case Made W - Williams (G.)

No Case Made Williams - Z

No Case Made Z

CITY OF BALTIMORE
DEPARTMENT OF PUBLIC WELFARE
327 ST. PAUL PLACE

INTAKE APPLICATION INTERVIEW SHEET

Interviewed By _____ Date _____

1. Surname Man's first name Birth date Family status Race Birthplace

2. Woman's Maiden Name Woman's first name Birth date Family status Race Birthplace

3. Present Address Previous Address

Previous Marriage #1

Previous Marriage #2

Children: Birth date Birthplace Children: Birth date Birthplace

1. 5.

2. 6.

3. 7.

4. 8.

Person or Organization Reporting: Central File Report

Address:

Phone Number:

NOTES ON INTERVIEW

No.	Title	Con- tainers	Incl. dates	Report rec'd.	Returned	Entry Written
31	Statistical Reports	3 F.D.	1933--			
32	Miscellaneous	2 F.D.	1933-36			
33	Entry Ticket	2 F.D.	1937--			
34	General Public Assistance	1 F.D.	1937--			
35	Change Ticket	1 F.D.	1937--			
36	General Pub. Ass. Cut off	1 F.D.	1937			
37	Statistical Record	4 F.D.	1937			
38	" Cards	6 F.D.	1938--			
39	Aid to Dependent Child	2 F.D.	1938--			
40	" Emergency Allow.	1 F.D.	1938--			
41	Change Ticket	1 F.D.	1938--			
42	Cut off Ticket	2 F.D.	1937--			
43	Old Age Pensions	2 F.D.	1936--			
44	" Change Ticket	1 - D	1938--			
A 44	" G. N. P.	1 F.D.	1937--			
45	" Cut off	1 F.D.	1936--			
46	Maturity Record	4 F.D.	1933--			
47	" Colored Cases	3 F.D.	1933--			
48	Assistance to Blind	1 F.D.	1938--			
49	" Change Ticket	1 F.D.	1938--			
A 49	Check for Ass. to Blind					

- INDEX OF - 80
DEPARTMENT OF PUBLIC WELFARE

STATISTICAL DIVISION - 331 ST. PAUL PLACE

SERIAL No.	SERIAL DATES	SUBJECT.	YEARS AFFECTED
50	1-31-39	(ASSISTANCE TO THE BLIND - CUT-OFF TICKETS)	1938--
51-A	1-5-39	(STATISTICAL RECORD - AID TO DEPENDENT CHILDREN) "A.T.C. - ^{ACTIVE} CASES 1936"	1936-1937
51-B	1-30-39	(STATISTICAL RECORD - AID TO DEPENDENT CHILDREN - ACTIVE CASES)	1938--
52	1-5-39	(STATISTICAL RECORD - AID TO DEPENDENT CHILDREN) "A.T.C. CLOSED CASES"	1936--
53	1-25-39	(STATISTICAL RECORDS - AID TO THE BLIND - ACTIVE CASES)	1936
54	2-2-39	(STATISTICAL RECORD - ASSISTANCE TO BLIND - ACTIVE CASES) "A.T.B"	1937
55	2-2-39	(STATISTICAL RECORD - ASSISTANCE TO BLIND - ACTIVE CASES)	1938--
56	1-25-39	(STATISTICAL RECORDS - AID TO THE BLIND) "1938 CLOSINGS"	1938--
57	2-2-39	(STATISTICAL CARDS - OLD AGE ASSISTANCE) "OAA - 1937 - CLOSED"	1937--
58	2-3-39	(STATISTICAL RECORD - OLD AGE ASSISTANCE - ACTIVE CASES)	1937--
59	2-6-39	(STATISTICAL RECORD - ASSISTANCE TO BLIND - CLOSED CASES)	1937

SCOTT-KOVAKA
(Worker's full name)

1-11-39
(Date)

31
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND
Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)
Address of office of custody 331 ST. PAUL PLACE
STATISTICAL DIVISION
(Name of building, room number, street address)

1. Title (STATISTICAL REPORTS)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1933--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 3 - STEEL FILE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling DRAWERS NOT LABELED
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINING DAILY STATISTICAL REPORTS OF INTAKE AND CLOSINGS, DISTRICTS SECRETARIES
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
COMMENTS ON WEEKLY STATISTICAL REPORTS, MONTHLY REPORTS OF CASE LOADS, MONTHLY Com-
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
PARATIVE SERVICE REPORTS OF OBLIGATIONS INCURRED FOR RELIEF, MONTHLY STATISTICAL AND
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
FINANCIAL REPORTS, MONTHLY STATISTICAL REPORTS ON PUBLIC ASSISTANCE, MONTHLY GENERAL
PUBLIC ASSISTANCE AND AID TO DEPENDENT CHILDREN SUPPLEMENTATION TO THE SOCIAL SECURITY
BOARD, MONTHLY REPORTS TO U.S. DEPARTMENT OF LABOR RESPECTING AID TO THE AGED OR
BLIND - FAMILY WELFARE AND RELIEF - PROTECTIVE AND FOSTER CARE OF CHILDREN - AID
TO DEPENDENT CHILDREN AND MONTHLY AND ANNUAL STATISTICAL REPORTS RESPECTING AID

6. Contents—continued To DEPENDENT CHILDREN - AID TO THE BLIND - GENERAL PUBLIC ASSISTANCE AND OLD AGE ASSISTANCE AND SUMMARIES BEARING UPON THE OPERATION AND MAINTAINANCE OF THE SEVERAL AGENCIES, KNOWN AS THE BALTIMORE EMERGENCY RELIEF COMMISSION, EMERGENCY CHARITY ASSOCIATION AND THE DEPARTMENT OF PUBLIC WELFARE REPORTS GIVE THE TOTAL CASES UNDER CARE FOR THE RESPECTIVE PERIODS, } CON'T ON LINE 12

7. Arrangement CHRONOLOGICALLY BY DATES OF REPORTS.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing TYPED ON PLAIN SHEETS - PRINTED AND MIMEOGRAPH FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWERS 11 1/2" x 14" x 26" - AVERAGE 8500 DOCUMENTS PER DRAWER
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1933 TO DATE - 3-STEEL FILE DRAWERS, LOCATED ON WEST WALL OF STATISTICAL DIVISION OFFICE.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information RECORDS AND CONTAINERS ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
CONTINUED FROM LINE 6 - TOTAL NUMBER OF CASES CARRIED OVER FROM THE PREVIOUS PERIODS
(Whether record is known to have been kept earlier than dates shown in item 2)
OF OTHER AGENCIES; NUMBER OF CASES OPENED DURING THE PERIOD; NUMBER OF APPLICATIONS AND PERCENTAGE OF APPLICATIONS OF MADE CASES; NUMBER OF CASES CLOSED DURING SPECIFIC PERIODS AND NUMBER OF CASES AS CARRIED OVER FROM THE FOLLOWING PERIODS; NUMBER OF ACTUAL RELIEF CASES BEING CARRIED; NUMBER OF CASES UNDER CARE BECAUSE OF UNEMPLOYMENT - UNDER-EMPLOYMENT - INSUFFICIENT WAGE; NUMBER OF INDIVIDUALS PUT TO WORK DURING SUCH SPECIFIC PERIODS; TOTAL RELIEF GIVEN WORK RELIEF; AMOUNT OF RELIEF PER RELIEF FAMILY; NUMBER OF SOCIAL WORKERS ON THE STAFF AND CASE LOADS AS CARRIED BY EACH INDIVIDUAL WORKER; NUMBER OF INTERVIEWS AS MADE BY THE SOCIAL WORKER, BOTH INSIDE OF OFFICE AND AT THE CLIENT'S HOMES.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

BALTIMORE EMERGENCY RELIEF COMMISSION
DAILY STATISTICAL REPORT OF INTAKE AND CLOSINGS
APRIL 30th 1936

	<u>Cases Opened</u>					<u>Closings Cancelled</u>	<u>Closings</u>
	<u>Total</u>	<u>Includes Singles</u>	<u>New</u>	<u>Old</u>	<u>Recurrent</u>		
<u>c.o.</u>	42	13	14	15	12	1	
<u>Dist.</u>						1	
<u>Total</u>	42	13	14	15	12	2	

X

BALTIMORE EMERGENCY RELIEF COMMISSION

DAILY STATISTICAL REPORT ON INTAKE AND CLOSINGS

AUGUST 20, 1934

1935

may

Dist.	Total Reported Accepted	Total Cases Opened and Investigated			Closings Cancelled	Closings
		Total	New	Recurrent		
I	1	8	4	4	1	
II	6	7	2	5		9
III	5	4	1	3		5
IV	3	5	1	4		10
V	3					6
VI	2	3	1	2	2	
VII	8	5	1	4		2
VIII	2	3	2	1		
IX	2	4	2	2		7
X		1		1	1	1
XI	16	16	7	9	2	41
XII	19	10	5	5	2	
Total	67	66	26	40	8	81

Intro Office + Comm.

BERE. 1936

31

BALTIMORE EMERGENCY RELIEF COMMISSION

DISTRICT SECRETARIES' COMMENTS ON WEEKLY STATISTICAL REPORTS

WEEK ENDING - JUNE 29, 1934

District #1

Checks this week are \$1,415.91 over last week due to the fact that fourteen Workers sent no checks last week having sent two weeks checks the previous week. Every Worker sent checks this week.

Our Merchandise in the District Office this week went down \$ 534.81.

Our Cash Expenditure of June 15th was ----- \$ 16,731.88
" " " " 22nd " ----- \$ 11,070.14

which gives us an overexpenditure for June 15th as against the 22nd of \$5,661.74. Even though we report this week an overexpenditure of \$1,415.91 in checks we are \$4,245.83 under as last week's report did not show the expenditures for fourteen Workers. Our expenditures as we have tabulated will bring us within our required budget for the week.

Pennsylvania Railroad called back to work this week all men who had been in their employ. The majority of these will be closed cases after next week and we should show a material decrease after their first pay.

District #2

We have not been able to close out cases as rapidly as we should have liked. In the first place several Workers are on vacation (Short vacations of a few days.) They were unable to get the dictation up before they left, due to pressure of other work and lack of sufficient Stenographic help. The relief in these cases is suspended, however. Workers still on duty find they cannot dictate, due to carrying 2 peoples' caseloads and having to cover their caseloads with application blanks this week. As soon as we can get another Typewriter, an emergency relief Typist, and ease up a bit on Clerical demands on the Workers, we will renew our drive on closings. This week has been pretty difficult for the Workers because of the fact that several caseloads were not covered by application blanks. Those who had already used the application blanks system found it a most effective means of closing out cases.

We are trying to reduce rents in Suburban Sections and find some landlords very cooperative; others absolutely refuse to accept a maximum of \$25.00, claiming it would work real hardships on other land-owners in the section.

We hear of several big concerns shutting down temporarily because of lack of funds. Glenn L. Martin is the chief of these. They are supposed to have laid off 1000. Many applying here had previously been on our rolls and worked for the aircraft concern the last few months. Maryland Distillery has sold out and laid off hands. Intake is not up much, but applications are increasing. Our regular Intake Secretary will return from her vacation next week and we hope she can hold Intake down. We feel we have done wonders in June with an absolutely inexperienced Intaker.

The spirit of the Workers has been splendid and they are doing their utmost to cooperate with C. O. They take their responsibility very seriously.

District Secretaries' Comments on Weekly Statistical Reports (Cont'd).

District #3

Cash expenditures in the District have decreased appreciably this week, in spite of the fact that a number of people were cut off work relief projects and had to be given cash from the District office. We have not paid rents which should have been paid this month, (Some of these will have to be paid for several months in arrears), so as to cut our expenditures for June as much as possible. These rents will have to be paid in July. I believe, however, that the rent payments we have been able to cut will counterbalance this in July.

We have made every effort to keep within the budget allotted. Next week the relief cases may be reduced due to the wholesale use of the application blanks this week. After that, however, it is believed that there can be no further drastic reductions in relief expenditures in District Three.

We had to reopen eight cases this week that had been closed in June, most of these people who said that after trying they found they could not get odd jobs.

District #4

Our retrenchment this week did not come as easily as we had anticipated. However, cutting off household incidentals and some personal incidentals helped considerably. Intake was responsible for part of our difficulty as Intake increased in this district due to strike. Last week, you will recall, we had five new cases accepted due to the Butchers' strike; this week there were thirteen new applications, ten of which were accepted. Some are still pending. We also had one other strike case from a transferred case that we had to accept. Dryer's Box Factory and the hat factories are laying off. The city employment apparently must be improving a little, as we have had several work references to come back showing that they have recently re-instated some men and increased the time of others; and two men were offered jobs which they refused according to our work references. We are continuing to supplement Weiskittle's, as their difficulties are not yet settled.

Our savings were accomplished in the following manner:

1. Considerable people have gone to the country.
2. No increase in the packing house employees this week; will start next week.
3. Several new fraud cases have been discovered where clients were working and withholding information.
4. Several jobs have been secured and reported.
5. Considerable savings have been accomplished by sending cut-off tickets on work relief men whose carfare has run as high as \$4.00 weekly for double carfare. We removed a number from work relief.
6. The National Reemployment Bureau has secured several jobs for clients.
7. People have had seasonal work such as plumbing, painting and produce jobs.
8. Mr. Davis continues to report jobs that enable us to close the cases.
9. A very large number have been cut off where families refused to sign application blanks.
10. We have cut off supplementary relief whenever the income was anywhere near the adequate.
11. We have cut off several rentals where the families were working, although the amount is not determinable.
12. A drive on re-checking work references through the work reference forms has been undoubtedly our very greatest savings this week.

District Secretaries' Comments on Weekly Statistical Reports (Cont'd)

District #4 (Cont'd)

13. Ceasing two week checks has brought some results this week, but more will be shown next week.

14. We have withheld numerous checks where we were suspicious that members of the families were working and waited for them to come to the District Office for their checks, which they did not do. In these particular cases every effort had been made on visiting to get the families to admit that they had secured work, they had been found at home by delivery boys and were always present when worker visits: nothing could heretofore be proven against them.

15. We have completed our drive for 100% application forms on every active family.

District #5

Our number of relief cases have been reduced 59 this week, but we feel sure it is not a permanent reduction either in caseload or in the amount of relief given, first because we did not send checks to many who did not bring in their application blanks, but whom we feel sure will come in next week, and secondly, because we also held off paying some rents, two large moving jobs etc. until July 1st.

The amount of relief and our number of relief cases will, therefore, rise considerably next week. I also estimate that we will spend \$2,000.00 more in rent next week than we did last. The workers are anxious to again include household incidentals in their budgets.

District #6

We have been particularly careful to spend no money for Clothing, Shoes, Dental Work, etc. which was not absolutely urgent. This will necessarily increase our relief costs next week. So far as we can determine we have imposed no serious hardships upon the clients. The Workers have been especially cooperative in reducing relief costs and are due much credit for the manner in which they have handled the situation. We have had some reactions from cases closed a little too arbitrarily during the month, but are reopening them. On the whole things have worked out very nicely.

District #7

Despite the delay due to our inability to secure application blanks, practically all of them have been filled out and returned. The Workers have found them of little use in opening the way to further closings. This may be due to the fact that we had already used them in questionable cases.

Due to the apparent saving of sending only one week checks and the cutting out of shoes and clothing for the past week, I believe we will be able to come within our financial budget, barring unforeseen difficulty with Rent Bureau figures. I do not, just now, see any further way to effect savings unless we can do it through a closer control of rent. We are continuing, however, to have difficulty on that score because of inaccurate information given us by the Rent Bureau.

District Secretaries' Comments on Weekly Statistical Reports (Cont'd)

District #8

Cash given by District is considerably less than last week because the Workers (one half of total number) who would ordinarily have sent two-week checks this week sent only one-week checks for the current week. The effect of this change in check writing procedure was the same as if relief were provided for only one-half the relief load. (In actuality the other half were provided for by the double checks of last week included in last week's Obligations). Next week the cash will rise because all the Workers will write one-week checks.

District #9

Our comments for this week are about the same as they were last week. We would like to add, however, that the filling out of application blanks has already proved most helpful in reducing relief. Next week we will continue to concentrate on getting these application blanks and on following up the information which is gained in this way. The seeming increase in the amount of relief this week is caused by our change from sending checks every two weeks to sending them every week. Last week only half the staff had sent out relief while this week it was sent out for each Worker. We also paid more rent in District than last week yet amount paid by Rent Bureau went up. Number of applications filled out and signed 1701; Number of applications not filled out and signed 2348.

District #10

The \$122.65 for shoes represents purchase orders that reached Financial Department after weekly report had been computed early Friday afternoon. The order to stop shoe grants came close to 5 P. M. No shoes were granted beginning 6/23 with the exception of 3 pairs of specials thru Hochschilds.

We are able to compare cash relief given this period with same period in May because same Workers checks go out on same days every month. For this period in May we issued \$7,576.43, June \$6,435.19 a difference of \$ 1,141.24. No money was granted this week for clothing or household necessities.

We closed 37 cases this week of whom 28 received relief thru the following months: 2 in June; 9 in May; 6 in April; 8 in March; 1 in February; 2 in January.

During the week we discontinued relief in 13 cases for the following reasons: (1) 3 left city; (2) 5 Sufficient income; (3) 1 secured employment; (4) 1 concealed income; (5) 2 doubtful cases; (6) 1 receiving disability compensation. We will have more cut-offs next week.

Regarding application blanks we have approximately about 650 signed and about 550 on which to secure signatures. Two workers are away on Vacation.

District #11

The expenditures for shoes reported above are not for current week. Our system of reporting requires that orders are always reported for previous week. Next week we will attempt to show no purchases for shoes.

District Secretaries' Comments on Weekly Statistical Reports (Cont'd)

District #12

The following factors will help to account for the increased relief:

1. Steady increase of transfers-in.
2. Workers are just beginning to get acquainted with their new caseloads since redistricting was completed.
3. Lack of a rent clerk to check on rent situation in District.

Now that redistricting is completed and a rent clerk is to come on Monday more intensive investigations can be done, and relief held in greater bounds. The District has not completed having all the clients sign the application form.

Walter Boyd
A.C.U. M. E. 1938

COMBINED WEEKLY REPORT

AUGUST 28, 1935

Dist.	Total Cases	Cases Carried over	Cases Opened	Closings Cancelled ^a	Suspended Cases Reopened ^b	Not Made Cases Closed ^c	Cases made Co-operative	Relief Cases Includes Sines	No. of Persons in Relief Cases ^c	Relief Cases Containing Unemployable Persons	Cases under care because of			Unemployment	No. Secured	Aver Case Load per Visitor				
											Under-	Insuf-	Ploy-							
A.	4918	4847	60	11	10	54	151	2	4453	614	16,921	3685	2966	719	3296	264	188	12	58	85
B.	3906	3858	40	8	10	17	78	1	3465	707	12,474	2686	2026	660	2554	181	70	49	50	78
C.	6817	6714	94	9	10	77	131		6272	1250	21,952	4890	3690	1200	4373	430	136	73	87	78
D.	5661	5600	57	4	2	136	73	1	5315	721	19,666	4080	2891	1189	3680	479	181	15	67	84
XI.	2973	2936	36	1	3	63	94		2555	402	10,121	2064	1694	373	2100	120	71	43	(613)	e
Total	24,275	23,985	287	33	35	347	527	1	22,105	3594	81,134	17,405	13,264	4141	16,003	1474	646	192	270	81
Prev. Week	24,427	24,157	245	25	36	292	472	1	22,249		81,671	17,406	13,253	4153	16,101	1496	621	151	271	81
Inc or Dec	152	202	42	8	1	55	55	3	144			1	11	12	98	22	25	41	1	

a Cases closed and reopened within current month.

b Included in Total Cases.

c Calculated on basis of July Average.

d Does not equal total cases because non-industrial problems are not shown on report.

e 5 per Volunteer; 248 per Supervisor.

f Districts A-D. Includes 70 workers on vacation. Eight workers in District XI not used in figuring average case load.

g Includes 2 D.P.W. cases opened for Old Age investigation, and 24 D.P.W. cases opened for Out-of-Town investigations. In addition 15 D.P.W. cases referred for OA investigation were already active in the districts.

BALTIMORE EMERGENCY RELIEF COMMISSIONCOMBINED WEEKLY REPORTTOTAL OBLIGATIONS INCURRED FOR RELIEFAUGUST 28, 1935.

Dist.	Cash	Orders ^a	Work Relief Earnings ^b	Total Relief	Average Relief	
					per Relief Case	per Indi- vidual
A.	\$ 27,556.63	\$ 4,641.71	\$ 5,220.58	\$ 37,418.92	\$ 8.40	\$ 2.21
B.	21,838.03	3,232.27	3,190.35	28,260.65	8.16	2.27
C.	41,518.58	5,727.61	5,728.67	52,974.86	8.45	2.41
D.	32,996.68	4,591.96	6,240.44	43,829.08	8.25	2.23
XI.	16,361.84	2,404.97	4,283.18	23,049.99	8.88	2.28
Total	\$ 140,271.76	\$ 20,598.52	\$ 24,663.22	\$ 185,533.50	\$ 8.40	\$ 2.29
Prev. Wk.	\$ 138,216.65	\$ 20,523.16	\$ 27,150.00	\$ 185,889.81	\$ 8.35	\$ 2.28
Inc. or	\$ 2,055.11	\$ 75.36	\$ 2,486.78	\$ 356.31	\$.05	\$.01

a Includes \$2,220.00 estimated cost of Medical Care.

b Includes \$5,256.51 Direct Relief. (In addition \$ 1,131.06 was paid to non-relief persons.)

BALTIMORE EMERGENCY RELIEF COMMISSION

SUM OF CASH AND ORDERS ITEMIZEDAUGUST 28, 1935.

Dist	Total	Food	Shelter	Clothing	Fuel	P.U.S.	Medical Care	Household Necessities	Miscel- laneous
A.	\$ 32,198.34	\$ 21,760.03	\$ 7,113.61	\$ 176.39	\$ 347.81	\$ 1,308.06	\$ 516.23	\$ 562.01	\$ 414.20
B.	25,070.30	16,476.76	4,410.33	1,474.78	468.97	769.12	398.07	620.16	452.11
C.	47,246.19	30,521.54	9,058.25	2,871.08	991.65	1,161.97	717.05	1,175.90	748.75
D.	37,588.64	25,277.93	8,429.93	647.12	698.85	876.08	644.50	686.42	327.81
XI.	18,766.81	12,404.92	3,559.93	425.43	5.18	937.54	385.73	642.26	405.82
Total	\$ 160,870.28	\$106,441.18	\$32,572.05	\$5,594.80	\$2,512.46	\$5,052.77	\$2,861.58	\$3,686.75	\$2,348.69
Prev. Week	\$ 158,739.81	\$107,281.81	\$32,340.21	\$2,925.04	\$2,542.20	\$4,906.64	\$2,739.61	\$3,682.11	\$2,322.19
Inc. or	\$ 2,130.47	\$ 840.63	\$ 231.84	\$2,669.76	\$ 29.74	\$ 146.13	\$ 78.03	\$ 4.64	\$ 26.50

BALTIMORE EMERGENCY RELIEF COMMISSIONCOMPARISON OF BUDGET ALLOWANCE AND ACTUAL OBLIGATIONS INCURRED FOR RELIEFAUGUST 28, 1935.

Dist.	Budget Allowance	Actual	Variation of Actual from Budget Allowance	
			Amount	Percent
A.	\$ 37,098.00	\$ 37,418.92	\$ 320.92	.9
B.	27,996.00	28,260.65	264.65	.9
C.	46,752.00	52,974.86	6,222.86	13.3
D.	42,096.00	43,829.08	1,733.08	4.1
XI.	23,202.00	23,049.99	- 152.01	.7
Total	\$ 177,144.00	\$ 185,533.50	\$ 8,389.50	4.7

BALTIMORE EMERGENCY RELIEF COMMISSIONDISTRICT SECRETARIES' COMMENTS ON WEEKLY STATISTICAL REPORTAUGUST 28, 1935.DISTRICT A

The total number of relief cases dropped one. The total number of single individuals increased 16. This is accounted for by the fact that two or three weeks ago we tried some trial closings in this group which did not succeed.

Intake applications are extremely heavy because of the fact that educational and professional projects are being placed on a relief status. Also, because of WPA, undoubtedly more people are applying than ordinarily. Expenditures are running high, and we would be much more overspent than we are if we even began to fill many of the requests for clothing which will have to be met sooner or later this fall. Pennsylvania Railroad is continuing to lay off employees, and more skilled ones are amongst those applying.

DISTRICT B

We have closed 83 cases this week, an increase of 7 over last week. The majority of these are due to seasonal employment; others are due to temporary financial adjustments such as insurance and frozen assets. Our total case load is 3839, our relief case load is 3465. Seven hundred and seven of these are single cases.

We have opened 40 cases this week, a decrease of 7 over last week. Eleven of these have been for social reasons, 18 industrial, 6 of which were on account of insufficient income. Thirteen have been made recurrent by workers. The majority of the cases opened at Intake were entirely new to any agency.

DISTRICT C

Closings are still greater in number than intake, although intake is larger this week than previous week. Total caseload for the district is slightly smaller than previous week.

District Secretaries' Comments on Weekly Statistical Report (Cont'd) Aug. 28, 1935.

DISTRICT D

Fifty-two cases were opened or re-opened during the past week; forty-eight by Intake. There were, however, only twenty-four new cases. The majority of cases accepted at Intake were due to unemployment, but no particular firm or industry contributed a majority.

DISTRICT 11

We continue the downward trend in case load with 94 closings as against 36 openings and anticipate closing within the next month 150 additional cases under care at this time.

About 1/3 of the case load consists of families containing no employable individuals.

Four hundred and two single cases are included in the active case load of this week.

COUNTY Baltimore, Md.MONTH September 1934MARYLAND EMERGENCY RELIEF ADMINISTRATIONMONTHLY REPORT OF CASE LOAD

	NUMBER OF FAMILIES	NUMBER OF PERSONS REPRESENTED	NUMBER OF SINGLE PERSONS.
1- Total Number of Open Cases Carried Forward From Preceding Month ^a	(24,918)	(104,699)	Reported at end of August (3,984)
	24,880	104,314	4,021
2- Total Number of Applications Received during the Month.	2,790	11,250	1,078
3- Total Number of New Cases Opened	637	2,489	260
4- Total Number of Old Cases Re-opened	864	3,969	187
5- Total Number of Cases Opened during the month (Total of Items 3 and 4)	1,501	6,458	447
6- TOTAL NUMBER OF CASES OPEN DURING MONTH			
a- Open cases that did not receive relief during month	1,494	5,939	389
b- Number of cases that received relief during the month	24,887	104,833	4,079
Total - (Must agree with sum of Items 1 and 5)	26,381	110,772	4,468
7- Total Number of Cases Closed during month	1,542	6,180	315
8- TOTAL NUMBER OF CASES OPEN AT END OF MO.			
a- Number of Cases active at end of mo.	23,602	99,515	3,894
b- Number of cases inactive at end of month	1,237	5,077	259
Total - (Must agree with difference between total of Item 6 less Item 7)	24,839	104,592	4,153
9- Total number of Service Cases treated during month	771	3,002	197
10- CASES RECEIVING DIRECT RELIEF DURING THE MONTH			
a- Not supplemented by Work Relief	20,053	80,558	4,037
b- Supplemented by Work Relief	3,749	19,652	14
11- CASES RECEIVING WORK PROGRAM EARNINGS DURING THE MONTH	4,834	24,275	42
12- Number of Persons on Last Administrative Payroll Ending During the Month	MERC (Sept. 30)	WORK DIVISION (Oct. 3)	
a- Relief	228	13	241
b- Non-Relief	946	83	1,029

^a 37 families reclassified as singles; 1 duplicate case combined.

Evelyn E. Singleton

Executive Secretary

Statistician

Obsolete.

Board of M.E.R.A.
v. State. 1935

2 era Apr 1935?

BALTIMORE EMERGENCY RELIEF COMMISSION

COMPARATIVE SERVICE REPORT -- August 1935

1936

OBLIGATIONS INCURRED FOR RELIEF*

Dist.	Total Cash	Total Orders	Earnings paid by Work Bureau	Direct Relief Work Division	Total Obligations Incurred	Average Relief per case	per Individual
A.	\$ 126,862.04	\$ 21,721.30	\$ 22,172.19	\$ 4,679.22	\$ 175,434.75	\$ 37.15	\$ 9.67
B.	100,537.47	17,122.74	13,087.03	2,739.78	133,487.02	36.00	10.27
C.	177,716.69	25,849.33	24,146.89	5,590.86	233,213.77	35.39	10.18
D.	142,911.58	21,119.63	23,910.07	9,115.85	197,057.13	35.96	9.63
XI.	73,998.64	11,386.66	18,275.59	3,522.76	107,183.65	37.70	9.59
Total	\$ 622,026.42	\$ 97,199.66	\$ 101,591.77	\$ 25,558.47	\$ 846,376.32	\$ 36.26	\$ 9.88
Prev. Month	\$ 614,341.32	\$ 95,304.45	\$ 73,627.58	\$ 28,576.76	\$ 811,850.11	\$ 33.75	\$ 9.20
Inc. or Dec.	\$ 7,685.10	\$ 1,895.21	\$ 27,964.19	\$ 3,018.29	\$ 34,526.21	\$ 2.51	\$.68

* Source of data -- Accounting Department.

Central Office
& Districts.

BALTIMORE EMERGENCY RELIEF COMMISSIONCOMPARATIVE SERVICE REPORT -- August 1935OBLIGATIONS INCURRED FOR RELIEF

Dist.	Total Cash and Orders	SUM OF CASH AND ORDERS (Itemized)							
		Food	Shelter	Clothing	Fuel	P. U. S.	Medical Care	House- hold	Miscel- laneous
A.	\$ 143,583.34	\$ 100,539.94	\$ 31,721.59	\$ 2,154.23	\$ 1,585.06	\$ 5,723.69	\$ 2,486.47	\$ 2,509.48	\$ 1,862.78
B.	117,660.21	77,308.61	20,734.01	7,266.81	2,116.01	3,638.92	1,737.60	2,876.52	1,981.73
C.	203,566.02	134,141.78	39,954.04	8,977.63	4,322.83	4,914.48	3,070.21	5,000.61	3,184.44
D.	164,031.21	110,768.75	37,059.47	2,306.63	3,091.16	3,669.13	2,725.60	2,935.06	1,475.41
XI.	85,385.30	56,783.46	16,284.50	1,790.77	.87	4,262.32	1,525.22	2,925.81	1,812.35
Total	\$ 719,226.08	\$ 479,542.54	\$ 145,753.71	\$ 22,496.07	\$ 11,115.93	\$ 22,208.54	\$ 11,545.10	\$ 16,247.48	\$ 10,316.71
Prev. Month	\$ 709,645.77	\$ 479,217.96	\$ 147,532.98	\$ 13,536.25	\$ 11,421.73	\$ 22,284.08	\$ 11,624.85	\$ 14,661.33	\$ 9,366.59
Inc. or Dec.	\$ 9,580.31	\$ 324.58	\$ 2,219.27	\$ 8,959.82	\$ 305.80	\$ 75.54	\$ 79.75	\$ 1,586.15	\$ 950.12

31

BALTIMORE EMERGENCY RELIEF COMMISSION

MONTHLY STATISTICAL AND FINANCIAL REPORT

APRIL - 1936

	April 1936	March 1936	April 1935
Total cases under care	<u>11,237</u>	<u>11,191</u>	<u>32,947</u>
Cases carried from previous month	10,175	9,855	31,680
Cases opened during month	1,062	1,336	1,267
Number of applications	2,906	3,389	2,364
Percent of applications made cases	36.5%	39.4%	53.6%
Cases closed during month	1,202	1,016	2,878
Number carried to next month	10,035	10,175	30,069
Racial distribution of clients			
White	5,676	5,631	18,788
Negro	5,556	5,533	14,147
Yellow	2	2	3
Brown	3	2	8
Red		3	1
Number of relief cases	10,123	10,110	30,404
Includes cases containing employable persons	4,542	4,151	
Cases made cooperative during month	47	43	24
Total cooperative cases under care	391	400	756
Cases under care because of			
Unemployment	3,649	3,911	23,601
Underemployment	270	292	2,167
Insufficient wage	302	228	1,229
Other problems	7,016	6,760	5,950
Employment secured	371	188	1,411
WPA transfers	24	157	
Total obligations incurred for relief	\$294,174.15	\$320,830.96	\$999,936.26
Relief per relief case	\$ 29.06	\$ 31.73	\$ 32.89
Relief per individual	\$ 8.92	\$ 9.70	\$
Number of Visitors	109	114	282
Average case load per Visitor	100	95	101
Number of interviews	<u>22,412</u>	<u>23,167</u>	<u>72,559</u>
Inside office	10,104	10,932	17,468
Outside office	12,308	12,235	55,091

Comm. 1936

31

BALTIMORE EMERGENCY RELIEF COMMISSION
WEEKLY STATISTICAL AND FINANCIAL REPORT

MAY 27, 1936

WEEK ENDING

	May 27, 1936	May 20, 1936	May 29, 1935
Cases carried from previous week	9,773	9,831	28,340
Cases opened during week	27	180	193
Closings cancelled	2	6	
Total cases under care	9,802	10,017	28,533
Cases closed during week	437	244	1,573
Number of relief cases	8,222	8,606	24,251
Includes relief cases containing employable persons	2,806	3,179	
Cases under care because of			
Unemployment	2,601	2,645	20,468
Underemployment	213	217	1,628
Insufficient wage	137 ^b	202	903
Individuals put to work during week	108	79	398
Transfers to WPA	3	57	
Total relief given	\$ 60,026.40	\$ 65,255.24	\$ 181,530.13
Relief per relief case	\$ 7.30	\$ 7.58	\$ 7.49
Number of Visitors	107 ^a	105	274
Average case load per Visitor	89	92	90

^a Exclusive of 264 District XI cases carried by 2 special supervisors.
^b Closed, non-relief or awaiting special permission.

obselete

For B&R C Comm.

31

MONTHLY STATISTICAL REPORT ON PUBLIC ASSISTANCE

*Board of State
Aid & Charities*

LOCAL UNIT

MONTH OF 193

A. APPLICATION FOR PUBLIC ASSISTANCE

APPLICATIONS	UNDUPLICATED NUMBER OF APPLICATIONS FOR PUBLIC ASSISTANCE	NUMBER OF APPLICATIONS				
		FOR OLD AGE ASSISTANCE	FOR AID TO DEPENDENT CHILDREN		FOR PUBLIC ASSISTANCE TO NEEDY BLIND	FOR GENERAL PUBLIC ASSISTANCE
			NUMBER OF FAMILIES	NUMBER OF CHILDREN		
I	II	III	IV	V	VI	
1. PENDING FROM PRECEDING MONTH (LINE 5, PRECEDING MONTH)	xxx					
2. RECEIVED DURING THE MONTH	xxx					
3. TOTAL DURING MONTH (ITEM 1 PLUS ITEM 2)	xxx					
4. DISPOSED OF DURING MONTH (SUM OF ITEMS A, B, C)	xxx					
A. APPROVED (SAME AS ITEM 7)	xxx					
B. DENIED AS INELIGIBLE	xxx					
C. DISPOSED OF FOR OTHER REASONS	xxx					
5. PENDING AT END OF MONTH (ITEM 3 MINUS ITEM 4)	xxx					

B. NUMBER OF CASES APPROVED FOR PUBLIC ASSISTANCE

CASES	UNDUPLICATED NUMBER OF CASES APPROVED FOR PUBLIC ASSISTANCE	NUMBER OF				
		INDIVIDUALS APPROVED FOR OLD AGE ASSISTANCE	CASES IN WHICH AID TO DEPENDENT CHILDREN HAS BEEN APPROVED		INDIVIDUALS APPROVED FOR PUBLIC ASSISTANCE TO NEEDY BLIND	CASES APPROVED FOR GENERAL PUBLIC ASSISTANCE
			FAMILIES	CHILDREN		
I	II	III	IV	V	VI	
6. CONTINUED FROM PRECEDING MONTH (LINE 10, LAST MONTH)						
7. ADDED DURING MONTH (SUM OF A, B, C.)						
A. NEW: NEVER PREVIOUSLY APPROVED						
B. OLD: LAST CLOSED PRIOR TO OCTOBER 1ST						
C. RECURRENT: LAST CLOSED AFTER OCTOBER 1ST						
8. TOTAL DURING MONTH (ITEM 6 PLUS 7; ALSO A PLUS B PLUS C)						
A. RECEIVED ASSISTANCE DURING MONTH						
B. RECEIVED SPECIAL PAYMENTS ONLY DURING MONTH			xxx	xxx		
C. RECEIVED NO PAYMENT DURING MONTH						
9. CLOSED DURING MONTH						
10. CONTINUED TO NEXT MONTH						

C. APPLICATIONS FOR W.P.A. REFERRAL

APPLICATIONS FOR W.P.A. REFERRAL	NUMBER OF APPLICATIONS
11. PENDING FROM PRECEDING MONTH (ITEM 15, PRECEDING MONTH'S REPORT)	
12. RECEIVED DURING THE MONTH	
13. TOTAL DURING THE MONTH (ITEM 11 PLUS ITEM 12)	
14. DISPOSED OF DURING THE MONTH (SUM OF A, B, C.)	
A. REFERRED TO W.P.A.	
B. DENIED AS INELIGIBLE	
C. DISPOSED OF FOR OTHER REASONS	
15. PENDING AT END OF MONTH	

D. DETAIL OF ITEM 8A, CASES RECEIVING GENERAL PUBLIC ASSISTANCE

GENERAL PUBLIC ASSISTANCE CASES GRANTED ASSISTANCE DURING THE MONTH	NUMBER OF CASES
16. NOT REFERABLE TO W.P.A.	
17. PENDING REFERRAL OR ASSIGNMENT TO W.P.A.	

E. PERSONS REPRESENTED IN CASES WHICH RECEIVED PAYMENT FROM GENERAL PUBLIC ASSISTANCE FUNDS

NUMBER OF PERSONS REPRESENTED IN	NUMBER OF PERSONS
18. TOTAL CASES REPORTED IN LINE 8A, COLUMN VI	
19. CASES REPORTED IN LINE 8B, COLUMN VI	

F. DETAIL OF GENERAL PUBLIC ASSISTANCE CASES WHICH RECEIVED NO PAYMENT DURING MONTH

TYPE OF CARE DURING MONTH	NUMBER OF CASES
20. CHILD WELFARE SERVICES	
21. OTHER SERVICES	
22. SURPLUS COMMODITIES ONLY	
23. INACTIVE CASE; OPEN FOR OBSERVATION ONLY	
24. OTHER INACTIVE CASES	
25. TOTAL (MUST EQUAL LINE 8C, COLUMN VI)	

G. DETAIL OF UNDUPLICATED CASES WHICH RECEIVED PAYMENT DURING MONTH (LINES 8A AND 8B, COLUMN 1)

TOTAL	NUMBER OF CASES CODED														
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

DATE SUBMITTED

EXECUTIVE SECRETARY OR WORKER-IN-CHARGE

Sp. 2. 2. D. 3. information to →

SOCIAL SECURITY BOARD
WASHINGTON, D. C.

SCHEDULE FOR INTERCITY EXCHANGE OF RELIEF INFORMATION

Report of _____
(Name of agency)

City _____

Name and title of person reporting _____

A. Applications for relief:

- 1. Pending from preceding month. _____
- 2. Received during month _____
- 3. Total during month. _____
- 4. Disposed of during month. _____
 - a. Accepted for general relief _____
 - (1) Loss of WPA employment _____
 - (2) Loss of regular employment _____
 - (3) Chronic illness. _____
 - (4) Cessation of unemployment compensation _____
 - (5) Other. _____
 - b. Disposed of for other reasons _____
 - c. Rejected. _____
- 5. Pending at end of month _____

B. General relief cases under care:

- 6. Continued from preceding month. _____
- 7. Added during the month (same as item 4a). _____
- 8. Total open during the month _____
- 9. Closed during the month _____
- 10. Continued to next month _____
 - a. Single-person cases _____
 - b. Family cases. _____
- 11. Total number of cases receiving relief during month _____

Amount of relief \$	_____
a. Single-person cases	" " " _____
b. Family cases.	" " " _____
- 12. Not receiving relief during month _____

C. Analysis of general relief cases closed during month:

- 13. Total (same as item 9). _____
- 14. Cases closed by transfer to other relief status _____
 - a. To WPA. _____
 - b. To CCC. _____
 - c. To NYA. _____
 - d. To old-age assistance _____
 - e. To aid to dependent children. _____
 - f. To aid to the blind _____
 - g. To private relief _____
 - h. Other _____
- 15. Cases closed because relief no longer needed. _____
 - a. Regular employment obtained _____
 - b. Increased earnings. _____
 - c. Other income increased. _____
 - d. Unemployment compensation received. _____
 - e. Other _____
- 16. Cases closed because of shortage of relief funds. _____
- 17. All other cases closed. _____

D. *Cases open on last day of month (included in item 10) with employable persons not employed:*

- 18. Total including one or more employable persons _____
- a. Certified to WPA but not yet employed by WPA _____
- b. Not yet certified but eligible for certification under WPA regulations _____
- c. Not eligible for certification to WPA but considered by the relief agency to be employable _____

E. *Cases receiving relief further analyzed (receiving relief this month, item 11, or continued to next month, item 10; cross out one):*

- 19. Total _____
- a. During waiting period for unemployment compensation. _____
- b. Supplementing unemployment compensation. _____
- c. Supplementing earnings from employment (other than Works Program). _____
- d. In households receiving other public or private assistance _____
 - (1) Old-age assistance. _____
 - (2) Aid to dependent children _____
 - (3) Aid to the blind. _____
 - (4) Earnings from the WPA _____
 - (5) Earnings on NYA work projects or student aid. _____
 - (6) Earnings from the CCC _____
 - (7) Private relief. _____
- e. Other general relief cases (not counted above) _____
- f. Number of duplications in cases counted more than once in items 19a-19d. _____

F. *Staff engaged in general relief operations:*

- 20. Total _____
- 21. Administrative personnel _____
- 22. Supervisors and assistant supervisors of case workers and investigators. _____
- 23. Case workers and investigators _____
- 24. Professional personnel of special services*. _____
- 25. All other employees. _____

*Please list here special services included

Still need

BALTIMORE EMERGENCY RELIEF COMMISSION

MONTHLY STATISTICAL REPORT

APRIL - 1936

Send mailing list out of town. (u)

I. ANALYSIS OF ALL CASES	Total	Minor	Major	Central Intake	District	Major cases by Type ^d		
						U.	D.C.	E.
A. Total cases under care	11,237	97	11,140	2,457 ^a	8,780	2,980	3,735	4,425
1. Carried over from previous month	10,175	48	10,127	1,434 ^a	8,306	2,808	3,534	3,785
2. Transfers from Intake to District								
a. January - March Intake				(-435)	435			
o. April Intake				- 39	39			
3. Intake								
a. Applications accepted	1,062	49	1,013	1,062 ^b		172	201	640
1) New	396	43	353	396		83	63	207
2) Old	250	3	247	250		31	40	176
3) Recurrent	416	3	413	416		58	98	257
b. Not Made Cases	1,844 ^c		1,844 ^c	1,844				
c. Total applications	2,906 ^e	49	2,857 ^c	2,906				
d. Percent of applications accepted	36.5		34.9					
4. Cooperative Cases								
a. Cases made cooperative during month	47		47					
b. Total cooperative cases for month	391		391					
B. Classification								
*1. Relief	10,123		10,123			2,775	3,551	3,797
2. Service	836	96	740			132	147	461
3. Inactive	278	1	277			73	37	167
C. End of Month Status								
1. Closed	1,202 ^e	58	1,144			154	123	867
2. Carried forward-relief	9,445		9,445			2,710	3,487	3,248
3. Carried forward-no relief	590	39	551			116	125	310
*D. Employables in Relief Cases	4,542		4,542			4 ⁱ	741	3,797
1. Male	3,153		3,153			1	139	3,013
a. White	2,101		2,101			1	68	2,032
b. Negro	1,052		1,052				71	981
2. Female	1,389		1,389			3	602	784
a. White	350		350			1	121	228
b. Negro	1,039		1,039			2	481 ^e	556

a Cases remaining in Intake at end of April (active or closed). b Includes 39 cases transferred to District. c Includes 1124 cases rejected by Reception Clerk. d U-Unemployable, DC-Dependent Children, E-Employable. See Page 2.

BALTIMORE EMERGENCY RELIEF COMMISSION

MONTHLY STATISTICAL REPORT

APRIL - 1936

Page 1

Still used

Send mailing list. (W)
out of town.

I. ANALYSIS OF ALL CASES	Total	Minor	Major	Central Intake	District	Major cases by Type ^d		
						U.	D.C.	E.
A. Total cases under care	11,237	97	11,140	2,457 ^a	8,780	2,980	3,735	4,425
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Footnotes cont'd from Page 1 - e Includes 239 transfers to WPA. f Others in household not legally responsible for care of head of family. g Includes female domestics not counted as employable in previous months' report.

Monthly Statistical Report (Continued) April - 1936				
II. ANALYSIS OF RELIEF CASES	Total	Major cases by Type		
		U.	D.C.	E.
A. Total cases and persons				
1. Total cases	10,123	2,775	3,551	3,797
2. Percent of total case load	90.1	93.1	95.1	85.8
3. Total persons	32,992	3,771	15,107	14,114
4. Average size of family (including singles)	3.3	1.4	4.3	3.7
B. Families				
1. Direct relief only				
a. Families	7,410	795	3,551	3,064
b. Persons	30,279	1,791	15,107	13,381
2. Amount of relief				
a. Total income received from BEREC				
1) Families	5,586	646	2,684	2,256
2) Persons	22,102	1,446	11,180	9,476
b. Supplementation of own income by BEREC				
1) Families	1,824	149	867	808
2) Persons	8,177	345	3,927	3,905
3. Number on relief rolls at end of month				
a) Families	6,861	780	3,487	2,594
b) Persons	27,843	1,756	14,858	11,229
C. Singles				
1. Direct relief only	2,713	1,980		733
2. Amount of relief				
a. Total income received from BEREC	2,442	1,800		642
b. Supplementation of own income by BEREC	271	180		91
3. Number on relief rolls at end of month	2,584	1,930		654
III. Analysis of Minor Cases				
A. Total minor cases	97			
1. Report on closed case				
2. Investigation for O.T. agency	96			
3. CCC inquiry	1			

Footnotes cont'd from Page 1 - e Includes 239 transfers to WPA. f Others in household not legally responsible for care of head of family. g Includes female domestics not counted as employable in previous months' report.

Monthly Statistical Report (Continued) April - 1936

II. ANALYSIS OF RELIEF CASES	Total	Major cases by Type		
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A. Total minor cases	97			
1. Report on closed case				
2. Investigation for O.T. agency	96			
3. CCC inquiry	1			

Monthly Statistical Report (Continued) April - 1936.

IV. Problems ^a	Total	Minor	Major cases by Type		
			U.	D.C.	E.
A. Unemployment	3,649				3,649
B. Underemployment	270				270
C. Insufficient wage	302				302
D. Other problems	7,016	97	2,980	3,735	204 ^d
V. Services					
A. Employment secured	371 ^b				
B. Transfers to WPA	24				
C. CCC enrollments	216 ^c				
VI. Color					
A. White	5,676 (50.5)	41	1,534 (51.5)	1,440 (38.6)	2,661 (60.1)
B. Negro	5,556 (49.5)	56	1,444 (48.5)	2,295 (61.4)	1,761 (49.9)
C. Yellow	2				2
D. Brown	3		2		1
E. Red					

a For detailed analysis of problems of cases active end of April see pages 14 - 15.

b 139 cases in Central Intake, and 232 cases in District.

c. Includes 189 boys (16 - 25 years of age) and 27 veterans.

d. Temporary illness.

Monthly Statistical Report (Continued) April - 1936.

IV. Problems ^a	Total	Minor	Major cases by Type			
			U.	D.C.	E.	
A. Unemployment	3,649				3,649	
B. Underemployment	270				270	
C. Insufficient wage	302				302	
D. Other problems	7,016	97	2,930	3,735	204 ^d	
V. Services						
A. Employment secured	371 ^b					
B. Transfers to WPA	24					
C. CCC enrollments	216 ^c					
VI. Color		%		%	%	
A. White	5,676	(50.5)	41	1,534 (51.5)	1,440 (38.6)	2,661 (60.1)
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b 139 cases in Central Intake, and 232 cases in District.

c. Includes 189 boys (16 - 25 years of age) and 27 veterans.

d. Temporary illness.

Monthly Statistical Report (Continued) April - 1936

	Grand Total	Central Intake	Type of Case				
			Total	U.	D.C.	E.	Unclassified
VII. Social Work Staff							
A. Supervisors	13 ^a	3	10 ^a				
B. Visitors	109	37	72	20	29	23	
C. Average case load per visitor	100 ^b	78 ^c	117	118 ^a	115 ^d	121 ^d	
VIII. Interviews							
A. Total by Case Work Staff	22,412	8,345	14,067	5,067	4,201	4,270	529
1. With client	19,899	7,360	12,539	4,213	3,904	4,037	385
2. With collateral	2,513	985	1,528	854	297	233	144
B. Outside office	12,308	2,792	9,516	4,437	2,782	2,238	59
1. With client	10,190	1,951	8,239	3,673	2,515	2,037	14
2. With collateral	2,118	841	1,277	764	267	201	45
C. Inside office-Workers, Supervisors, Sec.	8,050	3,499	4,551	630	1,419	2,032	470
1. With client	7,677	3,377	4,300	540	1,339	2,000	371
2. With collateral	373	122	251	90	30	32	99
D. Inside office - Intake Secretaries	2,054	2,054					
1. With client	2,032	2,032					
2. With collateral	22	22					
E. Total by reception clerk ^e	4,045	4,045					

a Includes 3 District XI supervisors.

b 322 District XI cases not used in figuring average.

c 446 transfers to District (435 Jan. - March, and 11 April intake) used in figuring this average as well as District averages because cases were handled by both departments during the month. This figure was used only once, however, in arriving at the total average case load per worker. (Of the 39 April Intake cases transferred to the District 28 were transferred directly without being assigned to an Intake worker.)

d Total cases carried by three types of workers used in figuring these averages:- U-2352, (322 District XI cases not included), D.C.-3333, and E-2773. Actually total cases by each type in District were:- U-2613, D.C. 3323, and E-2839, minors 5. The difference is due to cases, pending transfer or closed during the month.

e Not included in VIII-A.

BALTIMORE EMERGENCY RELIEF COMMISSION

Page 5

MONTHLY STATISTICAL REPORT

OBLIGATIONS

APRIL -- 1936

	Total Relief	Previous Month	Increase or Decrease
Cash	\$ 229,265.92	\$ 242,953.89	\$ -13,697.97
Orders	64,908.23	77,857.07	-12,958.84
Total relief obligations	\$ 294,174.15	\$ 320,830.96	\$ -26,656.81
Average relief per relief case	\$ 29.06	\$ 31.73	\$ - 2.67
Average relief per individual	\$ 8.92	\$ 9.70	\$ - .78
SUM OF CASH AND ORDERS ITEMIZED			
Food	\$ 191,021.94	\$ 199,889.61	\$ - 8,867.67
Shelter	59,564.57	59,314.66	249.91
Clothing	6,259.62	7,991.63	- 1,732.01
Fuel	10,727.50	25,926.06	-15,198.56
P. U. S.	7,003.49	8,173.32	- 1,169.83
Medical Care	6,854.73	6,811.14	43.59
Household Necessities	7,568.37	7,554.03	14.34
Miscellaneous	5,173.93	5,170.51	3.42
Total	\$ 294,174.15	\$ 320,830.96	\$ -26,656.81

BALTIMORE EMERGENCY RELIEF COMMISSION

COMPARISON OF ACTUAL WITH ESTIMATES MADE IN FEBRUARY
FOR RELIEF CASES, INTAKE, CLOSINGS, AVERAGE RELIEF PER CASE,
AND RELIEF OBLIGATIONS

APRIL - 1936

	Actual	Estimate	Variation	
			Amount	Percent
Relief	10,123	9,800	323	3.3
Intake	1,062	1,050	12	1.1
Closings	1,202	853	349	40.9
Average relief per relief case	\$ 29.06	\$ 32.25	\$- 3.19	- 9.9
Relief Obligations*	\$ 294,174.15	\$ 316,050.00	\$ -21,875.85	- 6.9

* Exclusive of administrative cost.

BALTIMORE EMERGENCY RELIEF COMMISSION

TOTAL ADMINISTRATIVE COSTS PER CASE

AND PERCENTAGE OF TOTAL OBLIGATIONS

APRIL -- 1936

		Cost per Case
Relief Cases	10,123	
Obligations		
Total	\$ 327,666.52	\$ 32.37
Relief	\$ 294,174.15	\$ 29.06
Administrative Costs	\$ 33,492.37	\$ 3.31
Administrative Costs Percent of Total Obligations	10.2	

BALTIMORE EMERGENCY RELIEF COMMISSION

COMPARISON OF INTAKE, RELIEF CASES, CLOSINGS, AND RELIEF OBLIGATIONS

MARCH -- APRIL 1936

	<u>Change from March to April</u>		<u>April</u>	<u>March</u>
	<u>Number</u>	<u>Percent</u>		
<u>Intake</u>	- 274	-20.5	<u>1,062</u>	<u>1,336</u>
New	- 85	-17.7	396	481
Reopened	- 189	-22.1	666	855
<u>Relief Cases</u>	- 13	0.1	<u>10,123</u>	<u>10,110</u>
Families	- 28	- 0.4	7,410	7,438
Singles	41	1.5	2,713	2,672
<u>Closings</u>	<u>186</u>	<u>18.3</u>	<u>1,202</u>	<u>1,016</u>
<u>Relief Obligations</u>	<u>\$ -26,656.81</u>	<u>- 8.3</u>	<u>\$ 294,174.15</u>	<u>\$ 320,830.96</u>

BALTIMORE EMERGENCY RELIEF COMMISSION

Page 8

ANALYSIS OF CASE LOAD BY COLOR AND NUMBER OF PEOPLE

APRIL -- 1936

Type of Case	Total					White					Negro				
	Cases	People	Families	People	Singles	Cases	People	Families	People	Singles	Cases	People	Families	People	Singles
U.	2,980	4,042	845	1,907	2,135	1,534	2,203	520	1,189	1,014	1,446	1,839	325	718	1,121
D.C.	3,735	15,950	3,735	15,950		1,440	6,470	1,440	6,470		2,295	9,480	2,295	9,480	
E.	4,425	16,547	3,562	15,684	863	2,661	10,837	2,247	10,423	414	1,764	5,710	1,315	5,261	449
Minor	97	171	41	115	56	41	74	19	52	22	56	97	22	63	34
Total	11,237	36,710	8,183	33,656	3,054	5,676	19,584	4,226	18,134	1,450	5,561	17,126	3,957	15,522	1,604

BALTIMORE EMERGENCY RELIEF COMMISSIONREASONS FOR OPENINGAPRIL -- 1936SUMMARY

Reason	Grand Total	Total		U.		D.C.		E.		Minor	
		White	Negro	White	Negro	White	Negro	White	Negro	White	Negro
I. Industrial											
A. Unemployment	435	308	127					308	127		
B. Underemployment	24	17	7					17	7		
C. Insufficient wage	110	76	34					76	34		
Sub-total	569	401	168					401	168		
II. Social	444	260	184	106	66	114	87	40	31	18	30
III. Inves. for. O.T. agency	48	18	30								1
IV. CCC Inquiry	1		1								
Total	1,062	679	383	106	66	114	87	441	199	18	31

BALTIMORE EMERGENCY RELIEF COMMISSION

Page 10

REASONS FOR OPENING (CONT'D)

APRIL - 1936

Problem	Grand Total	Total		U.		D.C.		E.		Minor	
		White	Negro	White	Negro	White	Negro	White	Negro	White	Negro
II. Social											
1. Blind or sight seriously impaired	5	1	4	1	3		1				
2. Cancer	1		1		1						
3. Cardiac	20	10	10	8	7	2	3				
5. Diabetes	1	1				1					
7. Epilepsy	2	1	1			1	1				
10. Maternity	3	1	2	1	1		1				
12. Paralyzed or crippled	14	13	1	11	1	2					
13. Respiratory disease other than tb.	3	2	1	2	1						
15. Syphilis	7	2	5	1	4	1	1				
16. Tuberculosis	12	9	3	2	3	7					
17. Other acute illness	77	45	32			5	1	40	31		
18. Other chronic illness	32	16	16	10	13	6	3				
20. Need of institutional care - physical	1	1		1							
21. Mental defect diagnosed	1		1		1						
23. Mental disorder diagnosed	1	1		1							
25. Need of institutional care - mental	1		1				1				
32. Vocational inefficiency	2	1	1		1	1					
36. Child born out of wedlock	3		3				3				
38. Imprisonment	7	4	3	3	2	1	1				
40. Inadequate parental care	1	1				1					
42. Family desertion	17	6	11	4	4	2	7				
43. Non-support of family	3	2	1	1		1	1				
51. Widow with dependent children	60	36	24			36	24				
52. Widower with dependent children	21	17	4	11		6	4				
53. Old age	73	48	25	45	24	3	1				
55. Insufficient income	2	1	1	1			1				
56. Woman with dependent children	74	41	33	3		38	33				
Sub-total	444	260	184	106	66	114	87	40	31		
III. Inves. for O. T. agency	48	18	30							18	30
IV. CCC inquiry	1		1								1
Total	493	278	215	106	66	114	87	40	31	18	31

BALTIMORE EMERGENCY RELIEF COMMISSION

ANALYSIS OF OLD AND RECURRENT INTAKE BY

MONTH OF LAST CLOSING

APRIL -- 1936

Month of Last Closing	Total	Old	Recurrent
1933			
September	2	2	
October	1	1	
November	4	4	
December	1	1	
1934			
January	2	2	
February	3	3	
March	3	3	
April	7	7	
May	16	16	
June	14	14	
July	10	10	
August	10	10	
September	7	7	
October	12	12	
November	5	5	
December	5	5	
1935			
January	15	15	
February	10	10	
March	13	13	
April	19	19	
May	35	35	
June	23	23	
July	13	13	
August	20	20	
Sub-total	250	250	
September	19		19
October	31		31
November	92		92
December	116		116
1936			
January	81		81
February	43		43
March	34		34
Sub-total	416		416
Total	666	250	416

BALTIMORE EMERGENCY RELIEF COMMISSIONNOT MADE CASES*APRIL - 1936

	Unduplicated Total						Reported during month						Accepted later in month					
	Total	Fam.	People	Singles			Total	Fam.	People	Singles			Total	Fam.	People	Singles		
				Tot.	M.	F.				Tot.	M.	F.				Tot.	M.	F.
New	290	175	590	115	79	36	344	214	740	130	89	41	54	39	150	15	10	5
Old	158	115	453	43	31	12	205	153	595	52	35	17	47	38	142	9	4	5
Recurrent	272	235	1044	37	23	14	359	312	1414	47	30	17	87	77	370	10	7	3
Total	720	525	2087	195	133	62	908	679	2749	229	154	75	188	154	662	34	21	13

* Cases rejected by Intake. In addition, Reception Clerk rejected 1,124 cases.

BALTIMORE EMERGENCY RELIEF COMMISSION

REASONS FOR CLOSING

APRIL - 1936.

Reason	April 1936	March 1936
1. Ineligibility	71	66
2. Misrepresentation of need	34	17
3. Fraud (other than misrepresentation)		1
4. Family adjusted financially	149	123
5. Institutional care - permanent	9	10
6. Institutional care - temporary	18	4
7. Pension received or increased	22	21
8. Insurance adjustment	21	13
9. Increase in earnings	18	2
10. Refusal of hosp. or institutional care		
11. Refusal of B. E. R. C. plan	20	33
12. Referred to another social agency	1	7
13. Relatives assumed care	14	7
14. C. C. C. placement	67	
15. Employment secured	354	179
16. Failure to continue work		2
17. Employment refused	1	2
18. Carried under another name	1	7
19. C. T. inquiry answered	57	43
20. Transported or deported to other comm.	1	
21. Departure from city	12	6
22. Moved without leaving address	26	26
23. Death	22	14
24. a. Other	42	43
25. W. P. A. assignment	239	376
26. W. P. A. refused	3	3
27. W. P. A. certification		11
Total	1,202	1,016

PROBLEMS

CASES ACTIVE END OF

APRIL -- 1936

Problems	Grand Total	Total		U.		D.C.		E.	
		White	Negro	White	Negro	White	Negro	White	Negro
A. HEALTH, PHYSICAL									
1. Blind or sight seriously impaired	113	40	73	29	52	11	21		
2. Cancer	37	19	18	13	13	6	5		
3. Cardiac	411	175	236	112	144	63	92		
5. Diabetes	81	39	42	33	23	6	19		
6. Endocrine disturbance	30	13	17	9	13	4	4		
7. Epilepsy	35	17	18	11	8	6	10		
8. Gonorrhea	4	2	2	1	1	1	1		
9. Hearing seriously impaired	18	10	8	7	5	3	3		
10. Maternity	13	2	11	2	2		9		
11. Optical care needed	5	1	4	1	3		1		
12. Paralyzed or crippled	373	159	214	111	156	48	58		
13. Resp'tory system disease other than tb.	95	39	56	26	38	13	18		
14. Speech impaired	4	3	1	3	1				
15. Syphilis	155	32	123	17	78	15	45		
16. Tuberculosis	220	127	93	33	47	94	46		
17. Other acute illness	245	125	120			29	26	96 ^a	94 ^a
18. Other chronic illness	1,030	470	560	304	376	166	184		
20. Need of institutional care - physical	26	11	15	7	8	4	7		
Total - Health, Physical	2,895	1,284	1,611	719	968	469	549	96	94
B. HEALTH, MENTAL									
21. Mental defect diagnosed	40	25	15	14	7	11	8		
22. Mental defect suspected	45	25	20	21	15	4	5		
23. Mental disorder diagnosed	39	34	5	11	4	23	1		
24. Mental disorder suspected	19	14	5	7	4	7	1		
25. Need of institutional care - mental	13	10	3	7	1	3	2		
Total - Health, Mental	156	108	48	60	31	48	17		

a Temporarily illness cases classified as unemployable on previous month's report.

Problems	Grand Total	Total		U.		D.C.		E.		Minor	
		White	Negro	White	Negro	White	Negro	White	Negro	White	Negro
C. INDUSTRIAL											
26. Unemployment	2,894	1,761	1,133					1,761	1,133		
27. Seasonal unemployment	10	6	4					6	4		
28. Technological unemployment	2	2						2			
29. Part time work	225	100	125					100	125		
30. Budget above wage of chief wage earner	237	146	91					146	91		
32. Vocational inefficiency	21	14	7	6	6	8	1				
34. Disab. fr. Indust. Accid. or Occup. dis.	3	1	2	1	2						
Total - Industrial	3,392	2,030	1,362	7	8	8	1	2,015	1,353		
D. BEHAVIOR											
35. Alcoholism	6	5	1	5	1						
36. Child born out of wedlock	19	2	17			2	17				
38. Imprisonment	35	23	12	4	2	19	10				
39. Delinquency or anti-soc. behavior	2		2				2				
40. Inadequate parental care	26	10	16	2	6	8	10				
41. Non-support of parent	2	1	1			1	1				
42. Family desertion	492	158	334	16	11	142	323				
43. Non-support of family	86	48	38	3	1	45	37				
44. Personality problem	3	2	1	2	1						
Total - Behavior	671	249	422	32	22	217	400				
E. OTHER PROBLEMS											
47. Debt	1	1		1							
50. Legal entanglements	1	1		1							
51. Widow with dependent children	680	232	448			232	448				
52. Widower with dependent children	53	34	19	12		22	19				
53. Old age	1,012	622	390	590	348	32	42				
55. Insufficient income	23	12	11	2	5	10	6				
56. Woman with dependent children	1,099	334	765	11	4	323	761				
57. Dependent person	12	5	7	2	2	3	5				
Total - Other problems	2,881	1,241	1,640	619	359	622	1,281				
None	40	29	11		1					29	10
Grand Total	10,035	4,941	5,094	1,437	1,389	1,364	2,248	2,111	1,447	29	10

BALTIMORE EMERGENCY RELIEF COMMISSION

Page 16

ANALYSIS OF TOTAL CASE LOAD

SIZE OF BUDGET GROUP - NUMBER OF CASES

APRIL - 1936

Budget Group	Total			U.		D.C.		E.		Minor	
	Total	White	Negro	White	Negro	White	Negro	White	Negro	White	Negro
1	3,054	1,450	1,604	1,014	1,121			414	449	22	34
2	2,308	1,019	1,289	411	284	192	495	404	494	12	16
3	1,701	848	853	87	28	324	580	434	244	3	1
4	1,303	710	593	13	5	303	419	393	166	1	3
5	1,054	599	455	5	3	259	331	332	121	3	
6	656	389	267	2	4	146	183	241	80		
7	478	283	196		1	98	130	185	64		1
8	309	175	134	1		51	76	123	58		
9	182	99	83	1		41	43	57	39		1
10	104	57	47			21	17	36	30		
11	55	33	22			3	13	30	9		
12	17	8	9			1	4	7	5		
13	8	4	4			1	2	3	2		
14	4	1	3				1	1	2		
15	1		1				1				
16	2	1	1					1	1		
Total	11,237	5,676	5,561	1,534	1,446	1,440	2,295	2,661	1,764	41	56

BALTIMORE EMERGENCY RELIEF COMMISSION

ANALYSIS OF TOTAL CASE LOAD

SIZE OF BUDGET GROUP - NUMBER OF PEOPLE

APRIL -- 1936

Budget Group	Total		U. S.		D. C.		E.		Minor		
	Total	White	Negro	White	Negro	White	Negro	White	Negro	White	Negro
1	3,054	1,450	1,604	1,014	1,121			414	449	22	34
2	4,616	2,038	2,578	822	563	384	990	808	938	24	32
3	5,103	2,544	2,559	261	84	972	1,740	1,302	732	9	3
4	5,212	2,840	2,372	52	20	1,212	1,676	1,572	664	4	12
5	5,270	2,995	2,275	25	15	1,295	1,655	1,660	605	15	
6	3,936	2,334	1,602	12	24	876	1,098	1,446	480		
7	3,353	1,981	1,372		7	686	910	1,295	448		7
8	2,472	1,400	1,072	8		408	608	984	464		
9	1,638	891	747	9		369	387	513	351		9
10	1,040	570	470			210	170	360	300		
11	605	363	242			33	143	330	99		
12	204	96	108			12	48	84	60		
13	104	52	52			13	26	39	26		
14	56	14	42				14	14	28		
15	15		15				15				
16	32	16	16					16	16		
Total	36,710	19,584	17,126	2,203	1,839	6,470	9,480	10,837	5,710	74	97

INDUSTRY OF CHIEF EMPLOYABLE PERSON PER CASE IN RELIEF CASES ACTIVE END OF

APRIL -- 1936

SUMMARY

Industry	Total						White						Negro					
	Number			Percent			Number			Percent			Number			Percent		
	Total	Male	Fe- male	Total	Male	Fe- male	Total	Male	Fe- male	Total	Male	Fe- male	Total	Male	Fe- male	Total	Male	Fe- male
Agr., Fishing, Forestry	31	31		.8	1.2		16	16		.8	.9		15	15		.8	1.6	
Mining	2	2		.1	.1		2	2		.1	.1							
Building Trades	908	908		22.6	34.0		561	561		27.0	31.9		347	347		18.0	37.9	
Chemical and Allied Ind.	46	42	4	1.2	1.6	.3	22	18	4	1.1	1.0	1.3	24	24		1.3	2.6	
Cigar and Tobacco	5	3	2	.1	.1	.2	3	2	1	.1	.1	.3	2	1	1	.1	.1	.1
Clay, Glass and Stone Ind.	33	31	2	.8	1.2	.2	28	26	2	1.3	1.5	.5	5	5		.3	.5	
Clothing	92	53	39	2.3	2.0	2.9	76	44	32	3.7	2.5	10.0	16	9	7	.8	1.0	.7
Food	156	120	36	3.9	4.5	2.7	106	82	24	5.1	4.7	7.5	50	38	12	2.5	4.2	1.2
Iron and Steel	141	140	1	3.5	5.3	.1	121	120	1	5.8	6.8	.3	20	20		1.0	2.2	
Other Metals	42	39	3	1.1	1.5	.2	38	36	2	1.8	2.1	.6	4	3	1	.2	.3	.1
Leather	18	16	2	.4	.6	.2	18	16	2	.9	.9	.6						
Lumber, Furniture	18	15	3	.4	.6	.2	9	8	1	.4	.5	.3	9	7	2	.5	.8	.2
Paper, Printing	33	29	4	.8	1.1	.3	28	25	3	1.3	1.4	.9	5	4	1	.3	.4	.1
Textile	19	15	4	.5	.6	.3	17	14	3	.8	.8	.9	2	1	1	.1	.1	.1
Misc. Manufacturing	59	48	11	1.5	1.8	.8	50	41	9	2.4	2.3	2.8	9	7	2	.5	.8	.2
Transport. and Comm.	360	356	4	9.0	13.2	.3	242	240	2	11.8	13.6	.6	118	116	2	6.1	12.7	.2
Trade	406	351	55	10.2	13.0	4.2	305	263	42	14.7	15.0	13.3	101	88	13	5.3	9.6	1.3
Public Service	38	37	1	1.0	1.4	.1	34	33	1	1.6	1.9	.3	4	4		.2	.4	
Professional Service	73	64	9	1.8	2.4	.7	40	35	5	1.9	2.0	1.6	33	29	4	1.7	3.2	.4
Domestic and Personal Serv.	1245	253	992	31.2	9.4	74.8	228	117	111	11.1	6.7	34.9	1017	136	881	53.0	14.9	87.6
Not specified	6	4	2	.2	.1	.2	2	1	1	.1	.1	.3	4	3	1	.2	.3	.1
No industry *	264	114	150	6.6	4.3	11.3	129	56	73	6.2	3.2	22.9	135	58	77	7.0	6.4	7.7
Total	3995	2671	1324	100%	100%	100%	2075	1756	319	100%	100%	100%	1920	915	1005	100%	100%	100%

* Employable but no previous work history.

INDUSTRY OF CHIEF EMPLOYABLE PERSON PER CASE IN RELIEF CASES ACTIVE END OF

APRIL - 1936

Industry	Total			White			Negro		
	Total	Male	Female	Total	Male	Female	Total	Male	Female
AGRICULTURE, FISHING, AND FORESTRY									
Agriculture	28	28		14	14		14	14	
Fishing	2	2		1	1		1	1	
Forestry	1	1		1	1				
Sub-total	31	31		16	16		15	15	
MINING									
Coal mines	1	1		1	1				
Quarries	1	1		1	1				
Sub-total	2	2		2	2				
MANUFACTURING AND MECHANICAL INDUSTRIES									
Building and construction industry	908	908		561	561		347	347	
Chemical and allied industries:									
Fertilizer factories	22	22		4	4		18	18	
Gas works	1	1		1	1				
Paint and varnish factories	3	3		3	3				
Petroleum refineries	2	2		2	2				
Soap factories	3	3		2	2		1	1	
Other chemical factories	15	11	4	10	6	4	5	5	
Sub-total	46	42	4	22	18	4	24	24	
Cigar and tobacco factories	5	3	2	3	2	1	2	1	1
Clay, glass, and stone industries:									
Brick, tile, and terra-cotta factories	4	4		4	4				
Glass factories	19	17	2	17	15	2	2	2	
Marble and stone yards	2	2		1	1		1	1	
Potteries	5	5		3	3		2	2	
Sub-total	30	28	2	25	23	2	5	5	

Industry of Chief Employable Person Per Case in Relief Cases Active End of - April 1936

Page 20

Industry	Total			White			Negro		
	Total	Male	Female	Total	Male	Female	Total	Male	Female
MANUFACTURING AND MECHANICAL INDUSTRIES (Cont'd)									
Clothing industries:									
Hat factories (felt)	3	3		3	3				
Shirt, collar, and cuff factories	4	1	3	3	1	2	1		1
Suit, coat, and overall factories	66	43	23	54	37	17	12	6	6
Other clothing factories	22	9	13	19	8	13	3	3	
Sub-total	95	56	39	79	47	32	16	9	7
Food and allied industries:									
Bakeries	29	27	2	25	23	2	4	4	
Butter, cheese, and condensed milk factories	5	5		5	5				
Candy factories	5	4	2	6	4	2			
Fish curing and packing	10	7	3	4	2	2	6	5	1
Fruit and vegetable canning, etc.	45	25	20	26	15	11	19	10	9
Slaughter and packing houses	33	29	4	20	17	3	13	12	1
Sugar factories and refineries	3	3		1	1		2	2	
Other food factories	6	6		4	4		2	2	
Liquor and beverage industries	19	14	5	15	11	4	4	3	1
Sub-total	156	120	36	106	82	24	50	38	12
Iron and steel, machinery, and vehicle industries:									
Automobile factories	6	6		6	6				
Automobile repair shops	3	3		2	2		1	1	
Blast furnaces and steel rolling mills	82	81	1	72	71	1	10	10	
Car and railroad shops	1	1		1	1				
Ship and boat building	23	23		19	19		4	4	
Other iron and steel and machinery factories	26	26		21	21		5	5	
Sub-total	141	140	1	121	120	1	20	20	
Metal industries, except iron and steel:									
Brass mills	1	1		1	1				
Copper factories	6	6		4	4		2	2	
Gold and silver factories	5	5		5	5				
Tinware, enamelware, etc., factories	30	27	3	28	26	2	2	1	1
Sub-total	42	39	3	38	36	2	4	3	1

Industry of Chief Employable Person Per Case in Relief Cases Active End of - April - 1936.

Page 21

Industry	Total			White			Negro		
	Total	Male	Female	Total	Male	Female	Total	Male	Female
MANUFACTURING AND MECHANICAL INDUSTRIES (Cont'd)									
Leather industries:									
Leather belt, leather goods, etc., factories	3	3		3	3				
Shoe factories	14	12	2	14	12	2			
Tanneries	1	1		1	1				
Sub-total	18	16	2	18	16	2			
Lumber and furniture industries:									
Furniture factories	11	8	3	6	5	1	5	3	2
Saw and planing mills	4	4		1	1		3	3	
Other woodworking factories	3	3		2	2		1	1	
Sub-total	18	15	3	9	8	1	9	7	2
Paper, printing, and allied industries:									
Blank book, envelope, tag, paper bag, etc., fact.	1	1		1	1				
Paper and pulp mills	3	2	1	1	1		2	1	1
Paper box factories	5	5		3	3		2	2	
Printing, publishing, and engraving	24	21	3	23	20	3	1	1	
Sub-total	33	29	4	28	25	3	5	4	1
Textile industries:									
Cotton mills	16	13	3	14	12	2	2	1	1
Textile dyeing, finishing, and printing mills	1	1		1	1				
Woolen and worsted mills	1	1		1	1				
Hemp, jute, and linen mills	1		1	1		1			
Sub-total	19	15	4	17	14	3	2	1	1
Miscellaneous manufacturing industries:									
Broom and brush factories	6	6		6	6				
Electric light and power plants	6	6		6	6				
Electrical machinery and supply factories	1	1		1	1				
Independent hand trades	20	12	8	14	8	6	6	4	2
Rubber factories	1	1		1	1				
Straw factories	1	1		1	1				
Other miscellaneous industries	22	19	3	20	17	3	2	2	
Other not specified industries	2	2		1	1		1	1	
Sub-total	59	48	11	50	41	9	9	7	2

Industry of Chief Employable Person Per Case in Relief Cases Active End of -- April - 1936.

Page 22

Industry	Total			White			Negro		
	Total	Male	Female	Total	Male	Female	Total	Male	Female
TRANSPORTATION AND COMMUNICATION									
Air transportation	2	2		2	2				
Construction and maintenance of streets, roads, sewers, bridges	30	30		25	25		5	5	
Express companies	29	29		27	27		2	2	
Garages, automobile laundries, greasing stations	15	15					15	15	
Livery stables	2	2					2	2	
Steam railroads	77	75	2	42	42		35	33	2
Street railroads	8	8		8	8				
Telegraph and telephone	8	7	1	8	7	1			
Truck, transfer, and cab companies	137	137		110	110		27	27	
Water transportation	51	51		19	19		32	32	
Other and not specified transport. and comm.	1		1	1		1			
Sub-total	360	356	4	242	240	2	118	116	2
TRADE									
Advertising agencies	4	4		4	4				
Banking and brokerage	4	3	1	3	2	1	1	1	
Insurance	14	14		12	12		2	2	
Real estate	6	5	1	2	2		4	3	1
Warehouses and cold storage plants	1	1					1	1	
Automobile agencies, stores, filling stations	6	6		6	6				
Wholesale and retail trade (except dealers and except laborers in coal and lumber yards)	147	109	38	107	79	28	40	30	10
Wholesale and retail dealers, and laborers in coal and lumber yards	224	209	15	171	158	13	53	51	2
Sub-total	406	351	55	305	263	42	101	88	13
Public service (not elsewhere classified)	38	37	1	34	33	1	4	4	
PROFESSIONAL SERVICE									
Recreation and amusement	17	15	2	9	9		3	6	2
Professional pursuits	53	46	7	29	24	5	24	22	2
Semiprofessional pursuits and attendants and helpers	3	3		2	2		1	1	
Sub-total	73	64	9	40	35	5	33	29	4

Industry of Chief Employable Person Per Case in Relief Cases Active End of - April - 1936.

Industry	Total			White			Negro		
	Total	Male	Female	Total	Male	Female	Total	Male	Female
DOMESTIC AND PERSONAL SERVICE									
Hotels, restaurants, boarding houses, etc.	113	86	27	66	47	19	47	39	8
Domestic and personal service (not elsewhere classified)	1,102	155	947	148	62	86	954	93	861
Laundries	21	7	14	11	6	5	10	1	9
Cleaning, dyeing, and pressing shops	9	5	4	3	2	1	6	3	3
Sub-total	1,245	253	992	228	117	111	1,017	136	881
Not specified industries and services	6	4	2	2	1	1	4	3	1
No industry ^a	264	114	150	129	56	73	135	58	77
Total	3,995	2,671	1,324	2,075	1,756	319	1,920	915	1,005

^a Employable but no previous work history.

BALTIMORE EMERGENCY RELIEF COMMISSION

CHILDREN IN D.C. CASES-NUMBER OF CHILDREN

APRIL -- 1936

Number of Children	Total	Carried over from March				April Intake			
		Active		Closed		Active		Closed	
		White	Negro	White	Negro	White	Negro	White	Negro
1	1,183	333	734	22	19	42	27	4	2
2	1,876	646	1,054	26	22	68	52	8	
3	2,013	765	1,098	42	15	33	45	6	9
4	1,792	712	976	32	20	16	28	8	
5	1,190	430	700	15	5	20	20		
6	936	342	540	6	6	36	6		
7	420	147	252		7	7	7		
8	224	72	152						
9	72	9	54	9					
10	20		10				10		
11	33		22	11					
Total	9,759	3,456	5,592	163	94	222	195	26	11

CHILDREN IN D.C. CASES - NUMBER OF CASES

Number of Children	Total	Carried over from March				April Intake			
		Active		Closed		Active		Closed	
		White	Negro	White	Negro	White	Negro	White	Negro
1	1,183	333	734	22	19	42	27	4	2
2	938	323	527	13	11	34	26	4	
3	671	255	366	14	5	11	15	2	3
4	448	178	244	8	5	4	7	2	
5	238	86	140	3	1	4	4		
6	156	57	90	1	1	6	1		
7	60	21	36		1	1	1		
8	28	9	19						
9	8	1	6	1					
10	2		1				1		
11	3		2	1					
Total	3,735	1,263	2,165	63	43	102	82	12	5

BALTIMORE EMERGENCY RELIEF COMMISSION

RELIGION OF CASES ACTIVE END OF

APRIL -- 1936

	Grand Total	Total		U.		D.C.		E.		Minors	
		White	Negro	White	Negro	White	Negro	White	Negro	White	Negro
Protestant	7,230	2,610	4,620	721	1,252	683	2,051	1,204	1,317	2	
Roman Catholic	2,043	1,708	335	482	103	534	139	692	93		
Jewish	414	414		172		114		128			
Other	43	35	8	12	6	7	2	16			
None	198	109	89	32	21	18	44	59	24		
Unknown	107	65	42	18	7	8	12	12	13	27	10
Total	10,035	4,941	5,094	1,437	1,389	1,364	2,248	2,111	1,447	29	10

31

DPW

MONTHLY STATISTICAL REPORT

October - 1938

E. S. Thon, STATISTICIAN.

DPW

MONTHLY STATISTICAL REPORT

October - 1938

INDEX

<u>ITEM</u>	<u>PAGE</u>
Summary.....	1
Applications.....	2
Reasons for Rejections.....	3-4
Color By Districts.....	5-6
Classification of GPA Cases.....	6
Caseloads by Districts.....	7-10
Number of months Since Last Opening...	11
Family Status.....	12
Size of ADC and GPA Families.....	13
Number of ADC Children.....	13
Reasons for Closings.....	14
Problems of ADC and GPA Intake.....	15-16
Industry of GPA Intake.....	17
Ward Analysis of Intake.....	18
Ward Analysis of Case Load.....	19

October - 1938

-1-

SUMMARY

	TOTAL	ADC	ATB	GPA	OAA
I. APPLICATIONS					
Pending from September	2711	229	40	1004 ^a	1438
Received	2084	387	6	1460 ^b	231
Total	4795	616	46	2464	1669
Approved for grant	839	205	10	580	44
Rejected	1064	186	5	767 ^b	106
Pending end of October	2892	225	31	1117	1519
II. CASE LOAD					
Continued from September	17,084	4317	378	4728	7661
Intake	839	205	10	580	44
Total Case Load	17,923	4522	388	5308 ^c	7705
Closings	852	199	2	572	79
Carried to November	17,071	4323	386	4736	7626
III. ASSISTANCE GRANTED					
Received payment	17,387	4424 ^d	380	5016	7567 ^e
Received no payment	536	98	8	292	138
IV. COLOR					
White	10,274	2092	183	2740	5259
Negro	7,649	2430	205	2568	2446
V. RELIGION					
Jewish	536	138	13	229	156
Protestant	13,332	3252	304	3899	5877
Roman Catholic	3,826	1047	68	1090	1621
Other	40	5	-	28	7
None	140	48	3	50	39
Unknown	49	32	-	12	5
VI. RELIEF OBLIGATIONS					
Total (Gross payroll less cur. cancel.)	\$495,905.41 ^f	\$181,654.15	\$8713.96	\$144,188.88	\$161,348.42 ^f
Average relief per case	\$ 29.97 ^g	\$ 41.06	\$ 22.93	\$ 28.75	\$ 21.16
VII. ADMINISTRATIVE COSTS					
Total	\$ 31,832.94				
Percent of total Obligations	6.0				

^aRevised.^bThis figure no longer includes applications for WPA referral only of which 434 were received and accepted during October.^cIncludes 2002 employable, 478 light work, and 2828 unemployable cases.^d" 2228 cases which received supplementation from city funds of \$33,269.26.^e" 15 cases which received burial expenses only, not used in calculating average relief per case.^fIncludes \$1534.50 funeral expenses not used in calculating average relief per case.^gAverage for 16,498 unduplicated families.

DPW MONTHLY STATISTICAL REPORT

October - 1938

APPLICATIONS - DETAIL

	TOTAL	ADC	ATB	GPA	OAA
Pending from September	2711 ^a	229	40	1004 ^a	1438
Intake	1135	144	28	790	173
Districts	1576 ^a	85	12	214 ^a	1265
Received	2084	387	6	1460	231
Total	4795	616	46	2464	1669
Disposed of	1903	391	15	1347	150
Approved for grant	839	205	10	580	44
Rejected	1064	186	5	767	106
Intake	852	147	4	635	66
Districts	212	39	1	132	40
Ineligible	710	133	2	487	88
Disposed of for other reasons	354	53	3	280	18
Pending end of October	2892	225	31	1117	1519
Intake	1270	128	22	921	199
Districts	1622	97	9	196	1320

^a Revised.

DPW MONTHLY STATISTICAL REPORT-Oct. 1938

REASONS FOR REJECTIONS

REASON	Total	ADC			ATB			GPA			OAA		
		Total	Dist.	Int.	Tot.	Dist.	Int.	Tot.	Dist.	Int.	Tot.	Dist.	Int.
INELIGIBLE	710	133	31	102	2	1	1	487	86	401	88	34	54
1. Age requirement	6	-	-	-	-	-	-	-	-	-	6	-	6
2. Citizenship requirement	4	-	-	-	-	-	-	-	-	-	4	-	4
3. Residence requirement	9	1	-	1	-	-	-	5	5	-	3	-	3
4. Earnings- private employment	42	-	-	-	-	-	-	40	17	23	2	2	-
5. Income from invested capital	1	-	-	-	-	-	-	-	-	-	1	-	1
6. Income sufficient	112	-	-	-	-	-	-	112	18	94	-	-	-
7. Resources	15	-	-	-	-	-	-	11	2	9	4	4	-
8. Financial adjustment	26	-	-	-	-	-	-	26	6	20	-	-	-
9. Unemployment compensation	61	-	-	-	-	-	-	61	-	61	-	-	-
10. Rel. able to support-parents	69	66	20	46	-	-	-	3	3	-	-	-	-
11. " " " " -other rel.	76	36	6	30	1	1	-	8	8	-	31	27	4
12. Non-relatives able to support	2	2	-	2	-	-	-	-	-	-	-	-	-
13. Total household	19	-	-	-	-	-	-	19	6	13	-	-	-
14. No proof of age	23	-	-	-	-	-	-	-	-	-	23	1	22
15. No proof of citizenship	6	-	-	-	-	-	-	-	-	-	6	-	6
16. No proof of death	1	1	-	1	-	-	-	-	-	-	-	-	-
17. No proof of incapacitation	2	2	-	2	-	-	-	-	-	-	-	-	-
18. No proof of relationship	2	2	2	-	-	-	-	-	-	-	-	-	-
19. No proof of residence	49	6	-	6	-	-	-	35	-	35	8	-	8
20. No proof of need	178	14	1	13	-	-	-	164	20	144	-	-	-
21. Misrepresentation	3	1	1	-	-	-	-	2	-	2	-	-	-
22. Unsuitable home	1	1	-	1	-	-	-	-	-	-	-	-	-
23. Refusal to go to BCH	1	-	-	-	-	-	-	1	1	-	-	-	-
24. Not blind	1	-	-	-	1	-	1	-	-	-	-	-	-
25. Widower-death of mother not cause	1	1	1	-	-	-	-	-	-	-	-	-	-
OTHER REASONS	354	53	8	45	3	-	3	280	46	234	18	6	12
1. Case combination	2	2	2	-	-	-	-	-	-	-	-	-	-
2. Death	1	-	-	-	-	-	-	-	-	-	1	1	-
3. BCH	26	-	-	-	-	-	-	26	1	25	-	-	-
4. Referred to another type of assistance	13	-	-	-	-	-	-	13	6	7	-	-	-
5. Voluntary withdrawal	279	50	5	45	3	-	3	210	12	198	16	4	12

DPW MONTHLY STATISTICAL REPORT

October - 1938

REASONS FOR REJECTIONS-Cont'd.

Reason	Total	ADC			ATB			GPA			OAA		
		Total	Dist.	Int.	Tot.	Dist.	Int.	Tot.	Dist.	Int.	Tot.	Dist.	Int.
6. Opened in error	4	1	1	-	-	-	-	3	3	-	-	-	-
7. WPA referral only	23	-	-	-	-	-	-	23	19	4	-	-	-
8. Unable to locate	5	-	-	-	-	-	-	5	5	-	-	-	-
9. Admitted to institution	1	-	-	-	-	-	-	-	-	-	1	1	-
TOTAL.	1064	186	39	147	5	1	4	767	132	635	106	40	66

DPW MONTHLY STATISTICAL REPORT-Oct., 1938
COLOR BY DISTRICTS

District	TOTAL			ADC			ATB			GPA			OAA		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro
Eastern	4395	2985	1410	1213	725	488	84	49	35	1489	953	536	1609	1258	351
Northern	4719	2836	1883	1091	507	584	94	46	48	1162	604	558	2372	1679	693
Southern	4448	2547	1901	1104	549	555	87	37	50	1542	826	716	1715	1135	580
Western	4176	1760	2416	1114	311	803	118	48	70	1115	357	758	1829	1044	785
Mrs. Nagle	82	74	8	-	-	-	1	1	-	-	-	-	81	73	8
Funeral Holds	13	5	8	-	-	-	-	-	-	-	-	-	13	5	8
Hospital Holds	90	67	23	-	-	-	4	2	2	-	-	-	86	65	21
TOTAL	17,923	10,274	7649	4522	2092	2430	388	183	205	5308	2740	2568	7705	5259	2446

PERCENTAGE DISTRIBUTION OF CASES BY DISTRICTS

District	TOTAL			ADC			ATB			GPA			OAA		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro
Eastern	25	29	18	27	35	20	22	27	17	28	35	21	21	24	14
Northern	26	28	24	24	24	24	24	25	24	22	22	22	31	32	28
Southern	25	25	25	24	26	23	23	20	24	29	30	28	22	21	24
Western	23	17	32	25	15	33	30	26	34	21	13	29	24	20	32
Other ^a	1	1	1	-	-	-	1	2	1	-	-	-	2	3	2
TOTAL	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100

^aOut of town, funeral and hospital hold cases.

DPW MONTHLY STATISTICAL REPORT

October-1938

PERCENTAGE COMPOSITION OF DISTRICT CASE LOADS

District	TOTAL					WHITE					NEGRO				
	Total	ADC	ATB	GPA	OAA	Total	ADC	ATB	GPA	OAA	Total	ADC	ATB	GPA	OAA
Eastern	100	27	2	34	37	100	24	2	32	42	100	35	2	38	25
Northern	100	23	2	25	50	100	18	2	21	59	100	31	2	30	37
Southern	100	25	2	35	38	100	22	1	32	45	100	29	3	38	30
Western	100	27	3	27	43	100	18	3	20	59	100	33	3	31	33
TOTAL	100	25	2	30	43	100	20	2	27	51	100	32	3	33	32

CLASSIFICATION OF GPA CASES BY COLOR

District	TOTAL			EMPLOYABLE			LIGHT WORK			UNEMPLOYABLE		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro
Eastern	1489	953	536	614	390	224	126	85	41	749	478	271
Northern	1162	604	558	445	249	196	117	62	55	600	293	307
Southern	1542	826	716	580	368	212	138	78	60	824	380	444
Western	1115	357	758	363	148	215	97	15	82	655	194	461
TOTAL	5308	2740	2568	2002	1155	847	478	240	238	2828	1345	1483

DPW MONTHLY STATISTICAL REPORT-Oct. 1938
CASE LOADS - EASTERN DISTRICT

Worker	TOTAL OCTOBER CASES					OCT. GRANTS APPROVED					OCT. REJECTIONS				OCT. CLOSINGS			
	Total	ADC	ATB	GPA	OAA	Total	ADC	ATB	GPA	OAA	Tot.	ADC	GPA	OAA	Total	ADC	GPA	OAA
1. Solomon	158	29	1	78	50	7	2	-	5	-	2	-	1	1	3	-	3	-
2. Keener, B.	197	47	2	101	47	9	-	-	9	-	3	-	3	-	6	1	4	1
3. Holt	158	49	5	57	47	6	3	-	3	-	1	1	-	-	8	2	6	-
4. Hall	124	38	7	36	43	6	2	-	4	-	3	2	1	-	3	1	2	-
5. Temin	148	20	1	93	34	6	2	-	4	-	-	-	-	-	4	-	4	-
6. Hocht	148	35	4	85	24	10	2	-	8	-	-	-	-	-	8	2	6	-
7. Weinstein	147	38	1	67	41	9	-	-	9	-	2	-	2	-	7	1	5	1
8. Dunn	141	40	2	61	38	11	2	-	7	2	-	-	-	-	3	-	3	-
9. Michelson	152	53	4	45	50	6	1	-	5	-	2	-	2	-	6	1	5	-
10. Bevans	171	76	5	48	42	10	1	-	9	-	3	1	2	-	10	4	6	-
11. Jandorf	152	51	1	38	62	12	4	-	7	1	2	1	-	1	12	3	8	1
12. Neufeld	158	29	5	41	83	5	-	-	4	1	-	-	-	-	7	1	4	2
13. Jacobs	134	56	3	50	25	12	5	-	7	-	3	1	2	-	11	1	9	1
14. Wesley	94	31	3	43	17	8	3	1	3	1	1	-	1	-	4	-	3	1
15. Hetzer	126	48	4	32	42	2	1	1	-	-	1	-	1	-	5	2	3	-
16. Draper	152	37	4	59	52	6	3	-	3	-	3	1	2	-	12	1	7	4
17. McCusker	155	33	-	32	90	8	2	-	6	-	-	-	-	-	6	1	4	1
18. Dockhorn	103	32	1	42	28	3	-	-	3	-	2	-	2	-	4	2	2	-
19. Rosenblatt	128	39	2	45	42	12	5	-	7	-	5	-	5	-	6	1	5	-
20. DeCesare	96	23	2	51	20	10	1	-	9	-	1	-	1	-	5	-	5	-
21. Bean	129	45	1	45	38	10	1	-	9	-	-	-	-	-	6	2	4	-
22. Hollingsworth	161	44	2	54	61	10	1	-	9	-	1	-	1	-	9	1	8	-
23. Kandel	130	34	3	25	68	10	1	-	7	2	2	-	1	1	15	4	11	-
24. Stevens	110	30	3	20	57	6	1	-	5	-	2	-	1	1	8	1	7	-
25. Barranger	144	34	2	39	69	9	1	-	8	-	4	-	4	-	10	1	9	-
26. Kirby	149	26	1	39	83	9	1	-	8	-	2	-	2	-	4	2	1	1
27. Dodson	170	59	1	54	56	7	3	-	4	-	1	-	1	-	2	-	2	-
28. Bates	160	41	3	36	80	4	2	-	1	1	3	1	2	-	11	2	9	-
29. Croswell	113	33	2	36	42	5	-	-	5	-	-	-	-	-	9	2	4	3
30. Gregg	145	44	4	20	77	5	3	-	2	-	2	-	2	-	3	-	3	-
31. Trader	142	19	5	17	101	6	1	-	4	1	3	2	1	-	4	2	2	-
Ulrich	-	-	-	-	-	-	-	-	-	-	2	-	2	-	-	-	-	-
TOTAL	4395	1213	84	1489	1609	239	54	2	174	9	56	10	42	4	211	41	154	16
Average per worker	142	39	3	48	52													

DPW MONTHLY STATISTICAL REPORT-Oct. 1938
CASE LOADS - NORTHERN DISTRICT

Worker	TOTAL OCTOBER CASES					OCT. GRANTS APPROVED					OCT. REJECTIONS				OCTOBER CLOSINGS				
	Total	ADC	ATB	GPA	OAA	Total	ADC	ATB	GPA	OAA	Total	ADC	GPA	OAA	Total	ADC	ATB	GPA	OAA
1. Keener, H.	118	36	3	37	42	4	2	-	2	-	2	1	1	-	3	2	-	-	1
2. Epes	188	40	3	50	95	12	2	-	9	1	2	-	2	-	12	2	-	8	2
3. Crastnopol	131	51	1	43	36	5	3	-	2	-	-	-	-	9	2	-	7	-	
4. Wilder	138	63	2	30	43	16	7	-	9	-	2	-	1	1	5	1	-	4	-
5. Dorman	178	17	1	70	90	12	1	-	11	-	1	-	1	-	3	2	-	1	-
6. Goodman, J.	156	52	4	43	57	11	3	1	6	1	1	-	1	-	10	2	-	7	1
7. Clayton	166	47	5	55	59	5	1	-	4	-	1	-	-	1	4	2	-	2	-
8. Reddick	133	22	2	42	67	6	-	-	5	1	2	1	1	-	4	2	-	2	-
9. Hilliard	156	48	6	42	60	7	2	1	4	-	-	-	-	6	1	-	4	1	
10. Freeman	158	41	3	61	53	9	3	-	6	-	3	-	3	-	5	-	-	5	-
11. Lewis	142	35	2	35	70	2	-	-	2	-	5	-	3	2	5	3	-	1	1
12. Lisansky	153	33	2	32	86	1	-	-	1	-	-	-	-	6	2	-	4	-	
13. Lehmann	116	46	2	34	34	9	2	-	7	-	-	-	-	2	-	-	2	-	
14. Cohen	134	18	3	43	70	6	2	-	4	-	3	-	2	1	5	1	-	4	-
15. Vigilante	103	29	-	27	47	5	-	-	4	1	-	-	-	7	1	-	5	1	
16. Wilson	121	20	3	28	70	3	1	-	2	-	1	-	1	-	3	-	-	2	1
17. Baerwald	148	33	1	24	90	7	1	-	5	1	-	-	-	13	3	-	7	3	
18. Stern	145	26	2	21	96	4	1	-	3	-	1	-	1	-	12	1	-	7	4
19. Hoene	163	32	1	33	97	10	2	-	8	-	1	-	1	-	16	4	-	12	-
20. Price	178	51	7	63	57	11	1	-	7	3	2	-	2	-	15	1	1	13	-
21. Owings	150	36	3	53	58	7	-	-	6	1	1	-	1	4	3	-	1	-	
22. Biser	123	29	9	22	63	5	1	-	3	1	-	-	-	10	2	-	8	-	
23. Sampson	138	19	2	29	88	2	1	-	1	-	2	-	2	2	-	-	1	1	
24. Wade	151	37	3	41	70	7	1	-	6	-	5	4	1	-	21	8	1	9	3
25. Eisenberg	172	43	2	42	85	12	1	-	9	2	-	-	-	3	1	-	2	-	
26. Cooper	156	21	3	30	102	6	3	-	3	-	2	1	1	-	9	2	-	6	1
27. Mohlenrich	153	46	1	23	83	6	3	-	3	-	2	-	-	7	2	-	3	2	
28. Brooks	150	31	4	24	91	6	1	-	5	-	-	-	-	11	4	-	5	2	
29. Keyser	146	25	2	21	98	6	3	-	3	-	-	-	-	6	1	-	4	1	
30. Kolker	121	27	3	19	72	4	2	-	2	-	4	-	4	8	4	-	4	-	
31. Jung	92	9	3	10	70	3	1	-	2	-	-	-	-	1	1	-	-	-	
32. Woodbury	128	19	1	12	96	5	3	-	2	-	1	-	-	3	-	-	1	2	
33. Harrison	113	9	5	22	77	3	-	-	2	1	1	-	1	1	-	-	-	1	
Eckert	1	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
TOTAL	4719	1091	94	1162	2372	217	54	2	148	13	45	7	27	11	231	60	2	141	28
Average per worker	143	33	3	35	72														

DPW MONTHLY STATISTICAL REPORT-Oct., 1938

CASE LOADS-SOUTHERN DISTRICT

Worker	TOTAL OCTOBER CASES					OCT. GRANTS APPROVED					OCTOBER REJECTIONS					OCT. CLOSINGS			
	Total	ADC	ATB	GPA	OAA	Total	ADC	ATB	GPA	OAA	Total	ADC	ATB	GPA	OAA	Total	ADC	GPA	OAA
1. McGarrow	190	39	2	84	65	9	2	-	7	-	3	2	-	1	-	4	1	3	-
2. Purnell	127	20	1	66	40	10	1	-	9	-	2	-	-	2	-	2	-	2	-
3. Wachter	125	18	2	57	48	8	1	-	7	-	-	-	-	-	10	2	6	2	
4. Sharkey	132	15	1	65	51	12	2	-	10	-	-	-	-	-	14	2	12	-	
5. Adams	151	32	2	63	54	6	1	-	5	-	1	-	-	1	-	7	3	3	1
6. Schmidt	139	32	3	58	46	6	2	-	4	-	4	-	-	4	-	11	4	7	-
7. Roberts	143	34	3	64	42	4	3	-	1	-	1	-	-	1	-	6	2	3	1
8. Schuetz	187	34	4	71	78	11	-	-	11	-	1	-	-	1	-	7	1	5	1
9. Reddick	49	13	1	13	22	4	1	-	3	-	-	-	-	-	2	-	2	-	
9. Rosedom	84	20	2	38	24	3	-	1	2	-	3	2	-	1	-	11	-	11	-
10. Nicholson	143	48	1	24	70	8	2	-	5	1	5	-	-	3	2	10	2	7	1
11. Hill	141	37	-	43	61	4	1	-	3	-	2	-	1	-	1	12	4	7	1
12. Siegel	199	37	-	60	102	14	3	-	11	-	1	-	-	-	1	9	4	5	-
13. Herzog	153	44	1	54	54	8	1	-	7	-	1	-	-	-	1	18	1	15	2
14. Kaufman	156	44	1	34	77	7	1	-	6	-	3	1	-	2	-	5	1	4	-
15. Underwood	170	30	7	55	78	10	-	-	9	1	1	-	-	-	1	9	1	8	-
16. Hayden	128	35	3	34	56	15	4	-	11	-	3	1	-	2	-	5	1	4	-
17. Meyer	169	46	6	44	73	5	2	1	1	1	8	4	-	2	2	4	1	2	1
18. Werner	154	38	6	54	56	3	1	-	2	-	2	-	-	1	1	6	2	3	1
19. Gardner	166	46	6	53	61	9	2	-	5	2	-	-	-	-	4	2	2	-	
20. Williams, M.	130	38	4	44	44	6	2	-	4	-	1	-	-	1	-	7	3	4	-
21. Lurie	166	41	4	54	67	9	3	-	6	-	-	-	-	-	7	1	6	-	
22. Hipolite	143	40	1	48	54	10	6	-	4	-	5	1	-	3	1	13	4	9	-
23. Berman	155	44	4	41	66	11	5	-	5	1	-	-	-	-	4	1	3	-	
24. Sirkis	136	43	4	42	47	7	1	-	5	1	4	2	-	1	1	4	2	1	1
25. Carr	124	34	4	39	47	3	-	-	3	-	1	1	-	-	-	8	1	7	-
26. Cesar	93	41	2	30	20	5	1	1	1	2	-	-	-	-	8	-	8	-	
27. Supik	205	57	3	83	62	14	6	-	7	1	4	1	-	2	1	12	4	8	-
28. Maloney	145	23	3	46	73	6	1	1	4	-	1	1	-	-	-	6	-	6	-
29. Tepletsky	130	45	3	43	39	7	1	-	6	-	-	-	-	-	7	3	3	1	
30. Smith	115	36	3	38	38	7	1	-	6	-	3	-	-	3	-	2	2	-	-
TOTAL	4448	1104	87	1542	1715	241	57	4	170	10	60	16	1	31	12	234	55	116	13
Average per worker	148	37	3	51	57														

DPW MONTHLY STATISTICAL REPORT-Oct., 1938

CASE LOADS - WESTERN DISTRICT

Worker	TOTAL OCTOBER CASES					OCTOBER GRANTS APPROVED					OCT. REJECTIONS				OCT. CLOSINGS			
	Total	ADC	ATB	GPA	OAA	Total	ADC	ATB	GPA	OAA	Total	ADC	GPA	OAA	Total	ADC	GPA	OAA
1. Thomas	150	41	3	49	57	8	4	-	3	1	1	-	1	-	3	-	2	1
2. Tucker	106	29	2	40	35	3	-	-	3	-	2	1	1	-	4	-	3	1
3. Alleyne	100	31	3	38	28	3	-	-	3	-	1	-	1	-	4	2	2	-
4. Waters	129	25	4	46	54	4	-	-	4	-	2	-	2	-	3	-	3	-
5. Marshall	123	34	2	49	38	1	-	-	1	-	-	-	-	-	6	2	4	-
6. Schwartz	133	30	4	45	54	2	1	-	-	1	3	-	3	-	5	1	3	1
7. Trigg	140	37	5	69	29	4	1	-	3	-	1	1	-	-	7	2	4	1
8. Gruebel	156	44	3	48	61	9	1	-	8	-	1	-	1	-	4	1	3	-
9. Bryant	148	44	5	44	55	8	1	-	7	-	3	1	2	-	10	3	7	-
10. Barclay	141	38	6	33	64	2	1	-	1	-	4	-	3	1	9	2	7	-
11. Fowler	121	46	7	36	32	5	1	-	4	-	2	-	2	-	8	3	5	-
12. January	132	57	5	34	36	2	-	-	2	-	1	-	1	-	4	2	2	-
13. Rasin	134	54	5	38	37	6	5	-	1	-	2	-	2	-	11	3	8	-
14. Gehring	142	31	11	38	62	2	-	-	1	1	-	-	-	-	5	-	5	-
15. Wells	174	48	4	54	68	8	1	-	7	-	2	-	2	-	5	3	1	1
16. Clough, R.	147	25	6	24	92	7	2	-	5	-	7	1	1	5	4	-	4	-
17. Dent	161	21	5	19	116	3	1	-	2	-	2	-	-	2	5	1	3	3
18. Salkin	140	18	8	36	78	3	1	-	2	-	2	-	2	-	7	1	5	1
19. Klemme	158	42	3	47	66	5	1	-	4	-	1	-	-	1	6	1	5	-
20. Quinlin	148	34	1	34	79	7	3	-	2	2	1	-	1	-	3	-	2	1
21. Bird	148	36	6	28	78	6	1	1	4	-	1	-	1	-	12	4	5	3
22. Judge	113	14	-	22	77	6	-	-	3	3	1	-	-	1	2	-	2	-
23. Brown, L.	141	60	2	35	44	3	1	-	1	1	-	-	-	-	2	-	2	-
24. Goldstone	131	49	3	34	45	4	1	-	3	-	1	1	-	-	2	1	1	-
25. Luthy	173	88	2	48	35	9	5	-	4	-	1	-	1	-	15	3	11	1
26. Goodman, D.	158	53	5	40	60	7	2	-	5	-	4	-	3	1	11	4	6	1
27. Dwyer	136	28	2	28	78	4	2	-	-	2	-	-	-	-	7	2	3	2
28. Duker	141	28	2	31	80	4	1	-	3	-	2	-	1	1	1	-	1	-
29. Caplan	111	7	1	4	99	2	2	-	-	-	1	1	-	-	3	-	1	2
30. Lyons	141	22	3	24	92	5	1	1	2	1	-	-	-	-	4	2	1	1
Streckfus	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	-	-
Mehling	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-	-
TOTAL	4176	1114	118	1115	1829	142	40	2	88	12	51	6	32	13	172	43	111	18
Average per worker	139	37	4	37	61													

DPW MONTHLY STATISTICAL REPORT

October-1938

NUMBER OF MONTHS SINCE LAST OPENING OF TOTAL CASE LOAD

Last Opening Month Of	No. Months Since	NUMBER OF CASES					PERCENTAGES CUMULATED				
		Total	ADC	ATB	GPA	OAA	Total	ADC	ATB	GPA	OAA
1938											
October	1	839	205	10	580	44	100.0	100.0	100.0	100.0	100.0
September	2	729	170	5	505	49	95.3	95.5	97.4	89.1	99.4
August	3	721	173	5	477	66	91.2	91.7	96.1	79.6	98.8
July	4	567	155	4	377	31	87.2	87.9	94.8	70.6	97.9
June	5	397	106	5	227	59	84.0	84.5	93.8	63.5	97.5
May	6	495	151	12	267	65	81.8	82.1	92.5	59.2	96.7
April	7	464	155	8	206	95	79.0	78.8	89.4	54.2	95.9
March	8	475	171	2	251	51	76.4	75.4	87.3	50.3	94.7
February	9	433	174	5	202	52	73.7	71.6	86.8	45.6	94.0
January	10	470	153	2	185	130	71.3	67.7	85.5	41.8	93.4
1937											
December	11	584	133	10	121	320	68.7	64.3	85.0	38.3	91.7
November	12	491	106	9	90	286	65.4	61.4	82.4	36.0	87.5
October	13	582	102	11	104	365	62.7	59.1	80.1	34.3	83.8
September	14	387	91	7	77	212	59.5	56.8	77.3	32.3	79.1
August	15	436	94	6	69	267	57.3	54.8	75.5	30.8	76.3
July	16	469	144	5	66	254	54.9	52.7	74.0	29.5	72.8
June	17	1794	162	3	1504	125	52.3	49.5	72.7	28.3	69.5
May	18	505	89	1	-	415	42.3	45.9	71.9	-	67.9
April	19	415	300	5	-	110	39.5	43.9	71.6	-	62.5
March	20	142	71	13	-	58	37.2	37.3	70.4	-	61.1
February	21	116	53	10	-	53	36.4	35.7	67.0	-	60.4
January	22	431	110	12	-	309	35.8	34.5	64.4	-	59.7
1936											
December	23	746	63	7	-	676	33.4	32.1	61.3	-	55.7
November	24	303	29	6	-	268	29.2	30.7	59.5	-	46.1
October	25	383	71	13	-	299	27.5	30.1	58.0	-	43.4
September	26	298	68	7	-	223	25.4	28.5	54.6	-	39.5
August	27	251	35	-	-	216	23.7	27.0	52.8	-	36.6
July	28	116	14	3	-	99	22.3	26.2	52.8	-	33.8
June	29	1752	1109	54	-	589	21.7	25.9	52.0	-	32.5
May	30	262	1	148	-	113	11.9	1.4	38.1	-	24.9
April	31	50	1	-	-	49	10.4	1.4	-	-	23.4
March	32	20	-	-	-	20	10.1	1.4	-	-	22.9
February	33	20	-	-	-	20	10.0	1.4	-	-	22.6
January or Prior	34 or more	1780	63	-	-	1717	9.9	1.4	-	-	22.7
TOTAL		17,923	4522	388	5308	7705					

DPW MONTHLY STATISTICAL REPORT

October - 1938

FAMILY STATUS OF TOTAL CASE LOAD

Status	Total			ADC			ATB			GPA			OAA		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro
Married Couple	5851	3778	2073	1378	867	511	116	61	55	2272	1372	900	2085	1478	607
Unmarried Couple	83	20	63	42	7	35	-	-	-	33	7	26	8	6	2
Unmarried Mother	554	59	495	504	51	453	-	-	-	41	4	37	9	4	5
Widow	4804	2663	2141	1040	499	541	55	16	39	998	392	606	2711	1756	955
Widower	1678	1000	678	53	27	26	30	12	18	362	177	185	1233	784	449
Deserted Man	113	38	75	12	5	7	3	1	2	80	24	56	18	8	10
Deserted Woman	1448	527	921	1064	374	690	5	3	2	344	133	211	35	17	18
Deserting Man	1	-	1	1	-	1	-	-	-	-	-	-	-	-	-
Deserting Woman	20	13	7	20	13	7	-	-	-	-	-	-	-	-	-
Divorced Man	133	106	27	-	-	-	6	2	4	57	47	10	70	57	13
Divorced Woman	235	183	52	92	75	17	5	3	2	82	59	23	56	46	10
Separated Man	286	139	147	2	-	2	15	1	14	124	54	70	145	84	61
Separated Woman	264	144	120	94	58	36	1	-	1	79	33	46	90	53	37
Married Couple Apart-Man	183	94	89	1	1	-	7	2	5	110	55	55	65	36	29
" " " -Woman	286	157	129	195	110	85	4	1	3	49	20	29	38	26	12
Single Man	926	657	269	5	1	4	83	47	36	397	240	157	441	369	72
Single Woman	923	626	297	18	4	14	55	32	23	279	123	156	571	467	104
Minor	1	-	1	-	-	-	-	-	-	1	-	1	-	-	-
Unknown	134	70	64	1	-	1	3	2	1	-	-	-	130	68	62
TOTAL	17,923	10,274	7649	4522	2092	2430	388	183	205	5308	2740	2568	7705	5259	2446

October-1938

SIZE OF ADC AND GPA FAMILIES RECEIVING GRANTS

SIZE OF FAMILY	ADC		GPA
	TOTAL	SUPPLEMENTATION	
1			2318
2	478	325	1110
3	959	607	503
4	945	515	349
5	753	372	252
6	498	210	192
7	348	99	129
8	202	52	68
9	121	30	45
10	71	9	25
11	30	5	11
12	8	1	10
13	7	2	2
14	4	1	2
TOTAL	4424	2228	5016
TOTAL PERSONS	20,790	9227	12,252
Average persons per case	4.7	4.1	2.4

NUMBER OF CHILDREN IN ADC FAMILIES RECEIVING GRANTS

NUMBER OF CHILDREN	CASES	CHILDREN
1	1146	1146
2	1200	2400
3	904	2712
4	553	2212
5	306	1530
6	189	1134
7	82	574
8	29	232
9	11	99
10	3	30
11	1	11
TOTAL	4424	12,080
Average children per case		2.7

DPW MONTHLY STATISTICAL REPORT

-14-

October-1938

REASONS FOR CLOSINGS

REASONS	TOTAL	ADC	ATB	GPA	OAA
2b Placed in institution ✓	14	1	-	11	2
2c " with relatives ✓	1	1	-	-	-
d " out of home ✓	2	2	-	-	-
3 Death ✓	65	2	1	7	55
6 Employment secured in private industries ✓	139	29	-	108	2
7 Financial adjustment ✓	42	17	-	18	7
11 Ineligible under physical incapacity	2	2	-	-	-
12 Insurance adjustment ✓	6	2	-	2	2
13 Legal responsibility ✓	4	4	-	-	-
14 Maturity ✓	14	14	-	-	-
15 Misrepresentation ✓	22	11	-	9	2
16 Moved or unable to locate ✓	24	8	-	15	1
18 Non-residence ✓	6	1	-	5	-
19 Relatives assumed care ✓	14	3	1	5	5
21 WPA placement ✓	382	73	-	309	-
22 By request	1	-	-	1	-
23 Income sufficient ✓	17	9	-	7	1
27 Employment refused	3	-	-	3	-
a Refusal of WPA	3	-	-	3	-
28 Refusal of DPW plan	8	1	-	7	-
31 Case combination ✓	1	1	-	-	-
32 Resources available ✓	8	1	-	5	2
34 Transferred to another type of assistance ✓	41	7	-	34	-
38 Change of payee ✓	8	8	-	-	-
39 Unemployment compensation ✓	24	1	-	23	-
40 Full time employment ✓	1	1	-	-	-
TOTAL	852	199	2	572	79

October-1938

PROBLEMS OF ADC AND GPA INTAKE CASES

SUMMARY

PROBLEM	ADC	GPA			
		TOTAL	EMPL.	LIGHT WORK	UNEMPL.
A. Death	45				
B. Continued absence from home	98	15	-	-	15
C. Physical Incapacity	54	164	45	18	101
D. Mental Incapacity	5	1	-	-	1
E. Industrial	-	359	325	27	7
F. Other	3	41	-	-	41
TOTAL	205	580	370	45	165

PROBLEMS ITEMIZED

Problem	ADC	GPA			
		Total	Empl.	Light Work	Unempl.
A. <u>DEATH</u>					
1. Father	36	-	-	-	-
2. Mother	5	-	-	-	-
3. Both	4	-	-	-	-
SUB-TOTAL	45	-	-	-	-
B. <u>CONTINUED ABSENCE FROM HOME</u>					
4. Family desertion	30	8	-	-	8
5. Divorce	6	-	-	-	-
6. Separation-court order	3	-	-	-	-
7. " -voluntary	11	1	-	-	1
8. Imprisonment	10	6	-	-	6
9. Illegitimacy	38	-	-	-	-
SUB-TOTAL	98	15	-	-	15
C. <u>PHYSICAL INCAPACITY (Diagnosed)</u>					
12. Anemia	-	2	-	-	2
13. Arthritis or rheumatism	4	11	-	-	11
14. Blind or sight impaired	1	-	-	-	-
15a. Blood circulatory dis. (hypertension)	6	8	-	1	7
c. " " (arteriosclerosis)	1	-	-	-	-
16. Cancer	1	1	-	-	1
17. Cardiac	3	14	-	1	13
18. Diabetes	-	5	-	1	4
20. Epilepsy	-	2	-	-	2
22. Genito-urinary disturbance	-	2	-	-	2
24. Hearing impaired	2	2	-	-	2
25. Hernia	1	5	-	1	4
26. Maternity	-	1	-	-	1
27b. Nephritis (kidney complications)	-	1	-	-	1

DPW MONTHLY STATISTICAL REPORT

-16-

October - 1938

PROBLEMS OF ADC AND GPA INTAKE CASES-Cont'd

Problems	ADC	GPA			
		Total	Empl.	Light Work	Unempl.
30. Paralyzed or crippled	6	5	-	-	5
31. Resp'tory system, dis. other than T.B.	4	4	-	-	4
32. Stomach ulcers: gastritis	2	-	-	-	-
33. Syphilis	-	3	-	-	3
34. Temporary illness	6	55	45	10	-
35. Tuberculosis	10	12	-	1	11
37. Ulcer	1	1	-	-	1
38. Other acute illness	-	6	-	1	5
39. Other chronic illness	6	24	-	2	22
SUB-TOTAL	54	164	45	18	101
D. MENTAL INCAPACITY(Diagnosed)					
43. Constitutional psychopathic inferior	-	1	-	-	1
48. Other mental disorder	5	-	-	-	-
SUB-TOTAL	5	1	-	-	1
E. INDUSTRIAL					
54. Part time work	-	13	13	-	-
56. Unemployment	-	339	312	27	-
57. Vocational inefficiency	-	7	-	-	7
SUB-TOTAL	-	359	325	27	7
F. OTHER PROBLEMS					
61. Insufficient income	-	1	-	-	1
62. Old age (65 or over)	3	39	-	-	39
64. Woman with dependent children	-	1	-	-	1
SUB-TOTAL	3	41	-	-	41
TOTAL	205	580	370	45	165

DPW MONTHLY STATISTICAL REPORT

October-1938

INDUSTRY OF HEAD OF GPA EMPLOYABLE AND LIGHT WORK INTAKE CASES
BY CLASSIFICATION AND COLOR

Industry	TOTAL			EMPLOYABLE			LIGHT WORK		
	Total	White	Negro	Total	White	Negro	Total	White	Negro
Agriculture	1	1	-	1	1	-	-	-	-
Building and Construction	35	25	10	32	23	9	3	2	1
Chemical	10	5	5	9	5	4	1	-	1
Cigars and Tobacco	1	1	-	-	-	-	1	1	-
Clay, Glass & Stone	3	3	-	3	3	-	-	-	-
Clothing	1	1	-	1	1	-	-	-	-
Domestic & Personal	53	22	31	40	17	23	13	5	8
Food	18	9	9	15	8	7	3	1	2
Iron & Steel	86	53	33	83	52	31	3	1	2
Lumber	2	2	-	2	2	-	-	-	-
Miscellaneous Manufacturing	10	6	4	9	5	4	1	1	-
Public Service	19	19	-	17	17	-	2	2	-
Other Metals	17	13	4	17	13	4	-	-	-
Paper and Printing	3	1	2	3	1	2	-	-	-
Professional Service	5	2	3	4	1	3	1	1	-
Textiles	2	2	-	2	2	-	-	-	-
Transportation and Communication	35	24	11	33	23	10	2	1	1
Trade	57	41	16	49	36	13	8	5	3
Not Classified	57	27	30	50	24	26	7	3	4
TOTAL	415	257	158	370	234	136	45	23	22

DPW MONTHLY STATISTICAL REPORT

-18-

October-1938

WARD ANALYSIS OF INTAKE BY COLOR

Ward	TOTAL			A.D.C.			A.T.B.			G.P.A.			O.A.A.		
	Total	White	Negro	Total	White	Negro	Tot.	White	Neg.	Tot.	White	Neg.	T.	W.	N.
1	28	28	-	3	3	-	-	-	-	24	24	-	1	1	-
2	23	23	-	6	6	-	-	-	-	17	17	-	-	-	-
3	35	25	10	6	4	2	-	-	-	28	21	7	1	-	1
4	40	22	18	6	2	4	-	-	-	34	20	14	-	-	-
5	28	8	20	6	1	5	-	-	-	21	6	15	1	1	-
6	37	17	20	15	6	9	2	2	-	19	9	10	1	-	1
7	32	8	24	6	-	6	-	-	-	24	7	17	2	1	1
8	35	27	8	8	7	1	-	-	-	25	18	7	2	2	-
9	28	25	3	7	6	1	-	-	-	19	17	2	2	2	-
10	38	9	29	15	2	13	-	-	-	22	6	16	1	1	-
11	35	13	22	6	2	4	1	-	1	26	10	16	2	1	1
12	33	25	8	4	3	1	-	-	-	24	18	6	5	4	1
13	28	26	2	5	4	1	-	-	-	21	20	1	2	2	-
14	34	9	25	9	4	5	1	-	1	24	5	19	-	-	-
15	37	18	19	14	7	7	1	1	-	18	7	11	4	3	1
16	42	13	29	12	4	8	-	-	-	29	9	20	1	-	1
17	34	1	33	8	-	8	-	-	-	24	-	24	2	1	1
18	47	21	26	18	9	9	-	-	-	26	11	15	3	1	2
19	50	32	18	11	7	4	2	1	1	33	23	10	4	1	3
20	25	24	1	6	6	-	1	1	-	13	13	-	5	4	1
21	25	22	3	2	1	1	-	-	-	22	20	2	1	1	-
22	26	14	12	6	3	3	-	-	-	20	11	9	-	-	-
23	17	13	4	2	2	-	1	-	1	13	10	3	1	1	-
24	17	17	-	5	5	-	-	-	-	12	12	-	-	-	-
25	23	17	6	6	5	1	1	1	-	15	10	5	1	1	-
26	21	19	2	4	4	-	-	-	-	16	14	2	1	1	-
27	18	18	-	9	9	-	-	-	-	8	8	-	1	1	-
28	3	3	-	-	-	-	-	-	-	3	3	-	-	-	-
TOTAL	839	497	342	205	112	93	10	6	4	580	349	231	44	30	14

DPW MONTHLY STATISTICAL REPORT

October-1938

WARD ANALYSIS OF CASE LOAD

Ward	TOTAL			ADC			ATB			GPA			OAA		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro
1	333	328	5	97	95	2	5	5	-	100	98	2	131	130	1
2	307	295	12	85	81	4	5	4	1	125	122	3	92	88	4
3	577	415	162	134	94	40	9	4	5	300	218	82	134	99	35
4	568	297	271	95	29	66	6	4	2	262	130	132	205	134	71
5	609	144	465	156	26	130	20	2	18	252	67	185	181	49	132
6	697	445	252	216	120	96	13	7	6	237	142	95	231	176	55
7	613	248	365	216	60	156	10	6	4	155	43	112	232	139	93
8	818	683	135	214	153	56	13	12	1	202	151	51	389	362	27
9	606	536	70	134	107	27	11	10	1	102	82	20	359	337	22
10	608	268	340	195	59	136	9	2	7	186	66	120	218	141	77
11	614	205	409	138	16	122	12	1	11	193	69	124	271	119	152
12	757	540	217	179	108	71	25	12	13	205	142	63	348	278	70
13	696	609	87	138	118	20	7	5	2	157	138	19	394	348	46
14	861	147	714	228	28	200	16	4	12	243	42	201	374	73	301
15	1064	537	527	326	96	230	21	11	10	240	107	133	477	323	154
16	1288	403	885	360	64	296	51	17	34	329	68	261	548	254	294
17	1014	43	971	262	3	259	28	2	26	371	13	358	353	25	328
18	933	367	566	249	83	166	26	7	19	309	126	183	349	151	198
19	984	559	425	280	125	155	21	12	9	357	214	143	326	208	118
20	684	668	16	144	139	5	19	17	2	166	162	4	355	350	5
21	486	350	136	123	77	46	9	4	5	144	103	41	210	166	44
22	537	229	308	116	37	79	10	3	7	226	82	144	185	107	78
23	375	230	145	98	65	33	6	2	4	118	55	63	153	108	45
24	318	316	2	73	72	1	-	-	-	83	82	1	162	162	-
25	268	203	65	77	57	20	7	3	4	61	45	16	123	98	25
26	410	401	9	93	91	2	11	11	-	105	101	4	201	198	3
27	591	544	47	90	78	12	12	12	-	71	63	8	418	391	27
28	103	101	2	6	6	-	-	-	-	9	9	-	88	86	2
County	101	91	10	-	-	-	2	2	-	-	-	-	99	89	10
Hospital	90	67	23	-	-	-	4	2	2	-	-	-	86	65	21
Funeral Holds	13	5	8	-	-	-	-	-	-	-	-	-	13	5	8
TOTAL	17,923	10,274	7649	4522	2092	2430	388	183	205	5308	2740	2568	7705	5259	2446

31

DPW

ANNUAL STATISTICAL REPORT

1907

E. S. Thon, STATISTICIAN

DPW ANNUAL STATISTICAL REPORT

1937

INDEX

<u>ITEM</u>	<u>PAGE</u>
Summary - A	1-7
Summary - B	8
Applications	9-11
Monthly Case Load.	12-15
Color.	16
Sex	17
Family Status.	18-19
Religion	20
Ward Distribution.	21-22
Birthplace	23-28
Year to Baltimore- GPA	29
Size of Family	30
Number of ADC children	31
Months Received Payment	32
Problems	33-36
Industry - GPA.	37-38
Reasons for Closings	39-43
Illegitimacy - ADC	44
Classification	45
Age - GPA	46
Obligations	47-49
Average Grant	48-49
Administrative Costs	50

DPW ANNUAL STATISTICAL REPORT

1937

FIGURES

<u>NUMBER</u>	<u>PAGE</u>
I Applications Received.	8a
II Disposition of Applications.	9a
III Monthly Relief Load by Categories	11a
IV Monthly Relief Load by Categories Cumulated.	12a
V Color.	15a
VI Religion	15a
VII Family Status.	17a
VIII Birthplace	22a
IX Size of ADC and GPA Families	29a
X Number of Months Cases Received Relief	31a
XI Problems	32a
XII Total Obligations.	46a
XIII Relief Obligations by Categories	47a
XIV Average Monthly Grant Per Relief Case	49a

1937

SUMMARY-A

APPLICATIONS- TOTAL

On January 1, 1937 a total of 3542 applications for relief were pending investigation, of which 3342 were in the Investigation Division and 200 were in Intake. Applications pending for Aid to Dependent Children totalled 330, for Aid to Blind 63, and for Old Age Assistance 3149. During the year 15,996 new and re-applications were received, making the total handled during the year 19,538. These figures include only cases for which a signed application blank is on file and therefore exclude all rejections at the Reception desk. Twenty-three percent of the total applications received were for ADC (3707), 1% for ATB(142), 59% for General Public Assistance (9485), and 17% for OAA (2662).

The GPA program of the Department of Public Welfare was initiated June 1, 1937. From June 1 through June 19, 3293 unemployable and light work persons who were formerly assisted by the Emergency Charity Association made application for relief from the Department of Public Welfare. This group of applications formed 35% of the total GPA applications for the year.

Applications for the first five months of the year averaged 593 per month (ADC 371, ATB 12, and OAA 210). The addition of the GPA program in June more than doubled the average applications per month for the last six months of the year, making it 1344. The average per month for the other three categories was only 502 for the second half of the year (ADC 254, ATB 13, and OAA 235).

Of the 19,538 total applications handled during the year, (ADC 4037, ATB 205, GPA 9485, and OAA 5811), ninety-one percent were disposed of as follows:- accepted for a grant 10,041 or 57%, ineligible 7015 or 39% and disposed of for other reasons 558 or 4%. Of the total applications accepted 22% were ADC, 1% ATB, 45% GPA and 32% OAA. Of the total rejections (ineligible and disposed of for other reasons) 23% were ADC, 1% ATB, 55% GPA, and 22% OAA. At the end of the year 1824 applications, or 9% of the total handled, were pending, 1089 in Investigation and 735 in Intake. The number pending at the end of the year was 48% less than the number pending at the end of 1936 mainly because of the disposition of a large block of OAA applications during the year.

MONTHLY CASE LOAD

The active case load of the Department on January 1, 1937 numbered 8412 cases. This total consisted of 2767 ADC (33%), 360 ATB (4%), and 5285 OAA (63%) cases. Intake during the month increased the total to 8998, a gain of 4% over the total in December 1936. During the year 10,041 cases were approved for grants. Nine thousand one hundred and sixty-one were new approvals (91%) and 880 were re-openings (9%). Of the re-openings 473 had last been closed prior to January 1937 and 407 during 1937. Thus, the unduplicated number of cases approved during the year was 9634 of which 1993 were ADC (21%), 104 ATB (1%), 4418 GPA (46%) and 3119 OAA (32%).

The monthly case load began to increase steadily from April on by two to five percent monthly. The inclusion of GPA in the program caused the June case load to jump 31% above the May case load. The total case load for December 1937 numbered 15,297 which was 70% greater than the case load for January 1937. The increase in case load, excluding the GPA cases, was 31%.

The unduplicated number of cases for the year was 18,046. This number comprised 4760 ADC cases (26%), 464 ATB cases (3%), 4418 GPA cases (24%), and 8404 OAA cases (47%). At the end of the year 14,827 or 82% of the total cases were active and 3219 or 18% were closed. The active cases consisted of 3597 ADC (24%), 350 ATB (2%), 3210 GPA (22%), and 7570 OAA (52%). The closed cases consisted of 1163 ADC (36%), 114 ATB (4%), 1208 GPA (37%) and 734 OAA (23%).

COLOR

Fifty-eight percent of the total cases under care during the year were white and 42% were negro. The color composition of the active cases was the same as that of the total cases, whereas 60% of the closed cases were white and 40% were negro. Half of the ADC cases for the year were white and half were negro. ATB cases consisted of 53% white and 47% negro; GPA cases 52% white and 48% negro. Two-thirds of the OAA cases were white and one-third were negro.

SEX

Sixty-percent of the ATB pensioners were males and 40% were females. Proportions for white and negro cases varied only 2% from the percentages of total cases. White cases had 2% more males than the total cases and negro cases 2% less males. Likewise 60% of the GPA payees were males and 40% were females. Sixty-six percent of the white cases were males and 34% females, whereas only 52% of the negro cases were males and 48% females. Old age pensioners consisted of 47% males and 53% females. These same proportions held for white cases, but for negro cases 46% were males and 54% were females.

FAMILY STATUS

Married couples formed the largest group of the total cases and of white cases. Thirty-one percent of the total cases and 35% of the white cases were married couples. Widows formed the next largest group of payees, 28% of the total cases and 26% of the white cases. The largest percentage of negro payees, 30%, were widows and the second largest, 26%, were married couples. Ten percent of the total cases and of white cases, and 9% of the negro cases were widowers.

Married couples, widows and deserted women comprised 28%, 27%, and 25% respectively of the total ADC case load. White ADC cases contained 38% married couples, 28% widows and 19% deserted women, while 30% of the negro payees were deserted women, 26% widows, 18% married couples, and 15% unmarried mothers.

Thirty percent of the total blind pensioners were married and living with spouse, 29% were unmarried, 24% were widowed individuals, 12% were married but not living with spouse, and the family status of 5% was unknown. A larger percentage of white cases (35%) than negro (22%) were unmarried, but a larger percentage of negro cases (30%) than white cases (19%) were widowed individuals.

Married couples formed the largest group of GPA cases, both white and negro. Forty-one percent of all GPA cases were married couples, 48% of white cases, and 34% of negro cases. Nearly twice as large a percentage of negro payees than of whites were widows, 25% compared with 14%. By far the majority of employable cases were married couples: 85% of total, 85% of white and 84% of negro cases. Only 25% of the unemployable cases were married couples. Twenty-eight percent were widows and 11% were deserted women.

Nearly half (49%) of the total old age pensioners were widowed individuals, 28% were married and living with spouse, 14% were unmarried, 7% were married but not living with spouse, and the family status of 2% was unknown. These percentages were approximately the same for the white and negro cases except that 17% of the whites were unmarried, whereas only 9% of the negroes were unmarried but 56% were widowed.

RELIGION

Seventy-one percent of the total cases were Protestant, 22% Roman Catholic, 3% Jewish, 1% had no religion, and that of 3% was unknown. The percentages varied for white and negro cases. Fifty-nine percent of the white cases were Protestant, 31% Roman Catholic, 6% Jewish, 1% had no religion and that of 3% was unknown. Of the negro cases 88% were Protestant, 8% Roman Catholic, 1% had no religion, and that of 3% was unknown. These percentages were approximately similiar in each of the four categories (ADC, ATB, GPA, and OAA).

WARDS

Relief cases were distributed among all the city wards. The largest percentage, 7, lived in Ward 16. Six percent lived in each of Wards 15 and 17, and 5% lived in each of the following wards:- 14, 18, and 19. Six percent of the white cases lived in each of the following wards:- 8, 12, 13, 20, and 27; and 5% each in Wards 9, 15, and 19. Negro cases were more concentrated. Thirteen percent lived in Ward 17, 12% in Ward 16, 10% in Ward 14, and 7% in Ward 15. The most populous wards for ADC cases were 16, 15, 14, 17, and 19; for ATB cases 16, 17, 18, and 15; for GPA cases 17, 3, 15, 16, 18, and 19; and for OAA cases 16, 15, and 27.

BIRTHPLACE

Forty-nine percent of the total cases for the year were coded born in Baltimore. The birthplace used for ADC cases was that of the oldest ADC child, for ATB and OAA cases that of the pensioner, and for GPA cases that of the payee, except for cases in which the head of the household did not receive the check. For the latter cases, the birthplace of the head was used. Seventeen percent were born in the counties of Maryland, making the total for Maryland two-thirds of the grand total. Twenty-four percent were born elsewhere in the United States, 7% in foreign countries, and the birthplace of 3% was unknown. Fifty-four percent of the white individuals coded were born in Baltimore, 15% in the counties of Maryland, 17% elsewhere in the United States, 12% in foreign countries, and the birthplace of 2% was unknown. Only 41% of the negroes were born in Baltimore, 20% in the counties of Maryland, 35% elsewhere in the United States, 1% in foreign countries, and the birthplace of 3% was unknown.

A much larger percentage of the ADC cases, 81%, were coded birthplace Baltimore than of the other categories because the birthplace coded was that of the oldest ADC child. Only 42% of the ATB pensioners, 33% of the heads of GPA families, and 39% of the OAA pensioners were born in Baltimore. With the addition of those born in the counties of Maryland the sub-totals for Maryland were as follows:- ADC 85%, ATB 61%, GPA 47% and OAA 65%. Fourteen percent of the ADC cases, 25% ATB, 36% GPA, and 23% of the OAA cases were coded born elsewhere in the United States. Nine percent of the ATB, 14% GPA and 8% of the OAA pensioners were born in foreign countries.

More white cases came from Baltimore and Carroll counties, and more negroes from Anne Arundel and Calvert counties than from any other county in Maryland.

Half of the white cases born elsewhere in the United States were born in Virginia and Pennsylvania. Half of the negroes born elsewhere came from Virginia. Another 30% were born in North Carolina and South Carolina. Three-fourths of the white cases born in foreign countries came from Germany, Russia, Poland, Italy, and Ireland.

Fourteen percent of the GPA payees who were born elsewhere than in Baltimore, or who were born in Baltimore, left the city, and later returned, came to Baltimore before 1900. Sixteen percent came to the city from 1900 through 1909, 22% from 1910 through 1919, and 26% from 1920 through 1929. Thirteen percent have come since 1929. The year of arrival of 9% is unknown. The percentages for white and negro cases vary little from the total.

SIZE OF FAMILY

The 9141 ADC and GPA relief cases for the year contained 34,718 persons (18,072 white and 16,646 negro) at the end of the year. The average number of persons per case was 3.8, for white cases 3.9, and for negro cases 3.7. ADC families were larger than GPA families. The average per ADC case was 4.6 persons, per ADC white case 4.7 and per negro case 4.6 persons. The largest number of ADC cases, 22% contained 3 persons, 21% 4 persons, 17% 5 persons, 12% 2 persons, 11% 6 persons, and 17% 7 or more persons.

GPA cases averaged only 2.9 persons per case, 3.1 per white case and 2.7 per negro case. The average for GPA cases was smaller than for ADC cases because 41% of the GPA cases (36% white and 47% negro) contained a single unattached individual. Nineteen percent of the cases contained 2 persons, 10% 3 persons, 8% 4 persons, 7% 5 persons, and 15% 6 or more persons.

NUMBER OF ADC CHILDREN

Grants were made during the year for 13,363 ADC children in 4729 cases, or 2.8 children per case. At the end of the year 12,715 children were represented and the average number of children per case was 2.7.

Twenty-eight percent of the total cases contained only 1 ADC child at the end of the year, 27% two, 19% three, 12% four, 7% five, and 7% six or more ADC children.

MONTHS RECEIVED PAYMENT

Forty-percent of the total cases received relief during the entire year. The remaining 60% received relief for varying periods depending upon the month of 1937 in which they were approved for a grant or were closed. Eight percent received relief for one month only, whereas 1% received no relief during the year. Forty percent of the ADC cases, 60% of the ATB cases, and 60% of the OAA cases received relief throughout the year. Forty-four percent of the GPA cases received relief from June through December, the span of the GPA program in 1937.

PROBLEMS

Six percent of the total cases applied for relief because of death, 9% continued absence, 19% physical disability, 1% mental disability, 8% industrial problems, 50% other problems (the majority were OAA) and the problems of 7% were unclassified. The proportions of these problems in the four categories differed greatly because of the varying scopes of the categories.

Of the ADC cases 23% applied because of death, 33% continued absence, 20% physical disability, 2% mental disability, 1% other problems and 22% were unclassified. The latter were cases closed prior to the coding of problems in October 1937. Forty-two percent of the negroes applied because of continued absence as compared with 25% of the whites, whereas only 15% of the negroes applied because of physical disability as compared with 25% of the whites.

The entire ATB case load applied for relief because of physical disability.

In the GPA case load 2% applied because of continued absence, 47% physical disability, 3% mental disability, 30% industrial problem, 14% other problem; and the problems in 4% were unclassified. Fifty-six percent of the negroes applied because of physical disability as compared with 39% of the whites, whereas only 24% applied because of industrial problems as compared with 37% of the whites.

The entire OAA case load was coded as other problem.

The majority of the death problems involved the death of the father. Desertion and illegitimacy were major continued absence from home problems for the ADC cases. Major physical disabilities in ADC and GPA cases were cardiac, arthritis, paralysis, tuberculosis, blood circulatory disturbances, syphilis, and hernia. Unemployment was the largest single problem in the GPA case load.

INDUSTRY

Fifteen percent of the total employable and light work GPA payees were formerly employed in the building trades and another 15% in domestic and personal service. Iron and steel, transportation and communication, and trade were the former industry of 13% each. Seventeen percent of the white cases as compared with 11% of the negro cases were formerly employed in the building trades; 15% of the whites in iron and steel as compared with 9% of the negroes. The proportions for transportation and communication were 14% and 11% respectively, and for trade 15% and 10% respectively. Twenty-six percent of the negroes, however, were formerly employed in domestic and personal service as compared with only 7% of the whites.

The proportion of domestics in the employable and light work groups varied greatly. In the employable group 9% of the total, 5% of the white, and 16% of the negro payees were formerly domestics; whereas, in the light work group 34% of the total, 17% of the white, and 52% of the negro payees were formerly domestics. The picture was the reverse for the building trades. In the employable group 17% of the total, 19% of the white and 14% of the negro cases were formerly employed in the building trades; whereas in the light work group only 7% of the total, 9% of the white, and 5% of the negro payees were formerly employed in building and construction.

REASONS FOR CLOSING

Of the 3626 cases closed during the year 3219 remained closed at the end of the year. Sixty percent were white cases and 40% were negro. Twenty percent were closed because of death, 12% for employment secured in private industry, 10% for WPA placement, 7% for misrepresentation, and 6% for sufficient income. Thirteen percent were closed in one category because of transfer to another category. These transfers occurred chiefly from GPA to the other three categories and from ATB to OAA.

Major reasons for closing ADC cases were employment secured in private industry, misrepresentation, sufficient income, illegitimacy (early in the year), and relatives assumed care. Half of the ATB cases closed were transferred to OAA. Nineteen percent of the ATB cases were closed because of death.

Major reasons for closing GPA cases were transfer to another type of assistance 29%, WPA 24% and employment secured in private industry 17%. Three fourths of the OAA cases were closed because of death.

An analysis was made of the 3472 ADC cases active at the end of November. Seven hundred forty-two, or 21% of the cases had illegitimacy present therein. Of the 742 illegitimate cases 14% were white and 86% negro. The white illegitimate cases formed 7% of the total white cases active at the end of November. The negro illegitimate cases formed 35% of the total negro cases active at the end of the month.

In 46% of the illegitimate cases, illegitimacy was the major problem. In 584 negro cases the ADC children were living with a parent who was an unmarried mother in 299 cases or 51%, and a deserted woman in 137 cases or 23%.

CLASSIFICATION-GPA

Twenty-seven percent of the total GPA cases were classified as employable, 7% light work, 63% unemployable and 3% were unclassified. The proportion of employable cases in the active case load was 23% whereas in the closed case load it was 37%. Unemployable cases formed 69% of the active case load, but only 45% of the closed case load. Thirty-nine percent of all males were employable, 8% could do light work only, and 50% unemployable, whereas only 8% of the females were employable, 6% could do light work, and 82% were unemployable.

AGE-GPA

At the end of the year the number of persons in the active and closed GPA cases totalled 12,818. Five percent of them were 65 years of age or over, 20% were 45 under 65, 21% were 25 under 45, 9% were 16 under 25, 39% were under 16, and the ages of 6% were unknown. Practically the same proportions held for both white and negro cases. Only 7% of the persons in the employable cases were 45 under 65 but 57% were under 16. Twelve percent of the persons in the unemployable cases were 65 and over, 37% were 45 under 65, and only 24% were under 16.

OBLIGATIONS

Total obligations incurred for the relief program of the Department of Public Welfare in 1937 amounted to \$4,055,545.79. This sum consisted of \$3,783,847.01 direct relief and \$271,698.78 administrative costs. In addition \$36,521.08 was paid for OAA funeral expenses.

Total obligations in January 1937 amounted to \$254,745.30 which included \$239,396.10 direct relief and \$15,349.20 administrative costs. In May total obligations were 6.7% higher than in January, relief costs 6.5% higher and administrative costs had increased by 9.9%. The inauguration of the General Public Assistance program in June resulted in a twenty-five percent increase in total obligations, 24% in relief costs, and 43% in administrative costs.

The increasing case load resulted in mounting costs. In June 12,515 cases received \$316,415.48 in relief for which administration totalled \$24,147.34. By December the relief load had increased 19% and total costs were 31% higher than in June, relief costs were 32% higher and administrative costs 18% higher.

The relief costs for the year consisted of \$1,514,398.90 ADC (40%), \$98,275.13 ATB (2.6%), \$571,069.77 GPA (15.1%) June through December, and \$1,600,103.21 OAA (42.3%). In addition \$36,521.08 was paid for OAA funeral expenses. Relief costs averaged \$315,320.58 per month. The actual relief cost per month increased steadily from March through December. The December total was 75% larger than the January relief cost.

ADC relief obligations were 33% higher in December than in January, ATB 8%, OAA 35% and GPA 54% higher in December than in June. Exclusive of GPA, December relief costs exceeded January costs by 33%.

In addition to \$1,309,495.22 ADC funds, it was necessary to supplement 3085 different ADC cases during the year from GPA city funds to the amount of \$204,903.68 or 13.5% of the total ADC relief grant. This supplementation decreased from \$20,749.20 in March to \$6,923.00 in June with the discontinuance of fuel and the automatic cut-off of all supplementation at the end of May. With the reinstatement of supplementation in June, the total increased to \$26,247.88 in December.

AVERAGE RELIEF

The average relief grant per case per month for all categories combined was \$25.92. The lowest average grant was \$25.23 made in June and the highest \$28.05 made in December.

ADC cases averaged \$33.99 per case per month. The lowest grant \$35.34 was in June and the highest \$42.19 in December. The actual average grant from ADC funds was \$33.71. An average number of 1178 cases per month received supplementation from GPA city funds of \$14.50 per month. The lowest supplementary grant, \$12.42, was made to 1578 cases in April, and the highest, \$16.81 to 717 cases in July.

ATB cases averaged \$21.78 per month with the lowest grant, \$19.97 in January and the highest, \$22.42 in September.

The average grant per GPA case per month was \$27.58. It was lowest in June, \$23.53, and highest in December, \$30.05

OAA cases received an average grant of \$20.88 per month, \$20.57 in November and \$21.02 in March.

ADMINISTRATIVE COSTS

Administrative costs for the year amounted to \$271,698.78 or 6.7% of the total obligations. The actual cost in May was 9.9% greater than in January, in December 18.0% greater than in June, and 85.7% greater than in January, but the percentage of total obligations varied within the limits of 6.0 in January and 7.7 in July. Although the actual cost in December was \$28,500.43 as compared with \$15,349.20 in January the percentages of total obligations were 6.4 and 6.0 respectively.

ADC administrative costs of \$110,410.37 formed 40.6% of the total, ATB \$5,041.99 formed 1.9%, GPA \$69,736.20 for June through December formed 25.7%, and OAA \$86,510.22 formed 31.8%.

DPW ANNUAL STATISTICAL REPORT

-8-

1937

SUMMARY-B

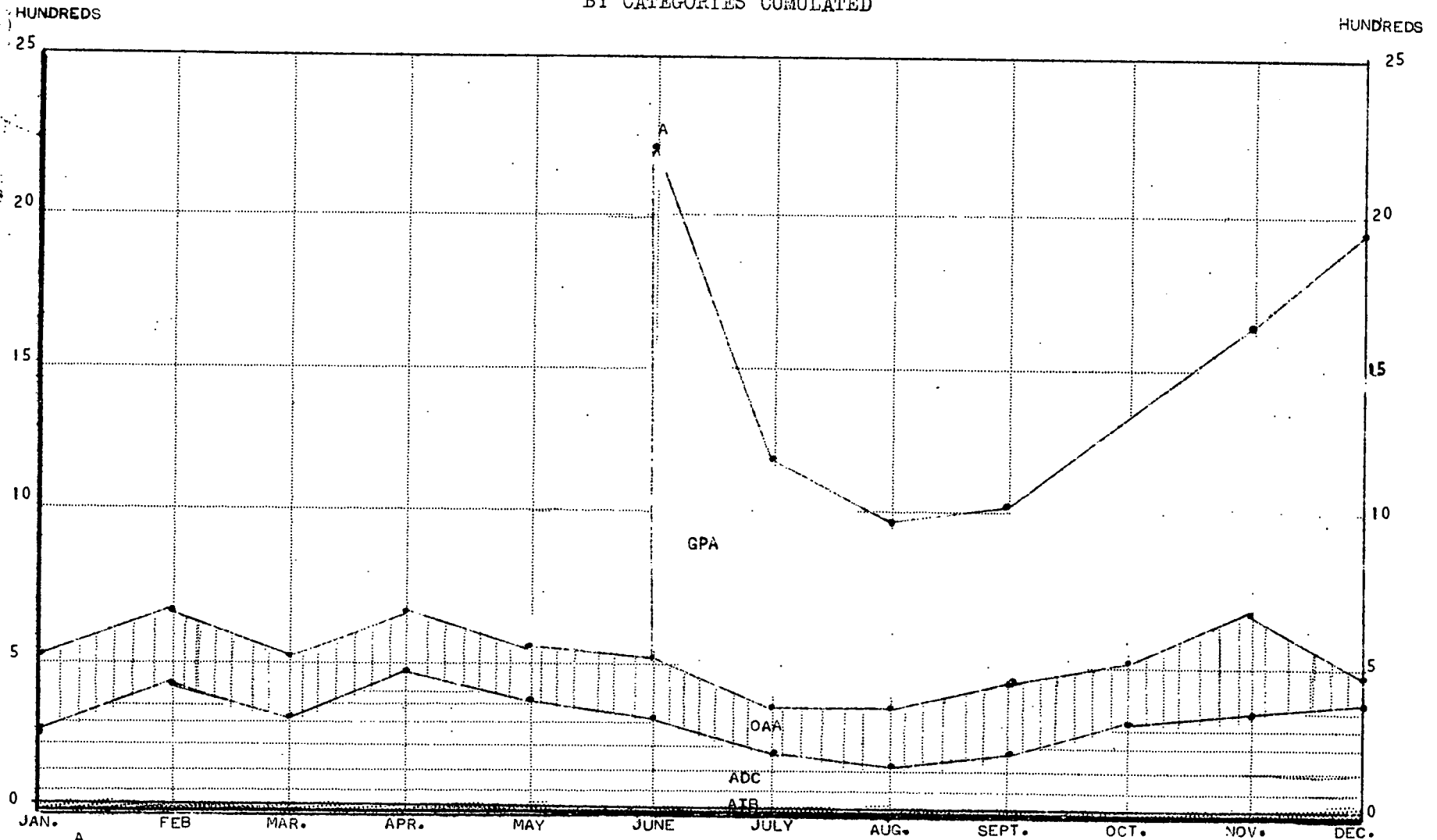
<u>APPLICATIONS</u>		
Pending from December 1936		3542
Investigation Division Intake	3342 200	
Received during 1937		15,996
Total handled		19,538
Disposed of during year		17,714
Approved for grant	10,041	
Ineligible	7,015	
Other reasons	658	
Pending end of 1937		1,824
Investigation Division Intake	1,089 735	
<u>ASSISTANCE GRANTED</u> (Unduplicated cases)		
Continued from December 1936		8,412
Added during 1937		9,634
New	9,161	
Old	473	
TOTAL		18,046
Received payment		17,923
Received no payment		123
Closed at end of 1937		3,219
Continued to 1938		14,827
<u>COLOR</u>		
White		10,556
Negro		7,490
<u>RELIGION</u>		
Protestant		12,867
Roman Catholic		3,924
Jewish		581
Other		44
None		167
Unknown		463

DPW ANNUAL STATISTICAL REPORT

1937

FIG. 1

MONTHLY APPLICATIONS RECEIVED
BY CATEGORIES CUMULATED



A 3,293 APPLICATIONS FROM UNEMPLOYABLE AND LIGHT WORK PERSONS FORMERLY ASSISTED BY THE EMERGENCY CHARITY ASSOCIATION NOT INCLUDED.

DPW ANNUAL STATISTICAL REPORT

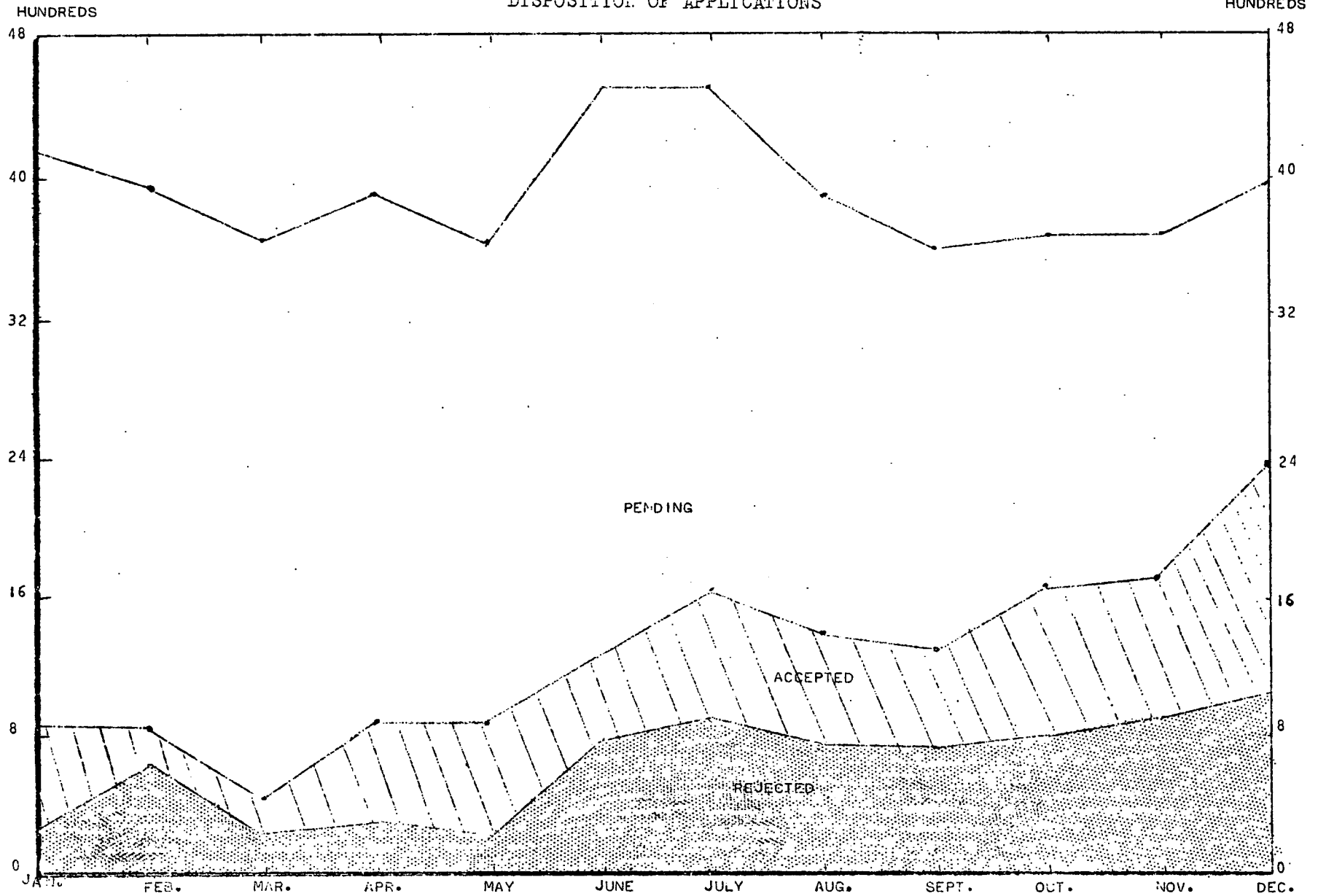
1937

APPLICATIONS

1937 Month	Pending from		Total Handled	DISPOSED OF				PENDING END OF MONTH		
	Prev. Month	Received		Total	Accepted	Inelig.	Other	Reasons	Total	Intake	Invest.
January	3542	546	4088	853	586	242	25	3235	183	3052
February	3235	666	3901	810	176	617	17	3091	225	2866
March	3091	521	3612	422	211	201	10	3190	208	2982
April	3190	673	3863	830	543	255	32	3033	280	2753
May	3033	558	3591	826	635	178	13	2765	287	2478
June	2765	4970	7735	4500	3144	1326	30	3235	810	2425
July	3235	1191	4426	1575	721	816	38	2851	736	2115
August	2851	985	3836	1326	647	662	17	2510	611	1899
September	2510	1016	3526	1228	569	642	17	2298	562	1736
October	2298	1323	3621	1597	864	619	114	2024	662	1362
November	2024	1606	3630	1638	804	625	209	1992	765	1227
December	1992	1941	3933	2109	1141	832	136	1824	735	1089
TOTAL		15,996	19,538	17,714	10,041	7015	658			

FIG. 11

DPW ANNUAL STATISTICAL REPORT
1937
DISPOSITION OF APPLICATIONS



DPW ANNUAL STATISTICAL REPORT

1937

APPLICATIONS BY CATEGORIES

1937 Month	TOTAL HANDLED					RECEIVED					ACCEPTED					REJECTED				
	Total	ADC	ATB	GPA	OAA	Total	ADC	ATB	GPA	OAA	Total	ADC	ATB	GPA	OAA	Total	ADC	ATB	GPA	OAA
January	4088	599	78	-	3411	546	269	15	-	262	586	187	15	-	384	267	166	9	-	92
February	3901	669	69	-	3163	666	423	15	-	228	176	103	13	-	60	634	246	16	-	372
March	3612	630	58	-	2924	521	310	18	-	193	211	129	14	-	68	211	149	10	-	52
April	3863	831	37	-	2995	673	479	3	-	191	543	415	9	-	119	287	147	11	-	129
May	3591	642	26	-	2923	558	373	9	-	176	635	140	2	-	493	191	136	1	-	54
June	7735	697	26	4433	2579	4970	331	3	4433 ^a	203	3144	243	1	2742	158	1356	145	3	1109	99
July	4426	501	36	1405	2484	1191	192	14	823	162	721	209	7	225	280	854	91	1	612	150
August	3836	353	41	1179	2263	985	152	13	611	209	647	144	9	196	298	679	62	6	519	92
September	3526	352	28	1030	2116	1016	205	2	566	243	569	123	5	207	234	659	110	4	447	98
October	3621	412	43	1051	2115	1323	293	24	675	331	864	149	13	288	414	733	112	2	442	177
November	3630	479	45	1243	1863	1606	328	17	922	339	804	151	8	318	327	834	169	1	460	204
December	3933	511	45	1920	1457	1941	352	9	1455	125	1141	229	10	550	352	968	163	5	636	164
TOTAL	19,538	4037	205	9485	5811	15,996	3707	142	9485	2662	10,041	2222	106	4526	3187	7673	1696	69	4225	1683

^aIncludes 3,293 unemployable and light work persons formerly assisted by the Emergency Charity Association.

DPW ANNUAL STATISTICAL REPORT

1937

PERCENTAGE ANALYSIS OF APPLICATIONS BY CATEGORIES

1937 Month	TOTAL HANDLED					RECEIVED					ACCEPTED					REJECTED				
	Total	ADC	ATB	GPA	OAA	Total	ADC	ATB	GPA	OAA	Total	ADC	ATB	GPA	OAA	Total	ADC	ATB	GPA	OAA
January	100	15	2	-	83	100	49	3	-	48	100	32	3	-	65	100	62	3	-	35
February	100	17	2	-	81	100	64	2	-	34	100	59	7	-	34	100	39	3	-	58
March	100	17	2	-	81	100	60	3	-	37	100	61	7	-	32	100	71	5	-	24
April	100	21	1	-	78	100	71	1	-	28	100	76	2	-	22	100	51	4	-	45
May	100	18	1	-	81	100	67	2	-	31	100	22	*	-	78	100	71	1	-	28
June	100	9	*	57	34	100	7	*	89	4	100	8	*	87	5	100	11	*	82	7
July	100	11	1	32	56	100	16	1	69	14	100	29	1	31	39	100	11	*	72	17
August	100	9	1	31	59	100	15	2	62	21	100	22	2	30	46	100	9	1	76	14
September	100	10	1	29	60	100	20	*	56	24	100	22	1	36	41	100	16	1	68	15
October	100	11	1	29	59	100	22	2	51	25	100	17	2	33	48	100	16	*	60	24
November	100	13	1	34	52	100	21	1	57	21	100	19	1	39	41	100	20	*	55	25
December	100	13	1	49	37	100	18	*	75	7	100	20	1	48	31	100	17	1	65	17
January-December	100	21	1	49	29	100	23	1	59	17	100	22	1	45	32	100	22	1	55	22

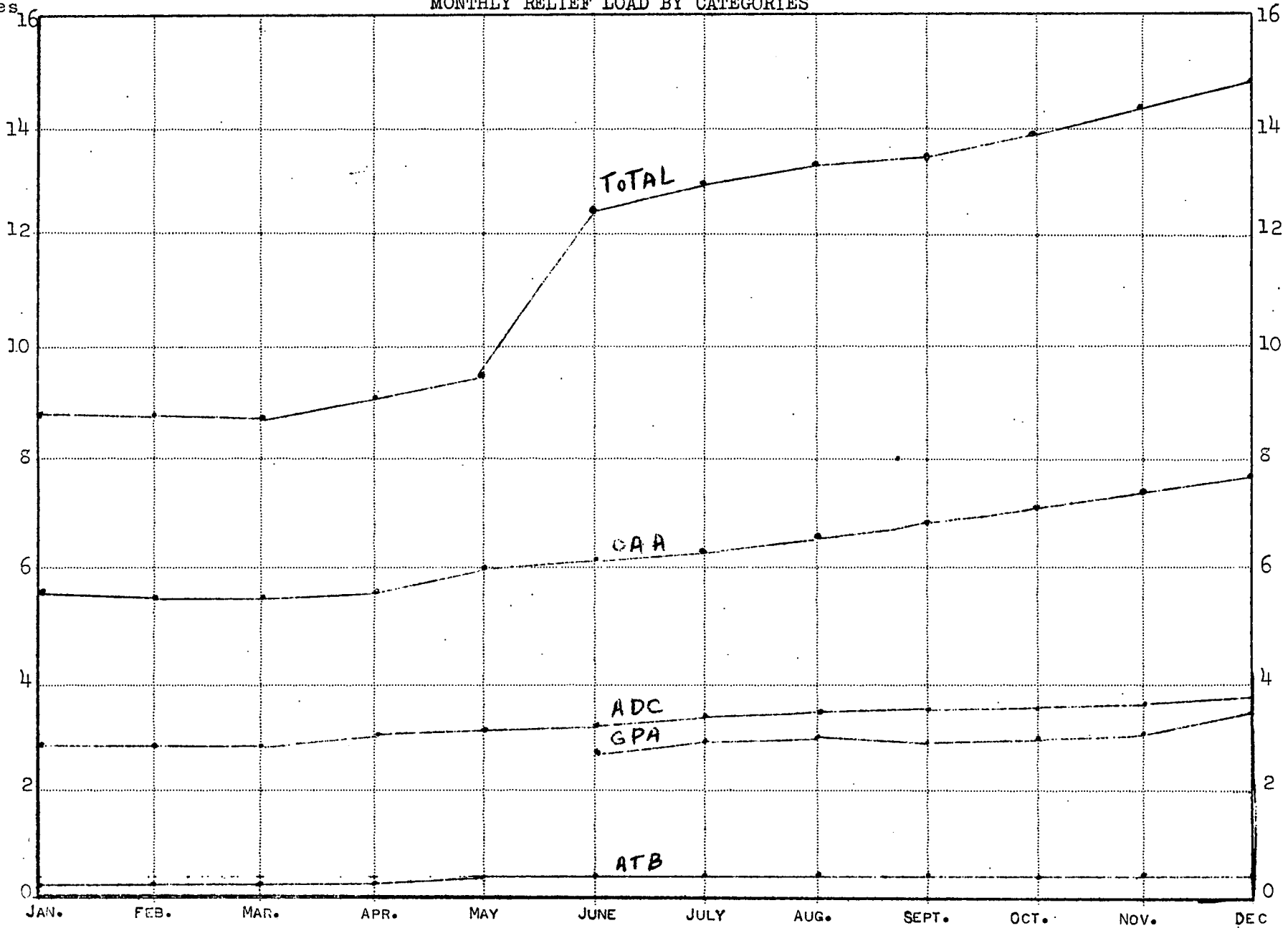
* Less than 1%.

Thousands
of
Cases

FIG. III

DPW ANNUAL STATISTICAL REPORT
-1937-
MONTHLY RELIEF LOAD BY CATEGORIES

Thousands
of
Cases



DPW ANNUAL STATISTICAL REPORT

1937

MONTHLY CASE LOAD

Month	Continued From Previous Month	ADDED DURING MONTH					Total During Month	Received Payment	Closed	Continued to Next Month
		Total	New	RE-OPENED		Recurent				
January	8412	586	547	39	39	-	8998	8967	252	8746
February	8746	176	152	24	16	8	8922	8886	276	8646
March	8646	211	184	27	10	17	8857	8809	251	8606
April	8606	543	277	266	204	62	9149	9126	197	8952
May	8952	635	576	59	39	20	9587	9542	162	9425
June	9425	3144	3057	87	50	37	12,569	12,515	198	12,371
July	12,371	721	663	58	27	31	13,092	13,013	330	12,762
August	12,762	647	606	41	18	23	13,409	13,311	307	13,102
September	13,102	569	520	49	24	25	13,671	13,464	299	13,372
October	13,372	864	808	56	22	34	14,236	13,854	453	13,783
November	13,783	804	724	80	11	69	14,587	14,305	431	14,156
December	14,156	1141	1047	94	13	81	15,297	14,901	470	14,827
TOTAL		10,041	9161	880	473	407			3626	

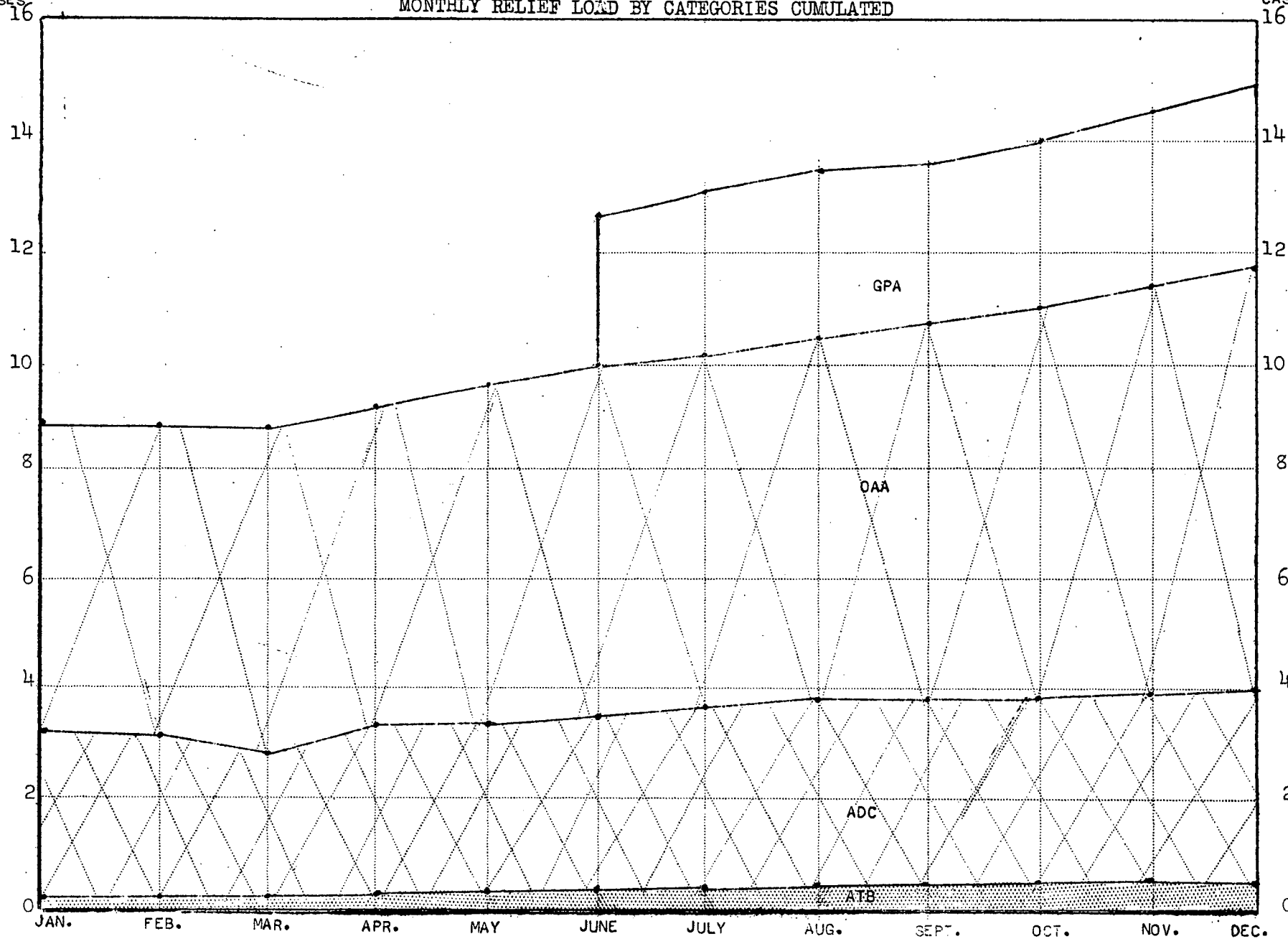
THOUSANDS
OF
CASES

FIG. IV

DPW ANNUAL STATISTICAL REPORT
1937

THOUSANDS
OF
CASES

MONTHLY RELIEF LOAD BY CATEGORIES CUMULATED



DPW ANNUAL STATISTICAL REPORT

1937

MONTHLY CASE LOAD BY CATEGORIES

1937 Month	TOTAL CASE LOAD					RELIEF CASES					INTAKE					CLOSINGS				
	Total	ADC	ATB	GPA	OAA	Total	ADC	ATB	GPA	OAA	Total	ADC	ATB	GPA	OAA	Total	ADC	ATB	GPA	OAA
Jan.	8998	2954	375		5669	8967	2942	373		5652	586	187	15		384	252	149	11		92
Feb.	8922	2908	377		5637	8886	2891	375		5620	176	103	13		60	276	200	7		69
March	8857	2837	384		5636	8809	2806	382		5621	211	129	14		68	251	166	10		75
April	9149	3086	383		5680	9126	3080	382		5664	543	415	9		119	197	117	8		72
May	9587	3109	377		6101	9542	3088	376		6078	635	140	2		493	162	97	4		61
June	12,569	3255	374	2742	6198	12,515	3229	374	2742	6170	3144	243	1	2742	158	198	93	4	32	69
July	13,092	3371	377	2935	6409	13,013	3346	376	2934	6357	721	209	7	225	280	330	73	2	181	74
August	13,409	3442	384	2950	6633	13,311	3411	381	2932	6587	647	144	9	196	298	307	95	5	173	34
Sept.	13,671	3470	384	2984	6833	13,464	3441	381	2864	6778	569	123	5	207	234	299	70	8	191	30
Oct.	14,236	3549	389	3081	7217	13,854	3483	385	2931	7055	864	149	13	288	414	453	120	17	242	74
Nov.	14,587	3580	380	3157	7470	14,305	3515	369	3001	7420	804	151	8	318	327	431	108	25	213	85
Dec.	15,297	3701	365	3494	7737	14,901	3612	360	3302	7627	1141	229	10	550	352	470	104	15	284	67
Undup. Total	18,046	4760	464	4418	8404	17,923	4729	460	4412	8322	9634	1993	104	4418	3119	3219	1163	114	1208	734

DPW ANNUAL STATISTICAL REPORT

1937

PERCENTAGE ANALYSIS OF MONTHLY CASE LOAD BY CATEGORIES

1937 Month	TOTAL CASE LOAD					RELIEF CASES					INTAKE					CLOSINGS				
	Total	ADC	ATB	GPA	OAA	Tot.	ADC	ATB	GPA	OAA	Tot.	ADC	ATB	GPA	OAA	Tot.	ADC	ATB	GPA	OAA
January	100	33	4	-	63	100	33	4	-	63	100	32	3	-	65	100	59	4	-	37
February	100	33	4	-	63	100	33	4	-	63	100	59	7	-	34	100	72	3	-	25
March	100	32	4	-	64	100	32	4	-	64	100	61	7	-	32	100	66	4	-	30
April	100	34	4	-	62	100	34	4	-	62	100	76	2	-	22	100	59	4	-	37
May	100	32	4	-	64	100	32	4	-	64	100	22	*	-	78	100	60	2	-	38
June	100	26	3	22	49	100	26	3	22	49	100	8	*	87	5	100	47	2	16	35
July	100	26	3	22	49	100	26	3	22	49	100	29	1	31	39	100	22	1	55	22
August	100	26	3	22	49	100	26	3	22	49	100	22	2	30	46	100	31	2	56	11
September	100	25	3	22	50	100	26	3	21	50	100	22	1	36	41	100	23	3	64	10
October	100	25	3	21	51	100	25	3	21	51	100	17	2	33	48	100	27	4	53	16
November	100	24	3	22	51	100	24	3	21	52	100	19	1	39	41	100	25	6	49	20
December	100	24	2	23	51	100	24	3	22	51	100	20	1	48	31	100	22	3	61	14
Unduplicated Total	100	26	3	24	47	100	26	3	25	46	100	21	1	46	32	100	36	4	37	23

* Less than 1%.

DPW ANNUAL STATISTICAL REPORT

1937

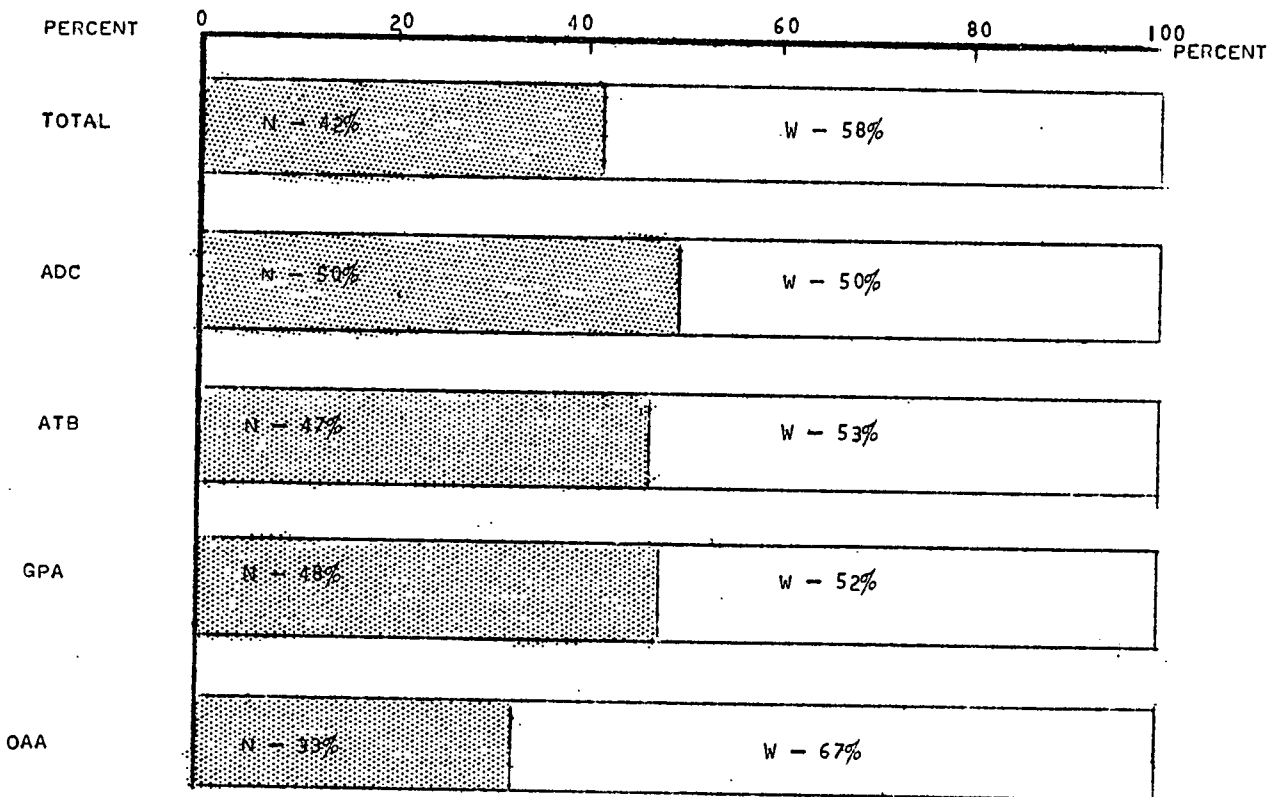
MONTHLY VARIATION IN CASE LOAD

Month 1936	Total Case Load	VARIATION		VARIATION IN CATEGORIES									
				ADC		ATB		GPA		OAA			
		Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent		
December	8693												
1937													
January	8998	305	4	57	2	2	1	-	-	246	5		
February	8922	- 76	- 1	- 46	- 2	2	1	-	-	- 32	- 1		
March	8857	- 65	- 1	- 71	- 2	7	2	-	-	- 1	- *		
April	9149	292	3	249	9	- 1	- *	-	-	44	1		
May	9587	438	5	23	1	- 6	- 2	-	-	421	7		
June	12,569	2982	31	146	5	- 3	- 1	-	-	97	2		
July	13,092	523	4	116	4	3	1	193	7	211	3		
August	13,409	317	2	71	2	7	2	15	1	224	3		
September	13,671	262	2	28	1	-	-	34	1	200	3		
October	14,236	565	4	79	2	5	1	97	3	384	6		
November	14,587	351	2	31	1	- 9	- 2	76	2	253	4		
December	15,297	710	5	121	3	-15	- 4	337	11	267	4		
January-December		6299	70	747	25	-10	- 3	752	27	2068	36		

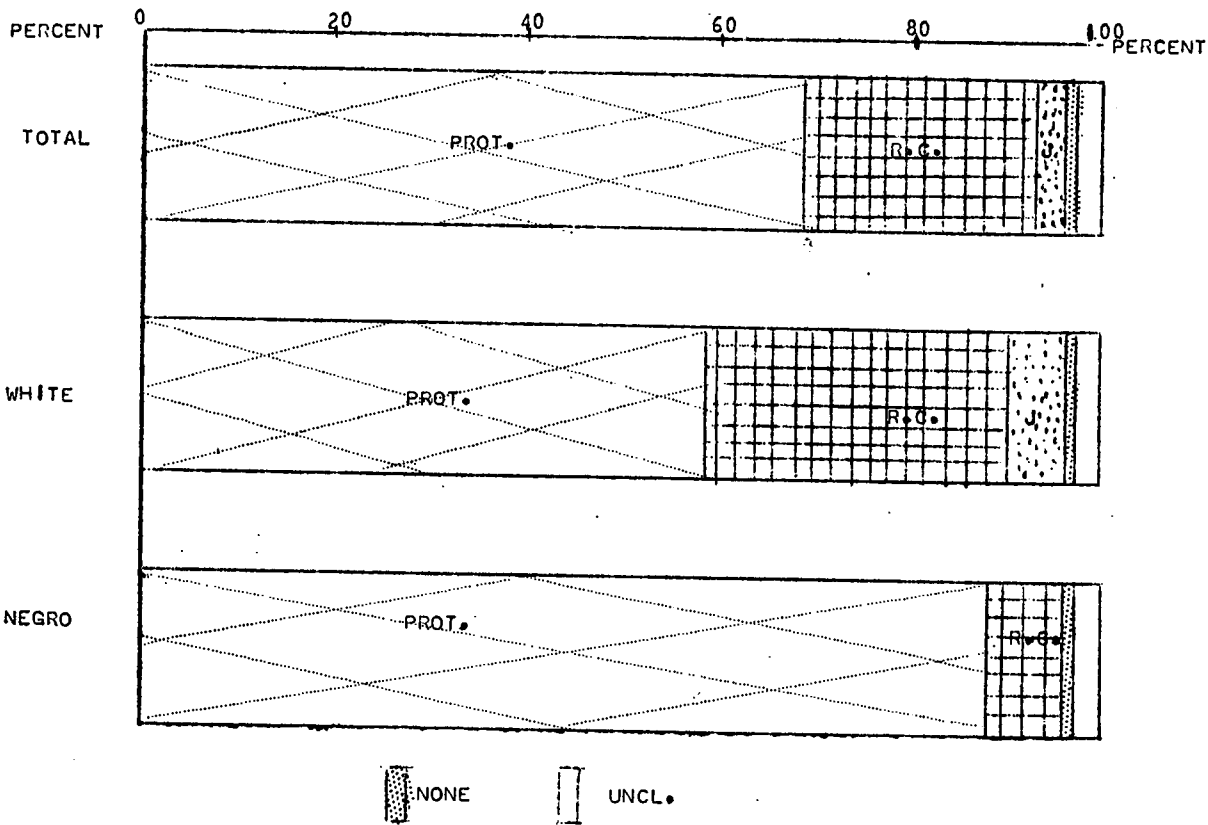
*Less than 1%.

FIG. V

1937
COLOR



RELIGION



DPW ANNUAL STATISTICAL REPORT

1937

COLOR

CATEGORY	TOTAL			ACTIVE			CLOSED		
	Total	White	Negro	Total	White	Negro	Total	White	Negro
ADC	4760	2369	2391	3597	1708	1889	1163	661	502
ATB	464	245	219	350	166	184	114	79	35
GPA	4418	2301	2117	3210	1616	1594	1208	685	523
OAA	8404	5641	2763	7670	5139	2531	734	502	232
TOTAL	18,046	10,556	7490	14,827	8629	6198	3219	1927	1292

PERCENTAGE ANALYSIS OF COLOR

CATEGORY	TOTAL			ACTIVE			CLOSED		
	Total	White	Negro	Total	White	Negro	Total	White	Negro
ADC	100	50	50	100	47	53	100	57	43
ATB	100	53	47	100	47	53	100	69	31
GPA	100	52	48	100	50	50	100	57	43
OAA	100	67	33	100	67	33	100	68	32
TOTAL	100	58	42	100	58	42	100	60	40

DPW ANNUAL STATISTICAL REPORT

1937

SEX OF ATB, GPA, AND OAA PAYEES

CATEGORY	TOTAL			WHITE			NEGRO		
	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE
ATB	464	280	184	245	152	93	219	128	91
GPA	4418	2630	1788	2301	1522	779	2117	1108	1009
OAA	8404	3924	4480	5641	2641	3000	2763	1283	1480

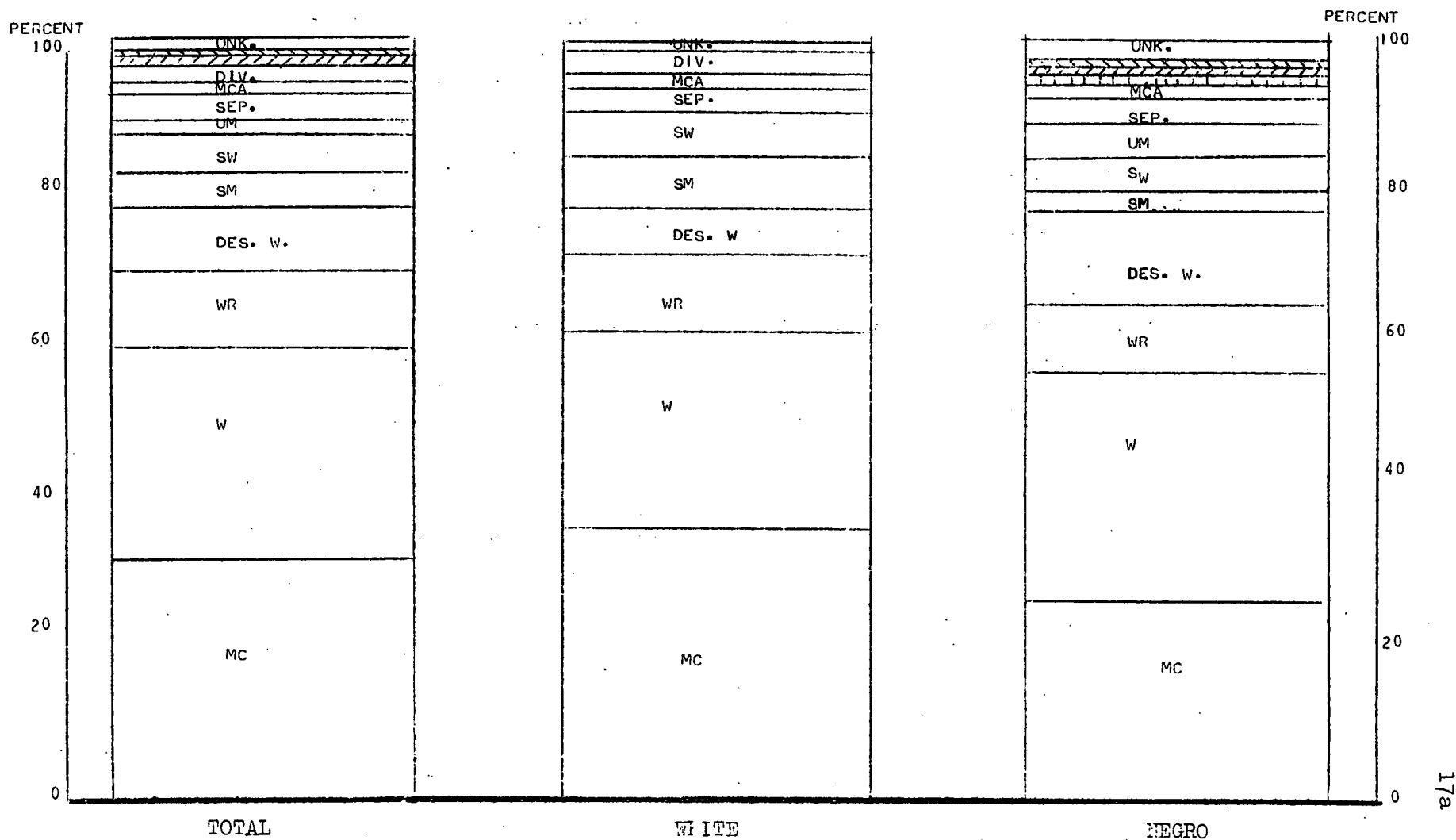
PERCENTAGE ANALYSIS OF SEX OF ATB, GPA, AND OAA PAYEES

CATEGORY	TOTAL			WHITE			NEGRO		
	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE
ATB	100	60	40	100	62	38	100	58	42
GPA	100	60	40	100	66	34	100	52	48
OAA	100	47	53	100	47	53	100	46	54

DPW ANNUAL STATISTICAL REPORT

FIG. VII

1937
FAMILY STATUS



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DIV.

DPW ANNUAL STATISTICAL REPORT

1937

FAMILY STATUS

Family Status	TOTAL			ADC			ATB			GPA			OAA		
	Total	White	Negro	Total	White	Negro	Tot. White	Neg.		Total	White	Negro	Total	White	Negro
Married Couple	5637	3705	1932	1344	905	439	136	80	56	1833	1112	721	2324	1608	716
Unmarried Couple	110	38	72	47	19	28	-	-	-	56	15	41	7	4	3
Unmarried Mother	425	49	376	395	46	349	1	-	1	25	3	22	4	-	4
Widow	4997	2780	2217	1269	647	622	73	29	44	833	313	520	2822	1791	1031
Widower	1749	1045	704	63	34	29	38	18	20	300	154	146	1348	839	509
Deserted Man	112	42	70	14	7	7	3	1	2	74	25	49	21	9	12
Deserted Woman	1525	597	928	1158	437	721	3	2	1	330	140	190	34	18	16
Deserting Man	2	1	1	1	1	-	-	-	-	1	-	1	-	-	-
Deserting Woman	28	13	15	24	9	15	-	-	-	4	4	-	-	-	-
Divorced Man	126	99	27	-	-	-	8	5	3	39	31	8	79	63	16
Divorced Woman	219	170	49	97	78	19	9	6	3	61	41	20	52	45	7
Separated Man	235	122	113	6	2	4	17	2	15	49	28	21	163	90	73
Separated Woman	284	175	109	132	91	41	3	1	2	54	24	30	95	59	36
Married Couple Apart-Man	150	87	63	1	-	1	10	4	6	70	40	30	69	43	26
Married Couple Apart-Woman	217	126	91	129	72	57	5	2	3	47	28	19	36	24	12
Single Man	957	712	245	2	-	2	82	50	32	278	170	108	595	492	103
Single Woman	852	584	268	14	2	12	52	35	17	207	98	109	579	449	130
Unknown	421	211	210	64	19	45	24	10	14	157	75	82	176	107	69
TOTAL	18,046	10,556	7490	4760	2369	2391	464	245	219	4418	2301	2117	8404	5641	2763

DPW ANNUAL STATISTICAL REPORT

1937

PERCENTAGE ANALYSIS OF FAMILY STATUS.

Family Status	TOTAL			ADC			ATB			GPA			OAA		
	Tot.	White	Neg.	Tot.	White	Neg.	Tot.	White	Neg.	Tot.	White	Neg.	Tot.	White	Neg.
Married Couple	31	35	26	28	38	18	30	33	26	41	48	34	28	28	26
Unmarried Couple	1	*	1	1	1	1	-	-	-	1	1	2	*	*	*
Unmarried Mother	2	*	5	8	2	15	*	-	*	1	*	1	*	-	*
Widow	28	26	30	27	28	26	16	12	21	19	14	25	33	32	37
Widower	10	10	9	1	1	1	8	7	9	7	7	7	16	15	19
Deserted Man	1	*	1	*	*	*	0.5	0.5	1	2	1	3	0.5	*	*
Deserted Woman	8	6	12	25	19	30	0.5	0.5	*	7	6	9	0.5	-	1
Deserting Man	*	*	*	*	*	-	-	-	-	*	-	*	-	-	-
Deserting Woman	*	*	*	1	*	1	-	-	-	*	*	-	-	-	-
Divorced Man	1	1	*	-	-	-	2	2	1.5	1	1	*	1	1	1
Divorced Woman	1	2	1	2	3	1	2	3	1.5	1	2	1	1	1	-
Separated Man	1	1	2	*	*	*	3	0.5	7	1	1	1	2	2	3
Separated Woman	2	2	1	3	4	2	1	0.5	1	1	1	1	1	1	1
Married Couple Apart-Man	1	1	1	*	-	*	2	1	3	2	2	1	1	1	1
Married Couple Apart-Woman	1	1	1	3	3	2	1	1	1	1	1	1			
Single Man	5	7	3	*	-	*	18	21	14	6	8	5	7	9	4
Single Woman	5	6	4	*	*	1	11	14	8	5	4	5	7	8	5
Unknown	2	2	3	1	1	2	5	4	6	4	3	4	2	2	2
TOTAL	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100

* Less than 1%.

DPW ANNUAL STATISTICAL REPORT

1937

RELIGION

Religion	TOTAL			ADC			ATB			GPA			OAA		
	Total	White	Negro	Total	White	Negro	Tot. White	Neg.		Total	White	Neg.	Total	White	Negro
Protestant	12,867	6254	6613	3310	1192	2118	337	145	192	3018	1188	1830	6202	3729	2473
Roman Catholic	3,924	3323	601	1169	942	227	88	76	12	932	759	173	1735	1546	189
Jewish	581	581	-	191	191	-	11	11	-	223	223	-	156	156	-
Other	44	37	7	4	4	-	-	-	-	31	28	3	9	5	4
None	167	85	82	56	24	32	3	2	1	64	30	34	44	29	15
Unknown	463	276	187	30	16	14	25	11	14	150	73	77	258	176	82
TOTAL	18,046	10,556	7490	4760	2369	2391	464	245	219	4418	2301	2117	8404	5641	2763

PERCENTAGE ANALYSIS OF RELIGION

Religion	TOTAL			ADC			ATB			GPA			OAA		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro
Protestant	71	59	88	70	50	89	73	60	88	68	52	86	74	66	89
Roman Catholic	22	31	8	24	40	9	19	31	5	21	33	8	21	27	7
Jewish	3	6	-	4	8	-	2	4	-	5	10	-	2	3	-
Other	*	*	*	*	*	-	-	-	-	1	1	*	*	*	*
None	1	1	1	1	1	1	1	1	1	2	1	2	*	1	1
Unknown	3	3	3	1	1	1	5	4	6	3	3	4	3	3	3
TOTAL	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100

* Less than 1%.

DPW ANNUAL STATISTICAL REPORT

1937

WARD DISTRIBUTION

WARD	TOTAL			ADC			ATB			GPA			OAA		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro
1	364	356	8	116	114	2	9	9	-	81	78	3	158	155	3
2	327	308	19	98	92	6	10	8	2	117	113	4	102	95	7
3	568	405	163	145	103	42	10	6	4	248	182	66	165	114	51
4	536	270	266	107	33	74	9	5	4	199	90	109	221	142	79
5	584	163	421	147	31	116	12	2	10	214	73	141	211	57	154
6	678	449	229	217	125	92	13	7	6	174	107	67	274	210	64
7	553	259	294	189	58	131	12	8	4	107	41	66	245	152	93
8	766	656	110	206	157	49	15	12	3	140	121	19	405	366	39
9	633	561	72	144	116	28	11	10	1	101	81	20	377	354	23
10	622	313	309	193	76	117	19	7	12	154	66	88	256	164	92
11	635	210	425	150	20	130	9	2	7	186	65	121	290	123	167
12	798	572	226	215	133	82	31	17	14	186	136	50	366	286	80
13	743	635	108	167	139	28	9	6	3	145	129	16	422	361	61
14	903	165	738	266	28	238	18	4	14	219	35	184	400	98	302
15	1101	564	537	322	119	203	30	16	14	251	115	136	498	314	184
16	1318	433	885	392	82	310	57	20	37	267	53	214	602	278	324
17	1056	52	1004	262	4	258	33	1	32	337	14	323	424	33	391
18	893	381	512	236	76	160	34	11	23	244	106	138	379	188	191
19	928	526	402	289	144	145	24	16	8	252	139	113	363	227	136
20	700	684	16	163	159	4	24	23	1	150	146	4	363	356	7
21	532	370	162	139	94	45	8	5	3	135	88	47	250	183	67
22	528	232	296	114	40	74	14	4	10	176	62	114	224	126	98
23	351	226	125	80	54	26	5	2	3	90	46	44	176	124	52
24	354	349	5	93	93	-	2	2	-	71	66	5	188	188	-
25	279	205	74	85	66	19	5	2	3	45	32	13	144	105	39
26	430	423	7	111	110	1	20	20	-	66	66	-	233	227	6
27	663	597	66	102	91	11	19	18	1	58	47	11	484	441	43
28	101	100	1	9	9	-	-	-	-	3	3	-	89	88	1
County or Other State	102	92	10	3	3	-	2	2	-	2	1	1	95	86	9
TOTAL	18,046	10,556	7490	4760	2369	2391	464	245	219	4413	2301	2117	8404	5641	2763

DPW ANNUAL STATISTICAL REPORT

1937

PERCENTAGE ANALYSIS OF WARD DISTRIBUTION

Ward	TOTAL			ADC			ATB			GPA			OAA		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro
1	2	3	*	2	5	*	2	4	-	2	3	*	2	3	*
2	2	3	*	2	4	*	3	3	1	3	5	*	1	2	*
3	3	4	2	3	4	2	3	2	2	6	8	3	2	2	2
4	3	3	4	2	1	3	2	2	2	5	4	5	3	3	3
5	3	1	6	3	1	5	3	1	5	5	3	7	3	1	6
6	4	4	3	5	5	4	3	3	3	4	5	3	3	4	2
7	3	2	4	4	2	6	3	3	2	2	2	3	3	3	3
8	4	6	2	4	7	2	3	5	1	3	5	1	5	7	1
9	4	5	1	3	5	1	2	4	*	2	3	1	4	6	1
10	3	3	4	4	3	5	4	3	6	3	3	4	3	3	3
11	4	2	6	3	1	6	2	1	4	4	3	6	4	2	6
12	4	6	3	5	6	3	7	7	6	4	6	2	4	5	3
13	4	6	1	4	6	1	2	2	1	3	6	1	5	6	2
14	5	2	10	6	1	10	4	2	6	5	1	9	5	2	11
15	6	5	7	7	5	8	6	7	6	6	5	6	6	6	7
16	7	4	12	8	4	13	12	8	17	6	2	11	7	5	12
17	6	1	13	6	*	11	7	*	15	8	1	15	5	1	14
18	5	4	7	5	3	7	7	4	11	6	5	7	4	3	7
19	5	5	5	6	6	6	5	7	4	6	6	5	4	4	5
20	4	6	*	3	7	*	5	9	*	3	6	*	4	6	*
21	3	4	2	3	4	2	2	2	1	3	4	2	3	3	3
22	3	2	4	2	2	3	3	2	5	4	3	5	3	2	4
23	2	2	2	2	2	1	1	1	1	2	2	2	2	2	2
24	2	3	*	2	4	-	*	1	-	2	3	*	2	3	-
25	2	2	1	2	3	1	1	1	1	1	1	1	2	2	1
26	2	4	*	2	5	*	4	8	-	1	3	-	3	4	*
27	4	6	1	2	4	*	4	7	*	1	2	1	6	8	2
28	0.5	1	*	*	*	-	-	-	-	*	*	-	1	1	*
County or Other St.	0.5	1	*	*	*	-	*	1	-	*	*	*	1	1	*
TOTAL	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100

*Less than 1%.

ADC

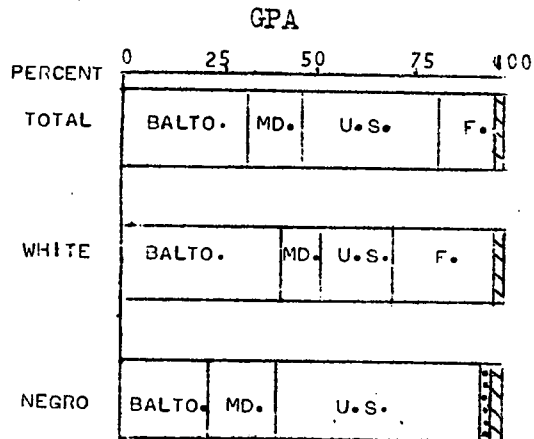
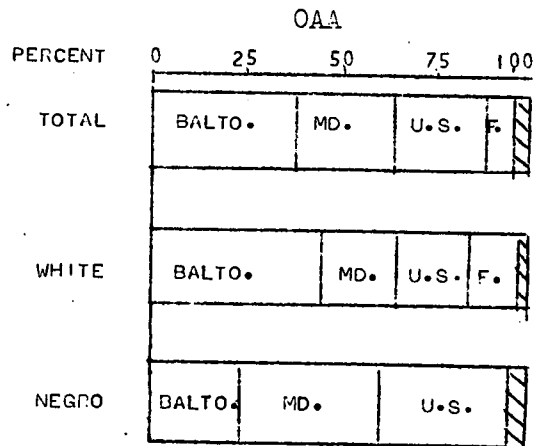
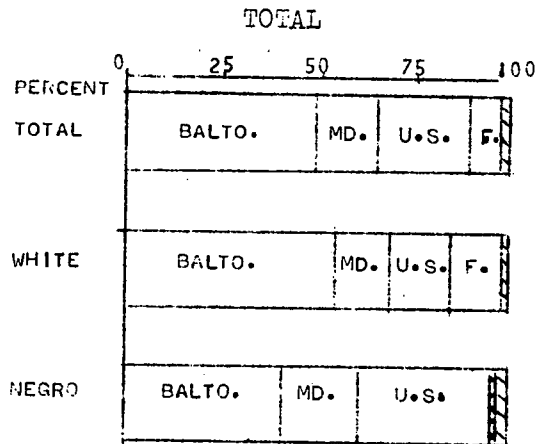
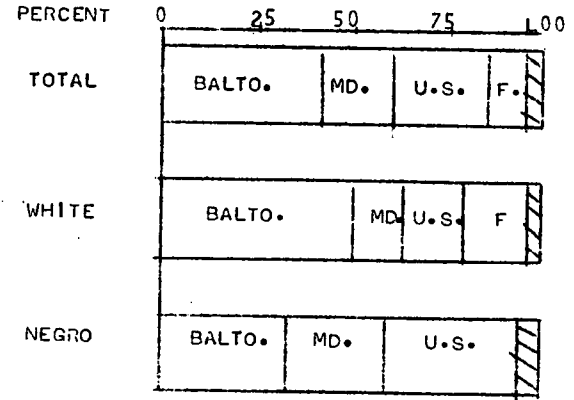
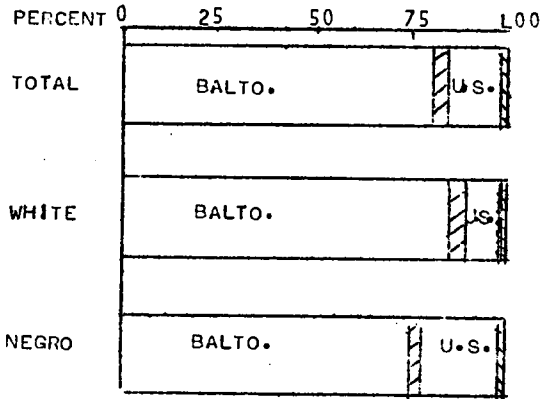
FIG. VIII

DPW ANNUAL STATISTICAL REPORT

1937

BIRTHPLACE

ATB



MD.



UNK.



FOREIGN

DPW ANNUAL STATISTICAL REPORT

1937

SUMMARY OF BIRTHPLACE

Birthplace	TOTAL			ADC ^a			ATB			GPA			OAA		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro
Baltimore	8795	5708	3087	3854	2041	1813	197	123	74	1467	969	498	3277	2575	702
Elsewhere-Maryland	3058	1532	1526	168	99	69	88	34	54	622	256	366	2180	1143	1037
SUB-TOTAL-Md.	11,853	7240	4613	4022	2140	1882	285	157	128	2089	1225	864	5457	3718	1739
Elsewhere- U. S.	4,338	1744	2594	685	196	489	115	39	76	1580	436	1144	1958	1073	885
SUB-TOTAL-U. S.	16,191	8984	7207	4707	2336	2371	400	196	204	3669	1661	2008	7415	4791	2624
Foreign Countries	1,348	1308	40	17	14	3	40	39	1	597	566	31	694	689	5
Unknown	507	264	243	36	19	17	24	10	14	152	74	78	295	161	134
TOTAL	18,046	10,556	7490	4760	2369	2391	464	245	219	4418	2301	2117	8404	5641	2763

PERCENTAGE ANALYSIS OF SUMMARY OF BIRTHPLACE

Birthplace	TOTAL			ADC ^a			ATB			GPA			OAA		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro
Baltimore	49	54	41	81	86	76	42	50	34	33	42	24	39	46	25
Elsewhere-Maryland	17	15	20	4	4	3	19	14	25	14	11	17	26	20	38
SUB-TOTAL- Maryland	66	69	61	85	90	79	61	64	59	47	53	41	65	66	63
Elsewhere-U. S.	24	17	35	14	8	20	25	16	35	36	19	54	23	19	32
SUB-TOTAL- U. S.	90	86	96	99	98	99	86	80	94	83	72	95	88	85	95
Foreign Countries	7	12	1	*	1	*	9	16	*	14	25	2	8	12	*
Unknown	3	2	3	1	1	1	5	4	6	3	3	3	4	3	5
TOTAL	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100

^aBirthplace of oldest ADC child.

* Less than 1%.

DPW ANNUAL STATISTICAL REPORT

1937

BIRTHPLACE: BALTIMORE, COUNTIES OF MARYLAND

Birthplace	TOTAL			ADC			ATB			GPA			OAA		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro
Baltimore	8795	5708	3087	3854	2041	1813	197	123	74	1467	969	498	3277	2575	702
Alleghany	54	50	4	2	2	-	-	-	-	18	15	3	34	33	1
Anne Arundel	322	99	223	21	6	15	9	3	6	61	13	48	231	77	154
Baltimore County	494	351	143	31	21	10	10	7	3	79	48	31	374	275	99
Calvert	207	41	166	7	1	6	5	-	5	44	7	37	151	33	118
Caroline	22	8	14	2	1	1	-	-	-	3	2	1	17	5	12
Carroll	248	211	37	8	8	-	6	4	2	39	30	9	195	169	26
Cecil	27	22	5	2	1	1	1	1	-	4	3	1	20	17	3
Charles	87	11	76	5	2	3	5	-	5	27	2	25	50	7	43
Dorchester	192	67	125	4	2	2	10	2	8	36	12	24	142	51	91
Frederick	139	99	40	10	8	2	5	3	2	28	16	12	96	72	24
Garrett	4	4	-	2	2	-	-	-	-	-	-	-	2	2	-
Harford	176	111	65	9	8	1	7	2	5	35	13	22	125	88	37
Howard	179	87	92	14	5	9	2	1	1	44	20	24	119	61	58
Kent	80	29	51	1	1	-	-	-	-	20	4	16	59	24	35
Montgomery	45	13	32	1	-	1	1	1	-	15	1	14	28	11	17
Prince George's	119	44	75	3	1	2	3	1	2	29	9	20	84	33	51
Queen Anne's	81	32	49	4	4	-	3	2	1	12	4	8	62	22	40
St. Mary's	185	41	144	4	1	3	9	2	7	33	5	28	139	33	106
Somerset	119	62	57	16	9	7	1	-	1	21	10	11	81	43	38
Talbot	105	49	56	7	6	1	3	1	2	20	11	9	75	31	44
Washington	49	40	9	4	4	-	3	2	1	14	13	1	28	21	7
Wicomico	51	35	16	-	-	-	3	2	1	11	3	8	37	30	7
Worcester	47	9	38	2	-	2	2	-	2	12	4	8	31	5	26
Unknown Co.-Md.	26	17	9	9	6	3	-	-	-	17	11	6	-	-	-
Elsewhere-Md.	3058	1532	1526	168	99	69	88	34	54	622	256	366	2180	1143	1037
TOTAL-Maryland	11,853	7243	4613	4022	2140	1882	285	157	128	2089	1225	864	5457	3718	1739

DPW ANNUAL STATISTICAL REPORT

1937

BIRTHPLACE: STATES OF UNITED STATES

Birthplace	TOTAL			ADC			ATB			GPA			OAA		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro
Alabama	41	12	29	4	2	2	-	-	-	22	6	16	15	4	11
Arkansas	4	3	1	1	1	-	-	-	-	2	2	-	1	-	1
California	10	6	4	2	2	-	-	-	-	4	1	3	4	3	1
Colorado	2	2	-	-	-	-	-	-	-	2	2	-	-	-	-
Connecticut	10	8	2	2	1	1	-	-	-	2	1	1	6	6	-
Delaware	55	40	15	5	3	2	2	-	2	9	2	7	39	35	4
District of Columbia	154	86	68	28	13	15	2	1	1	49	14	35	75	58	17
Florida	39	9	30	11	4	7	2	-	2	15	3	12	11	2	9
Georgia	112	23	89	17	1	16	6	1	5	59	12	47	30	9	21
Illinois	27	24	3	4	3	1	-	-	-	9	8	1	14	13	1
Indiana	21	18	3	2	2	-	1	1	-	7	4	3	11	11	-
Iowa	11	9	2	-	-	-	-	-	-	3	1	2	8	8	-
Kansas	3	1	2	-	-	-	1	-	1	1	-	1	1	1	-
Kentucky	39	19	20	1	1	-	3	2	1	18	7	11	17	9	8
Louisiana	17	7	10	1	1	-	-	-	-	9	2	7	7	4	3
Maine	9	8	1	-	-	-	-	-	-	2	1	1	7	7	-
Massachusetts	37	31	6	3	2	1	-	-	-	16	11	5	18	18	-
Michigan	16	15	1	3	3	-	1	1	-	7	6	1	5	5	-
Minnesota	7	7	-	-	-	-	-	-	-	4	4	-	3	3	-
Mississippi	12	9	3	1	1	-	-	-	-	5	3	2	6	5	1
Missouri	12	9	3	1	1	-	-	-	-	6	4	2	5	4	1
Montana	2	-	2	-	-	-	-	-	-	2	-	2	-	-	-
Nebraska	1	1	-	-	-	-	1	1	-	-	-	-	-	-	-
New Hampshire	6	5	1	-	-	-	2	1	1	3	3	-	1	1	-
New Jersey	67	51	16	18	7	11	2	1	1	13	11	2	34	32	2
New Mexico	1	1	-	-	-	-	-	-	-	-	-	-	1	1	-
New York	151	137	14	20	13	7	3	3	-	38	32	6	90	89	1
North Carolina	584	87	497	141	13	128	13	1	12	274	30	244	156	43	113
North Dakota	3	2	1	-	-	-	-	-	-	3	2	1	-	-	-
Ohio	49	40	9	9	6	3	-	-	-	15	10	5	25	24	1
Oklahoma	4	2	2	1	1	-	-	-	-	1	-	1	2	1	1

DPW ANNUAL STATISTICAL REPORT

1937

BIRTHPLACE: STATES OF UNITED STATES -(Cont'd)

Birthplace	TOTAL			ADC			ATB			GPA			OAA		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro
Pennsylvania	461	382	79	59	28	31	10	7	3	99	77	22	293	270	23
Rhode Island	3	2	1	1	-	1	-	-	-	-	-	-	2	2	-
South Carolina	307	30	277	73	6	67	9	2	7	173	11	162	52	11	41
South Dakota	1	-	1	-	-	-	-	-	-	1	-	1	-	-	-
Tennessee	17	12	5	2	2	-	1	1	-	8	3	5	6	6	-
Texas	14	9	5	-	-	-	-	-	-	7	6	1	7	3	4
Vermont	3	3	-	1	1	-	-	-	-	-	-	-	2	2	-
Virginia	1885	533	1352	248	59	189	51	13	38	650	133	517	936	328	608
West Virginia	132	94	38	24	17	7	5	3	2	37	21	16	66	53	13
Wisconsin	6	6	-	1	1	-	-	-	-	3	3	-	2	2	-
Philippine Islands	2	-	2	-	-	-	-	-	-	2	-	2	-	-	-
Puerto Rico	1	1	-	1	1	-	-	-	-	-	-	-	-	-	-
Elsewhere- U. S.	4338	1744	2594	685	196	489	115	39	76	1580	436	1144	1958	1073	885

DPW ANNUAL STATISTICAL REPORT

1937

BIRTHPLACE: FOREIGN COUNTRIES

Birthplace	TOTAL			ADC			ATB			GPA			OAA		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro
Africa	1	-	1	-	-	-	-	-	-	-	-	-	1	-	1
Australia	2	2	-	-	-	-	-	-	-	-	-	-	2	2	-
Austria	45	45	-	-	-	-	1	1	-	21	21	-	23	23	-
Belgium	1	1	-	-	-	-	1	1	-	-	-	-	-	-	-
Bulgaria	2	2	-	-	-	-	-	-	-	2	2	-	-	-	-
Canada	20	20	-	1	-	1	-	-	-	6	6	-	13	13	-
Czecho-Slovakia	36	35	1	-	-	-	-	-	-	10	10	-	26	26	-
Cuba	1	-	1	-	-	-	1	-	1	-	-	-	-	-	-
Danish West Indies	1	-	1	-	-	-	-	-	-	-	-	-	1	-	1
Denmark	5	5	-	-	-	-	-	-	-	2	2	-	3	3	-
England	68	67	1	1	1	-	1	1	-	21	20	1	45	45	-
Estonia	1	1	-	-	-	-	-	-	-	1	1	-	-	-	-
France	10	10	-	-	-	-	-	-	-	3	3	-	7	7	-
Germany	320	320	-	2	2	-	13	13	-	43	43	-	262	262	-
Greece	15	15	-	-	-	-	-	-	-	12	12	-	3	3	-
Holland	1	1	-	-	-	-	-	-	-	-	-	-	1	1	-
Hungary	20	20	-	1	1	-	-	-	-	9	9	-	10	10	-
India	2	-	2	1	-	1	-	-	-	1	-	1	-	-	-
Ireland	103	103	-	1	1	-	-	-	-	25	25	-	77	77	-
Italy	115	115	-	3	3	-	4	4	-	88	88	-	20	20	-
Jamaica	4	-	4	1	-	1	-	-	-	3	-	3	-	-	-
Jugo-Slavia	10	10	-	-	-	-	-	-	-	10	10	-	-	-	-
Latvia	4	4	-	-	-	-	-	-	-	4	4	-	-	-	-
Lithuania	38	38	-	-	-	-	3	3	-	18	18	-	17	17	-
Mexico	2	-	2	-	-	-	-	-	-	1	-	1	1	-	1
Norway	7	7	-	-	-	-	-	-	-	2	2	-	5	5	-
Palestine	2	2	-	-	-	-	-	-	-	2	2	-	-	-	-
Panama	1	1	-	1	1	-	-	-	-	-	-	-	-	-	-
Poland	166	166	-	1	1	-	8	8	-	106	106	-	51	51	-

DPW ANNUAL STATISTICAL REPORT

1937

BIRTHPLACE: FOREIGN COUNTRIES--(Cont'd)

Birthplace	TOTAL			ADC			ATB			GPA			OAA		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro
Portugal	3	1	2	-	-	-	-	-	-	2	-	2	1	1	-
Roumania	9	9	-	1	1	-	-	-	-	6	6	-	2	2	-
Russia	265	265	-	2	2	-	6	6	-	161	161	-	96	96	-
Scotland	17	17	-	1	1	-	-	-	-	4	4	-	12	12	-
South America	6	4	2	-	-	-	-	-	-	3	1	2	3	3	-
Spain	4	3	1	-	-	-	-	-	-	3	3	-	1	-	1
Sweden	5	5	-	-	-	-	-	-	-	1	1	-	4	4	-
Switzerland	6	6	-	-	-	-	-	-	-	1	1	-	5	5	-
Syria	1	1	-	-	-	-	1	1	-	-	-	-	-	-	-
Turkey	1	1	-	-	-	-	-	-	-	1	1	-	-	-	-
Virgin Islands	1	-	1	-	-	-	-	-	-	1	-	1	-	-	-
Wales	5	5	-	-	-	-	1	1	-	3	3	-	1	1	-
West Indies	22	1	21	-	-	-	-	-	-	21	1	20	1	-	1
TOTAL- Foreign	1348	1308	40	17	14	3	40	39	1	597	566	31	694	689	5
Unknown	507	264	243	36	19	17	24	10	14	152	74	78	295	161	134
GRAND TOTAL	18,045	10,556	7490	4760	2369	2391	454	245	219	4418	2301	2117	8404	5641	2763

DPW ANNUAL STATISTICAL REPORT

1937

YEAR HEAD OF GPA FAMILY CAME TO BALTIMORE
BY CLASSIFICATION AND COLOR

Year to Baltimore	TOTAL			EMPLOYABLE			LIGHT WORK			UNEMPLOYABLE			UNCLASSIFIED		
	Total	White	Negro	Total	White	Negro	Tot. White	Neg.		Tot. White	Neg.		Tot. White	Neg.	
Prior to 1900	431	197	234	32	20	12	19	4	15	380	173	207			
1900 before 1910	476	208	268	60	34	26	31	13	18	385	161	224			
1910 before 1920	645	319	326	138	91	47	72	26	46	435	202	233			
1920 before 1930	786	298	488	267	120	147	55	24	31	464	154	310			
1930 before 1937	391	190	201	144	67	77	24	11	13	223	112	111			
Unknown	268	139	129	69	44	25	7	6	1	44	17	27	148	72	76
TOTAL	2997	1351	1646	710	376	334	208	84	124	1931	819	1112	148	72	76

PERCENTAGE ANALYSIS OF YEAR HEAD OF GPA FAMILY CAME TO BALTIMORE

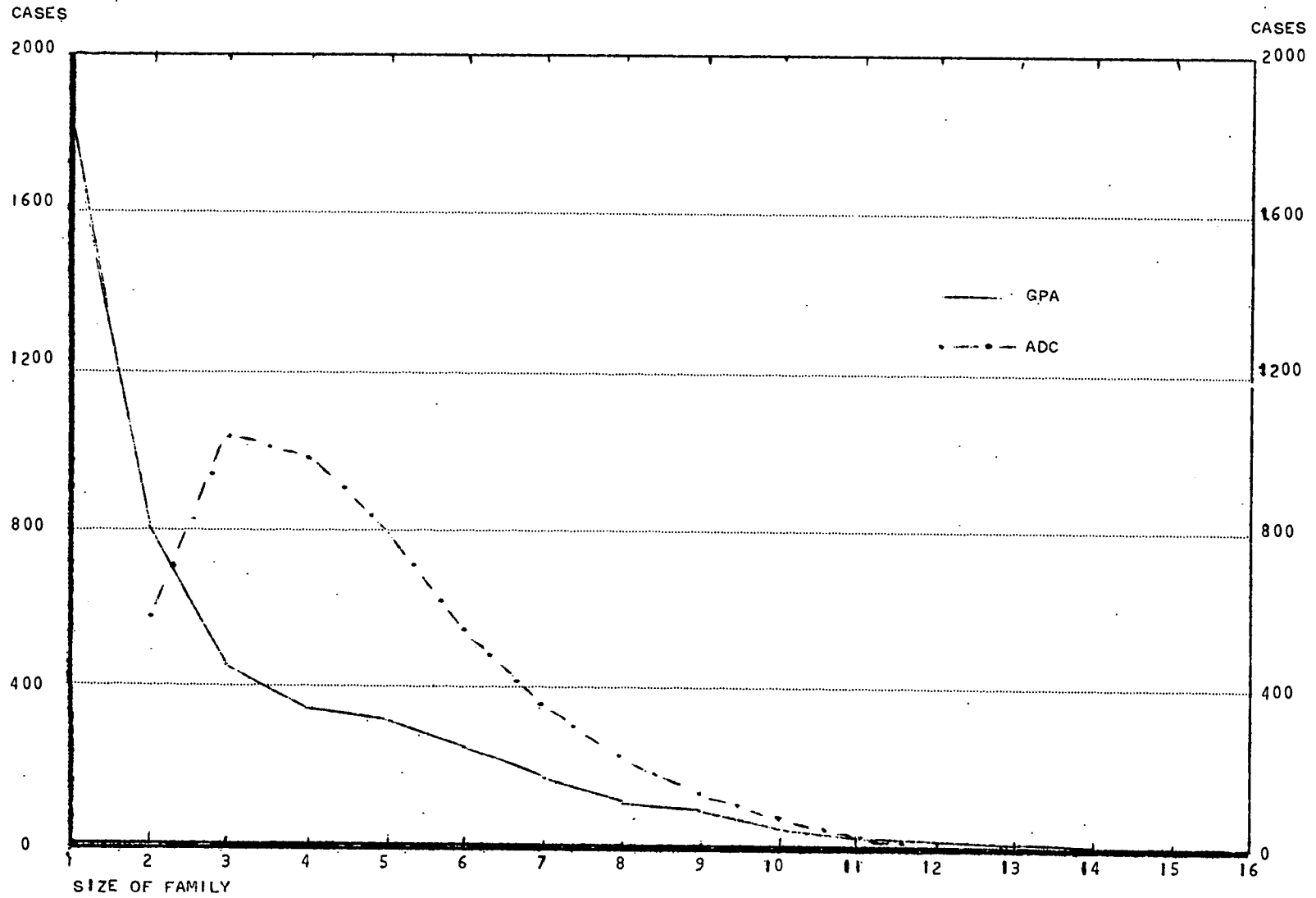
Year to Baltimore	TOTAL			EMPLOYABLE			LIGHT WORK			UNEMPLOYABLE			UNCLASSIFIED		
	Total	White	Negro	Total	White	Negro	Total	White	Neg.	Total	White	Neg.	Tot. White	Neg.	
Prior to 1900	14	15	14	5	5	4	9	5	12	20	21	19			
1900 before 1910	16	15	16	8	9	8	15	15	15	20	19	20			
1910 before 1920	22	24	20	19	24	14	35	31	37	22	25	21			
1920 before 1930	26	22	30	38	32	44	26	29	25	24	19	28			
1930 before 1937	13	14	12	20	18	23	12	13	10	12	14	10			
Unknown	9	10	8	10	12	7	3	7	1	2	2	2	100	100	100
TOTAL	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100

FIG. IX

DPW ANNUAL STATISTICAL REPORT

1937

SIZE OF ADC AND GPA RELIEF FAMILIES



1937

SIZE OF ADC AND GPA FAMILIES RECEIVING GRANTS

Size Of Family	TOTAL			ADC			GPA		
	Total	White	Negro	Total	White	Negro	Total	White	Negro
1	1821	832	989	-	-	-	1821	832	989
2	1378	675	703	565	234	331	813	441	372
3	1480	771	709	1038	524	514	442	247	195
4	1321	703	618	979	502	477	342	201	141
5	1113	605	508	795	411	384	318	194	124
6	784	436	348	543	287	256	241	149	92
7	520	277	243	357	176	181	163	101	62
8	332	163	169	218	107	111	114	56	58
9	207	114	93	124	69	55	83	45	38
10	107	47	60	67	30	37	40	17	23
11	38	20	18	21	12	9	17	8	9
12	29	9	20	16	4	12	13	5	8
13	6	2	4	3	-	3	3	2	1
14	1	-	1	1	-	1	-	-	-
15	3	1	2	1	-	1	2	1	1
16	1	1	-	1	1	-	-	-	-
TOTAL	9141	4656	4485	4729	2357	2372	4412	2299	2113
Total Persons	34,718	18,072	16,646	21,929	11,030	10,899	12,789	7042	5747
Average Size	3.8	3.9	3.7	4.6	4.7	4.6	2.9	3.1	2.7

PERCENTAGE ANALYSIS OF SIZE OF ADC AND GPA FAMILIES

Size Of Family	TOTAL			ADC			GPA		
	Total	White	Negro	Total	White	Negro	Total	White	Negro
1	20	18	22	-	-	-	41	36	47
2	15	14	16	12	10	14	19	19	18
3	16	17	16	22	22	22	10	11	9
4	15	15	14	21	21	20	8	9	7
5	12	13	11	17	18	16	7	9	6
6	9	9	8	11	12	11	5	7	4
7	6	6	6	8	7	8	4	4	3
8	4	4	4	5	5	5	3	2	3
9	2	3	2	3	3	2	2	2	2
10	1	1	1	1	1	1	1	1	1
11	*	*	*	*	1	*	*	*	*
12	*	*	*	*	*	1	*	*	*
13	*	*	*	*	-	*	*	*	*
14	*	-	*	*	-	*	-	-	-
15	*	*	*	*	-	*	*	*	*
16	*	*	-	*	*	-	-	-	-
TOTAL	100	100	100	100	100	100	100	100	100

*Less than 1%.

1937

NUMBER OF CHILDREN BY COLOR IN TOTAL CASES

RECEIVING A.D.C. GRANTS^a

Number Of Children	TOTAL		WHITE		NEGRO	
	Cases	Children	Cases	Children	Cases	Children
1	1310	1310	626	626	684	684
2	1271	2542	671	1342	600	1200
3	905	2715	457	1371	448	1344
4	592	2368	296	1184	296	1184
5	332	1660	166	830	166	830
6	181	1086	82	492	99	594
7	90	630	42	294	48	336
8	32	256	13	104	19	152
9	12	108	3	27	9	81
10	4	40	1	10	3	30
TOTAL	4729	12,715	2357	6280	2372	6435

^aNumber of children in cases at end of year or in last month active.

PERCENTAGE ANALYSIS OF NUMBER OF CHILDREN BY COLOR IN TOTAL CASES

RECEIVING ADC GRANTS

Number Of Children	TOTAL		WHITE		NEGRO	
	Cases	Children	Cases	Children	Cases	Children
1	28	10	27	10	29	11
2	27	20	28	21	25	19
3	19	21	19	22	19	21
4	12	19	13	19	13	19
5	7	13	7	13	7	13
6	4	9	3	8	4	9
7	2	5	2	5	2	5
8	1	2	1	2	1	2
9	*	1	*	*	*	1
10	*	*	*	*	*	*
TOTAL	100	100	100	100	100	100

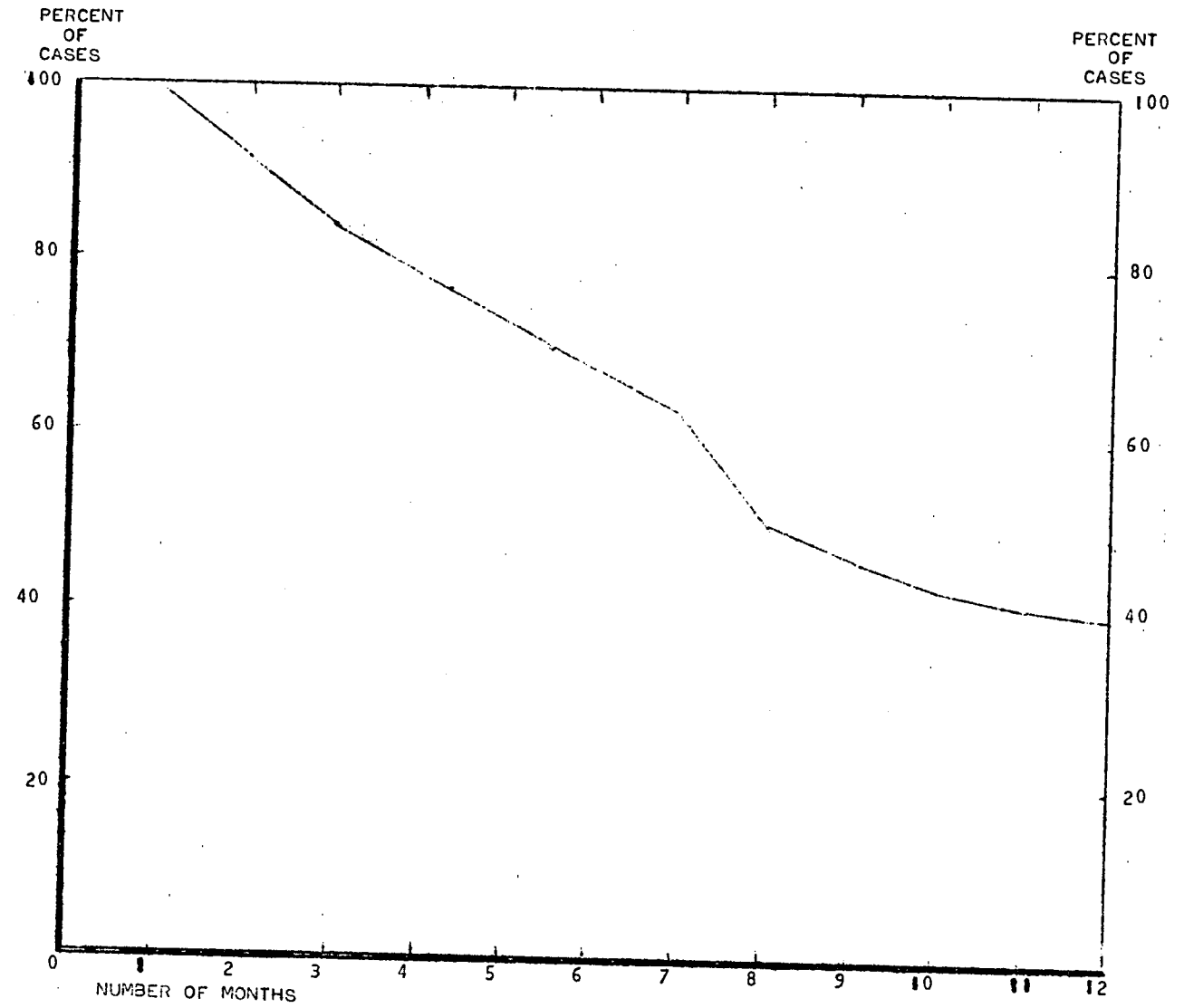
*Less than 1%.

DPW ANNUAL STATISTICAL REPORT

FIG. X

1937

NUMBER OF MONTHS CASES RECEIVED RELIEF



DPW ANNUAL STATISTICAL REPORT

1937

NUMBER OF MONTHS CASES RECEIVED RELIEF

Number of Months	TOTAL	ADC	ATB	GPA	OAA
0	123	31	4	6	82
1	1441	338	22	649	432
2	1345	313	15	572	445
3	1137	286	19	422	410
4	841	223	14	309	295
5	838	220	9	271	338
6	837	246	10	247	334
7	2411	261	6	1942	202
8	671	177	7	-	487
9	521	381	15	-	125
10	353	186	33	-	134
11	322	171	33	-	118
12	7206	1927	277	-	5002
TOTAL	18,046	4760	464	4418	8404

PERCENTAGE ANALYSIS OF NUMBER OF MONTHS CASES RECEIVED RELIEF

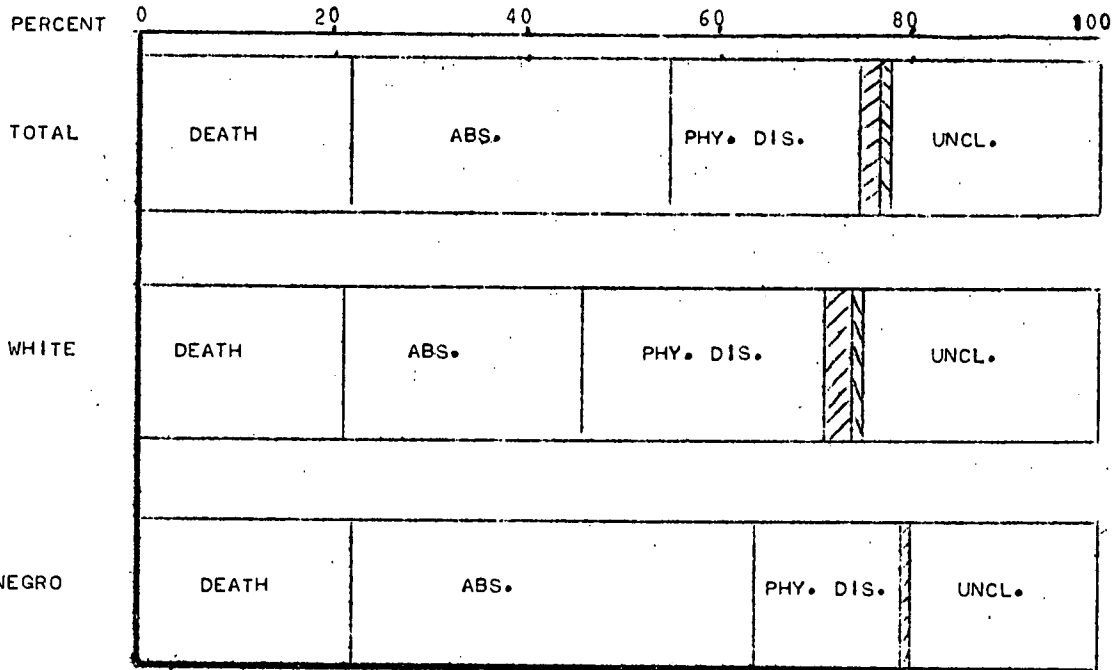
Number of Months	Total	ADC	ATB	GPA	OAA
0	1	1	1	*	1
1	8	7	5	15	5
2	7	7	3	13	5
3	6	6	4	9	5
4	5	5	3	7	4
5	5	5	2	6	4
6	5	5	2	6	4
7	13	5	1	44	2
8	4	4	2	-	6
9	3	8	3	-	1
10	2	4	7	-	2
11	1	3	7	-	1
12	40	40	60	-	60
TOTAL	100	100	100	100	100

* Less than 1%.

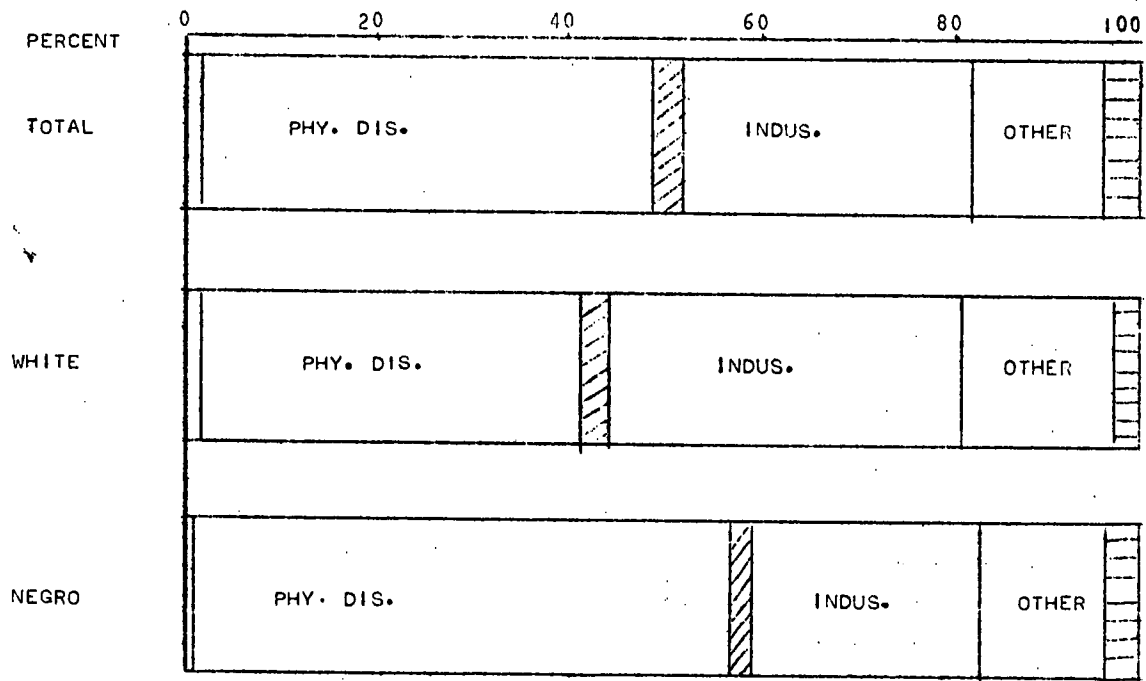
FIG. XI




1937
PROBLEMS

ADC



ADA



 MENTAL DISABILITY
  OTHER
  UNCL.

DPW ANNUAL STATISTICAL REPORT

1937

PROBLEMS - SUMMARY

Problem:	TOTAL			ADC			ATB			GPA			OAA		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro
Death	1029	499	530	1029	499	530	-	-	-	-	-	-	-	-	-
Continued Absence From Home	1673	635	1038	1593	585	1008	-	-	-	80	50	30	-	-	-
Physical Disability	3487	1733	1754	951	598	353	464	245	219	2072	890	1182	-	-	-
Mental Disability	213	153	60	100	75	25	-	-	-	113	78	35	-	-	-
Industrial	1348	839	509	-	-	-	-	-	-	1348	839	509	-	-	-
Other Problems	9081	6032	3049	28	22	6	-	-	-	649	369	280	8404	5641	2763
Unclassified	1215	665	550	1059 ^a	590	469	-	-	-	156	75	81	-	-	-
TOTAL	18,046	10,556	7490	4760	2369	2391	464	245	219	4418	2301	2117	8404	5641	2763

PERCENTAGE ANALYSIS OF PROBLEMS

Problem	TOTAL			ADC			ATB			GPA			OAA		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Neg.	Total	White	Negro
Death	6	5	7	22	21	22	-	-	-	-	-	-	-	-	-
Continued Absence From Home	9	6	14	33	25	42	-	-	-	2	2	1	-	-	-
Physical Disability	19	17	23	20	25	15	100	100	100	47	39	56	-	-	-
Mental Disability	1	1	1	2	3	1	-	-	-	3	3	2	-	-	-
Industrial	8	8	7	-	-	-	-	-	-	30	37	24	-	-	-
Other Problems	50	57	41	1	1	*	-	-	-	14	16	13	100	100	100
Unclassified	7	6	7	22 ^a	25	20	-	-	-	4	3	4	-	-	-
TOTAL	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100

* Less than 1%.

^aClosed prior to coding of problems in October 1937.

DPW ANNUAL STATISTICAL REPORT

1937

PROBLEMS

Problems	TOTAL			ADC			ATB			GPA		
	Total	White	Negro	Total	White	Negro	Tot. White	Neg.	Tot. White	Neg.	Tot. White	Neg.
<u>Death</u>												
Father	972	481	491	972	481	491	-	-	-	-	-	-
Mother	20	12	8	20	12	8	-	-	-	-	-	-
Both	37	6	31	37	6	31	-	-	-	-	-	-
SUB-TOTAL	1029	499	530	1029	499	530						
<u>Continued Absence From Home</u>												
Desertion	960	362	598	899	323	576				61	39	22
Divorce	73	60	13	73	60	13						
Separation - Court Order	71	52	19	71	52	19						
Separation - Voluntary	101	62	39	101	62	39						
Imprisonment	90	46	44	74	37	37				16	9	7
Illegitimacy	374	51	323	374	51	323						
Other	4	2	2	1	-	1				3	2	1
SUB-TOTAL	1673	635	1038	1593	585	1008				80	50	30
<u>Physical Disabilities</u>												
Alcoholism	19	15	4	16	13	3				3	2	1
Anemia	11	5	6							11	5	6
Arthritis	282	128	154	87	53	34				195	75	120
Blind	563	298	265	32	19	13	464	245	219	67	34	33
Blood Circulatory Disturbances	235	69	166	53	21	32				182	48	134
Cancer	29	17	12	4	2	2				25	15	10
Cardiac	490	226	264	159	95	64				331	131	200
Diabetes	85	36	49	9	3	6				76	33	43
Endocrine Disturbance	4	2	2							4	2	2
Epilepsy	31	14	17	13	4	9				18	10	8
Gall bladder Disturbance	22	18	4							22	18	4
Gonorrhea	9	3	6							9	3	6
Hearing impaired	18	12	6	6	5	1				12	7	5
Hernia	103	68	35	30	21	9				73	47	26
Maternity	7	2	5							7	2	5

DPW ANNUAL STATISTICAL REPORT

1937

PROBLEMS--(Cont'd)

Problems	TOTAL			ADC			ATB			GPA		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro
<u>Physical Disability--(Cont'd)</u>												
Nephritis	24	12	12							24	12	12
Nutritional disturbance	13	9	4							13	9	4
Paralyzed or crippled	293	134	159	82	51	31				211	83	128
Resp'tory system, dis. other than T.B.	95	48	47	35	20	15				60	28	32
Stomach ulcers	28	26	2							28	26	2
Syphilis	169	33	136	42	14	28				127	19	108
Temporary illness	50	33	17							50	33	17
Tuberculosis	273	173	100	163	119	44				110	54	56
Other acute illness	185	97	88	40	36	4				145	61	84
Other chronic illness	449	255	194	180	122	58				269	133	136
SUB-TOTAL	3487	1733	1754	951	598	353	464	245	219	2072	890	1182
<u>Mental Disability</u>												
Mental defect diagnosed	63	47	16	34	29	5				29	18	11
" " suspected	25	17	8							25	17	8
" disorder diagnosed	84	60	24	45	31	14				39	29	10
" " suspected	41	29	12	21	15	6				20	14	6
SUB-TOTAL	213	153	60	100	75	25				113	78	35
<u>Industrial</u>												
Budget Above wage of chief earner	9	4	5							9	4	5
Disability from indus. accid. or occup. dis.	6	4	2							6	4	2
Part time work	38	15	23							38	15	23
Unemployment	1135	713	422							1135	713	422
Vocational inefficiency	160	103	57							160	103	57
SUB-TOTAL	1348	839	509							1348	839	509

DPW ANNUAL STATISTICAL REPORT

1937

PROBLEMS--(Cont'd)

Problems	TOTAL			ADC			ATB			GPA			OAA		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro
<u>Other Problems</u>															
Delinquency	3	-	3							3	-	3			
Dependent Person	6	3	3							6	3	3			
Insufficient Income	11	5	6							11	5	6			
Old Age (65 or over)	8957	5971	2986	28	22	6				525	308	217	8404	5641	2763
Personality Problem	7	6	1							7	6	1			
Woman with dep. children	97	47	50							97	47	50			
SUB-TOTAL	9081	6032	3049	28	22	6				649	369	280	8404	5641	2763
Unclassified	1215	665	550	1059	590	469				156	75	81			
GRAND TOTAL	18,046	10,556	7490	4760	2369	2391	464	245	219	4418	2301	2117	8404	5641	2763

DPW ANNUAL STATISTICAL REPORT

1937

INDUSTRY OF HEAD OF EMPLOYABLE AND LIGHT WORK GPA CASES

Industry	TOTAL			EMPLOYABLE			LIGHT WORK		
	Total	White	Negro	Total	White	Negro	Total	White	Negro
Agriculture	22	12	10	18	12	6	4		4
Building and Construction	220	151	69	197	136	61	23	15	8
Chemical	49	8	41	43	7	36	6	1	5
Cigars and Tobacco	1	1					1	1	
Clay, Glass and Stone	41	23	18	33	16	17	8	7	1
Clothing	26	19	7	24	19	5	2		2
Domestic and Personal Service	220	64	156	108	36	72	112	28	84
Food	84	55	29	71	47	24	13	8	5
Iron and Steel	190	137	53	170	120	50	20	17	3
Leather	5	5		3	3		2	2	
Lumber	10	7	3	9	6	3	1	1	
Mining	3	3		1	1		2	2	
Miscellaneous Manufacturing	35	28	7	28	22	6	7	6	1
Other Metals	43	32	16	41	27	14	7	5	2
Paper, Printing Industry	13	9	4	11	8	3	2	1	1
Professional Service	30	13	17	20	9	11	10	4	6
Public Service	27	24	3	21	19	2	6	5	1
Textiles	13	12	1	9	8	1	4	4	
Transportation and Communication	190	120	70	150	100	50	40	20	20
Trade	194	135	59	151	103	48	43	32	11
Unknown	7	32	45	69	29	40	8	3	5
None	9	7	2	3	3		6	4	2
TOTAL	1507	897	610	1180	731	449	327	166	161

GPA ANNUAL STATISTICAL REPORT

1937

PERCENTAGE ANALYSIS OF INDUSTRY OF HEAD OF EMPLOYABLE AND LIGHT WORK GPA CASES

Industry	TOTAL			EMPLOYABLE			LIGHT WORK		
	Total	White	Negro	Total	White	Negro	Total	White	Negro
Agriculture	1	1	2	1	2	1	1	-	2
Building and Construction	15	17	11	17	19	14	7	9	5
Chemical	3	1	7	4	1	8	2	1	3
Cigars and Tobacco	*	*	-	-	-	-	*	1	-
Clay, Glass and Stone	3	3	3	3	2	4	2.5	4	1
Clothing	1	2	1	2	3	1	1	-	1
Domestic and Personal Service	15	7	26	9	5	16	34	17	52
Food	6	6	5	6	6	5	4	5	3
Iron and Steel	13	15	9	14	17	11	6	10	2
Leather	*	1	-	*	*	-	1	1	-
Lumber	1	1	*	1	1	1	*	1	-
Mining	*	*	-	*	*	-	1	1	-
Miscellaneous Manufacturing	2	3	1	2	3	2	2	4	1
Other Metals	3	3	3	3	3	3	2	3	1
Paper, Printing Industry	1	1	1	1	1	1	1	1	1
Professional Service	2	1	3	2	1	2	3	2	4
Public Service	1	3	*	2	3	*	2	3	1
Textiles	1	1	*	1	1	*	1	2	-
Transportation and Communication	13	14	11	13	14	11	12	12	12
Trade	13	15	10	13	14	11	13	19	7
Unknown	5	4	7	6	4	9	2.5	2	3
None	1	1	*	*	*	-	2	2	1
TOTAL	100	100	100	100	100	100	100	100	100

*Less than 1%.

DPW ANNUAL STATISTICAL REPORT

1937

REASONS FOR CLOSINGS

REASON	TOTAL			ADC			ATB			GPA			OAA		
	Total	White	Negro	Total	White	Neg.	Tot.	White	Neg.	Tot.	White	Neg.	Tot.	White	Neg.
1. Bonus received	1	1		1	1										
2a. Placed by court	4	4		4	4										
b. " in institution	107	68	39	14	9	5	2	2		37	18	19	54	39	15
c. " with relatives	6	2	4	6	2	4									
d. " out of home	14	8	6	13	8	5				1		1			
e. " by private agency	4	4		4	4										
3. Death	620	396	224	18	5	13	22	10	12	31	16	15	549	365	184
4. Duplication	3		3	1		1				2		2			
5. Employment history	26	17	9	24	15	9				2	2				
6. Employment secured in priv. ind.	399	301	98	177	136	41	3	3		208	152	56	11	10	1
7. Financial adjustment	112	81	31	73	53	20	1	1		32	21	11	6	6	
8. Illegitimacy	110	14	96	110	14	96									
9. Ineligible under desertion req.	7	3	4	7	3	4									
10. " " mental incapacity	1	1								1	1				
11. " " physical "	7	1	6	4		4				3	1	2			
12. Insurance adjustment	10	7	3	6	5	1				3	1	2	1	1	
13. Legal responsibility	38	21	17	29	14	15				9	7	2			
14. Maturity	73	36	37	73	36	37									
15. Misrepresentation	234	138	96	160	99	61				70	35	35	4	4	
16. Moved or unable to locate	70	39	31	36	23	13				20	8	12	14	8	6
17. Not proper relationship	22	1	21	22	1	21									
18. Non-residence	14	9	5	1		1	1	1		10	7	3	2	1	1
19. Relatives assumed care	120	89	31	85	56	29	7	7		16	14	2	12	12	
20. Standards of health and care	1		1							1		1			
21. WPA placement	330	213	117	35	28	7				294	184	110	1	1	
22. By request	27	16	11	15	9	6	2	1	1	8	4	4	2	2	
23. Income sufficient	201	133	68	160	104	56	8	5	3	21	14	7	12	10	2
24. Federal projects other than WPA	7	4	3	3	1	2				2	1	1			
25. Refused to sign application blank	2	1	1	1		1	1	1							
26. Opened in error	5	4	1	1		1				2	2		2	2	
27. Employment refused	28	5	23	3		3				25	5	20			

DPW ANNUAL STATISTICAL REPORT

1937

REASONS FOR CLOSINGS--(Cont'd)

Reason	TOTAL			ADC			ATB			GPA			OAA		
	Total	White	Negro	Total	White	Negro	Total	White	Neg.	Total	White	Neg.	Tot.	White	Neg.
28. Refusal of DPW plan	82	26	56	46	12	34	1	1		32	10	22	3	3	
29. " to assign ins. or prop.	33	29	4										33	29	4
30. Age (not 65)	23	4	19										23	4	19
31. Case Combination	5	2	3	2	1	1				3	1	2			
32. Resources available	18	6	12	1	1					15	3	12	2	2	
33. Citizenship	3	3											3	3	
34. Transferred to another type of assistance	423	222	201	11	6	5	60	42	18	352	174	178			
35. Referred to another agency	6	4	2	1	1					5	3	2			
36. Imprisonment	3	1	2							3	1	2			
37. Practical vision	6	5	1				6	5	1						
38. Change of payee	16	10	6	16	10	6									
TOTAL	3219	1927	1292	1163	661	502	114	79	35	1208	685	523	734	502	232

AID TO THE AGED OR BLIND

31

Agency..... Type of aid.....
 Street..... City.....
 Person reporting..... Month..... Year.....

A—APPLICATIONS FOR ALLOWANCE.

	Individuals
1. Carried over from preceding month (Item 5 last month).....	
2. Received during month.....	
3. Total during month (1 plus 2).....	
a. Worked on during month.....	
b. Not worked on during month.....	
4. Disposed of during month: Total.....	
a. Allowance granted.....	
b. Ineligible for allowance.....	
c. Closed for other reasons.....	
5. Carried forward to following month (3 minus 4).....	

B—ALLOWANCE CASES.

	X X X X
6. On allowance at beginning of month (Item 10 last month).....	
7. Placed on allowance during month: Total.....	
a. Never previously on allowance.....	
b. Last on allowance prior to this calendar year.....	
c. Last on allowance within this calendar year.....	
8. Total on allowance during month (6 plus 7).....	
a. Receiving payment.....	
b. Receiving no payment.....	
9. Closed during month.....	
10. On allowance at end of month (8 minus 9).....	

C—PAYMENTS DURING MONTH.

	From Public Funds	From Private Funds
11. Payments to allowance cases reported in item 8a. \$.....	\$.....	\$.....

D—STAFF DURING MONTH.

	Paid			In Training			Volunteer	
	Number Full Time	Part Time		Number Full Time	Part Time		Number	Hours of Service
		Number	Hours of Service		Number	Hours of Service		
12. Case workers.....								
13. Administrative, clerical, and all other.....								

Please read carefully the instructions for filling out this form

FAMILY WELFARE AND RELIEF

Agency _____
 Street _____ City _____
 Person reporting _____ Month _____ Year _____

A—DIRECT-SERVICE CASES.

	Total	Under-Care Cases	Incidental-Service Cases
1. Carried over from preceding month (Item 5 last month).....	_____	_____	_____
2. Intake during month: Total.....	_____	_____	_____
a. Never previously served.....	_____	_____	_____
b. Last closed prior to this calendar year.....	_____	_____	_____
c. Last closed within this calendar year.....	_____	_____	_____
3. Total during month (1 plus 2).....	_____	_____	_____
a. Receiving relief: Total.....	_____	_____	_____
(1) Direct relief only.....	_____	_____	_____
(2) Direct and work relief.....	_____	_____	_____
(3) Work relief only.....	_____	_____	_____
b. Receiving service only.....	_____	_____	_____
c. Inactive during month.....	_____	_____	_____
4. Closed during month.....	_____	_____	_____
5. Carried forward to following month (3 minus 4).....	_____	_____	_____

B—AMOUNT OF RELIEF PROVIDED DURING MONTH TO CASES REPORTED IN ITEM 3a.

	Total	Under-Care Cases	Incidental-Service Cases
6. Total from public funds.....	\$ _____	\$ _____	\$ _____
a. Direct relief.....	_____	_____	_____
b. Work relief.....	_____	_____	_____
7. Total from private funds.....	_____	_____	_____
a. Direct relief.....	_____	_____	_____
b. Work relief.....	_____	_____	_____

C—SERVICE TO OTHER-AGENCY CASES DURING MONTH.

	Number
8. Reports on closed cases.....	_____
9. Investigations made for out-of-town agencies.....	_____
10. Out-of-town inquiries forwarded.....	_____

D—DIRECT-SERVICE APPLICATIONS.

11. Not accepted for investigation or service (Not made cases).....	X X X X
12. Pending at end of month.....	_____

[OVER]

E—STAFF DURING MONTH.	Paid			In Training			Volunteer	
	Number Full Time	Part Time		Number Full Time	Part Time		Number	Hours of Service
		Number	Hours of Service		Number	Hours of Service		
13. Case workers and case supervisors								
14. Administrative, clerical, and all other								

Please read carefully the instructions for filling out this form

PROTECTIVE AND FOSTER CARE OF CHILDREN

31

Agency.....
 Street..... City.....
 Person reporting..... Month..... Year.....

A—CHILDREN UNDER PROTECTIVE OR FOSTER CARE.	Total	Registration Area
1. Carried over from preceding month (Item 5 last month).....		
2. Taken under care during month: Total.....		
a. Never previously under care.....		
b. Last discharged prior to this calendar year.....		
c. Last discharged within this calendar year.....		
3. Total under care during month (1 plus 2).....		
a. Receiving direct service during month.....		
b. Receiving no direct service during month.....		
4. Discharged from care during month.....		
5. Carried forward to following month (3 minus 4).....		
6. Families represented by the children reported in item 5.....		

B—TYPE OF CARE ON LAST DAY OF MONTH.	x x x x	x x x x
7. Total children (Same as item 5; sum of 8 to 13, inclusive).....		
8. In home of child's parents: Total.....		
a. With maintenance from agency.....		
b. Without maintenance from agency.....		
9. In home of relatives other than parents: Total.....		
a. With maintenance from agency.....		
b. Without maintenance from agency.....		
10. In foster home: Total.....		
a. Free foster home.....		
b. Boarding home.....		
c. Work or wage home.....		
11. In agency's own institution (Same as item 5 on Form C-2).....		
12. Cared for through another agency.....		
13. Elsewhere (Specify).....		

C—APPLICATIONS:	Families	Children
14. Pending at end of month.....		

D—CHILDREN SERVED DURING MONTH BUT NOT INCLUDED IN SECTIONS A, B, AND C.	Number
15. Receiving advice, information, or referral.....	

E—SERVICE TO OTHER-AGENCY CASES DURING MONTH.	x x x x
16. Reports on closed cases.....	
17. Investigations made for other agencies.....	

Back of Form C-1

F—UNMARRIED MOTHERS INCLUDED IN SECTIONS A AND B.	Total	Registration Area
18. Carried over from preceding month (Item 22 last month).....		
19. Taken under care during month.....		
20. Total under care during month (18 plus 19).....		
21. Discharged from care during month.....		
22. Carried forward to following month (20 minus 21).....		
G—CHILDREN IN FOSTER HOMES INCLUDED IN SECTIONS A AND B.	X X X X	X X X X
23. Carried over from preceding month (Items 10 and 27 last month).....		
24. Taken under foster-home care during month: Total.....		
a. Never previously under agency's supervision in foster home.....		
b. Last under foster-home care prior to this calendar year.....		
c. Last under foster-home care within this calendar year.....		
25. Total under foster-home care during month (23 plus 24).....		
26. Discharged from foster-home care during month.....		
27. Carried forward to following month (25 minus 26; same as item 10).....		
28. Families represented by the children reported in item 27.....		
29. Days' care provided during month in foster homes to children reported in item 25: Total.....		
a. Free foster home.....		
b. Boarding home.....		
c. Work or wage home.....		

H—STAFF DURING MONTH.	Paid			In Training			Volunteer	
	Number Full Time	Part Time		Number Full Time	Part Time		Number	Hours of Service
		Number	Hours of Service		Number	Hours of Service		
30. Case workers and case supervisors.....								
31. Institutional staff reported on Form C-2.....								
32. All other.....								

BIRTH COUNCIL OF

ADL

31

U. S. Department of Labor
CHILDREN'S BUREAU
Washington

SOCIETY

AGENCY MOTHERS' AID

Form R-2
Social Statistics
1936-38

Agency _____
Street _____ City _____
Person reporting _____ Month _____ Year _____

A—APPLICATIONS FOR ALLOWANCE.	Families	Children
1. Carried over from preceding month (Item 5 last month).....	_____	_____
2. Received during month.....	_____	_____
3. Total during month (1 plus 2).....	_____	_____
a. Worked on during month.....	_____	_____
b. Not worked on during month.....	_____	_____
4. Disposed of during month: Total.....	_____	_____
a. Allowance granted.....	_____	_____
b. Ineligible for allowance.....	_____	_____
c. Closed for other reasons.....	_____	_____
5. Carried forward to following month (3 minus 4).....	_____	_____

B—ALLOWANCE CASES.	Families	Children
6. On allowance at beginning of month (Item 10 last month).....	X X X X	X X X X
7. Placed on allowance during month: Total.....	_____	_____
a. Never previously on allowance.....	_____	_____
b. Last on allowance prior to this calendar year.....	_____	_____
c. Last on allowance within this calendar year.....	_____	_____
8. Total on allowance during month (6 plus 7).....	_____	_____
a. Receiving payment.....	_____	_____
b. Receiving no payment.....	_____	_____
9. Closed during month.....	_____	_____
10. On allowance at end of month (8 minus 9).....	_____	_____

C—PAYMENTS DURING MONTH.	Amount
11. Payments to allowance cases reported in item 8a.....	\$.....

D—STAFF DURING MONTH.	Paid			In Training			Volunteer	
	Number Full Time	Part Time		Number Full Time	Part Time		Number	Hours of Service
		Number	Hours of Service		Number	Hours of Service		
12. Case workers.....	_____	_____	_____	_____	_____	_____	_____	
13. Administrative, clerical, and all other.....	_____	_____	_____	_____	_____	_____	_____	

Please read carefully the instructions for filling out this form

DPW ANNUAL STATISTICAL REPORT

1937

PERCENTAGE ANALYSIS OF REASONS FOR CLOSINGS

REASON	TOTAL	ADC	ATB	GPA	OAA
1. Bonus received	*	*	-	-	-
2a. Placed by court	*	*	-	-	-
b. " in institution	3	1	2	3	7
c. " with relatives	*	1	-	-	-
d. " out of home	0.5	1	-	*	-
e. " by private agency	*	*	-	-	-
3. Death	20	2	19	3	76
4. Duplication	*	*	-	*	-
5. Employment history	1	2	-	*	-
6. Employment secured in private industries	12	15	3	17	2
7. Financial adjustment	4	6	1	3	1
8. Illegitimacy	4	10	-	-	-
9. Ineligible under desertion requirements	*	1	-	-	-
10. " under mental incapacity	*	-	-	*	-
11. " " physical "	*	*	-	*	-
12. Insurance adjustment	*	1	-	*	*
13. Legal responsibility	1	3	-	1	-
14. Maturity	2	6	-	-	-
15. Misrepresentation	7	14	-	6	1
16. Moved or unable to locate	2	3	-	2	2
17. Not proper relationship	1	2	-	-	-
18. Non-residence	0.5	*	1	1	*
19. Relatives assumed care	4	8	6	1	2
20. Standards of health and care	*	-	-	*	-
21. WPA placement	10	3	-	24	*
22. By request	1	1	2	1	*
23. Income sufficient	6	14	7	2	2
24. Federal project other than WPA	*	*	-	*	-
25. Refused to sign application blank	*	*	1	-	-
26. Opened in error	*	*	-	*	*
27. Employment refused	1	*	-	2	-
28. Refusal of DPW plan	3	4	1	3	*
29. Refused to assign insurance or property	1	-	-	-	4
30. Age (not 65)	1	-	-	-	3
31. Case combination	*	*	-	*	-
32. Resources available	1	*	-	1	*
33. Citizenship	*	-	-	-	*
34. Transferred to another type of assistance	13	1	52	29	-
35. Referred to another agency	*	*	-	1	-
36. Imprisonment	*	-	-	*	-
37. Practical vision	*	-	5	-	-
38. Change of payee	1	1	-	-	-
TOTAL	100	100	100	100	100

* Less than 1%.

DPW ANNUAL STATISTICAL REPORT

1937

REASONS FOR CLOSINGS BY MONTHS

REASONS	Total End Of Year	Monthly Total	Jan. Feb. Mar. Apr. May June July Aug. Sept. Oct. Nov. Dec.													
			Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.		
1 Bonus received	1	3			1		1	1								
2a Placed by court	4	5						1	1		1					2
b " in institution	107	157	27	19	22	27	4	3	9	2	5	9	14	16		
c " with relatives	6	6	2	3					1							
d " out of home	14	16	1		2	2	2	3	1	1	1	2		1		
e " by private agency	4	4									3		1			
3 Death	620	621	48	46	54	41	48	46	53	29	37	67	80	72		
4 Duplication	3	3							1	2						
5 Employment history (of parents)	26	31	7	7	7	3		3		1	1			2		
6 Employment secured in private ind.	399	475	19	13	21	21	16	43	51	67	56	71	55	42		
7 Financial adjustment	112	127	7	15	14	10	13	9	8	11	9	12	10	9		
8 Illegitimacy	110	179	51	92	36											
9 Ineligible under desertion req.	7	8		1	1	3	1		1							1
10 Ineligible under mental incapacity	1	1							1							
11 Ineligible under physical incapacity	7	10		3		1	1	2			1			2		
12 Insurance adjustment	10	13		1			1	1	1	1			2	2	4	
13 Legal responsibility	38	44	7	6	8	2	2	2	1	4	2	4	2	4		
14 Maturity	73	75	13	6	8	5	12	5	5	4	5	4	5	3		
15 Misrepresentation	234	282	5	6	7	5	8	6	15	29	33	57	49	62		
16 Moved or unable to locate	70	77	3	4	5	6	3	4	8	11	7	5	10	11		
17 Not proper relationship	22	25	8	7	4	4	2									
18 Non-residence	14	15				1			3	2	4	1	2	2		
19 Relatives assumed care	120	128	4	4	3	5	10	10	10	16	24	14	15	13		
20 Standards of health and care	1	2	1					1								
21 WPA placement	330	349	1	3	5	3	6	8	5	20	40	66	70	122		
22 By request	27	28	2	3	4	3	3	2	1	3	1		6			
23 Income sufficient	201	237	16	24	23	46	14	12	15	22	17	22	12	14		
24 Federal projects other than WPA	5	5										1	3	1		
25 Refused to sign application blank	2	7					5	1	1							
26 Opened in error	5	6		2				1					3			
27 Employment refused	28	34						2	1	1	11	7	8	4		

DPW ANNUAL STATISTICAL REPORT

1937

REASONS FOR CLOSING BY MONTHS(Cont'd)

REASONS	Total End Of Year	Monthly Total	Jan. Feb. Mar. Apr. May June July Aug. Sept Oct. Nov. Dec.											
			Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept	Oct.	Nov.	Dec.
28 Refusal of DPW plan	82	92	5	8	17	2	1	5	9	15	6	7	7	10
29 Refused to assign ins. or prop.	33	37	15	1	2			6	1	6	1		4	1
30 Age (not 65)	23	26	2			2	1	17	4					
31 Case combination	5	6	1			1					1	1	1	1
32 Resources available	18	23								2	3	1	3	7
33 Citizenship	3	3						1		1				1
34 Transferred to another type of assistance	423	433	7	2	5	2		8	114	54	36	85	60	60
35 Referred to another agency	6	7						1		2	2	2		
36 Imprisonment	3	4							1			2		1
37 Practical vision	6	6			2	2			1	1				
38 Change of payee	16	16										1	2	7
TOTAL	3219	3626	252	276	251	197	162	198	330	307	301	451	431	470

DPW ANNUAL STATISTICAL REPORT

1937

ANALYSIS OF ILLEGITIMACY IN ADC CASES ACTIVE AT END OF
NOVEMBER

FAMILY STATUS	COLOR		MAJOR PROBLEM	
	Total	White	Negro	Illegitimacy Other
Married Couple	28	6	22	28
Unmarried Couple	28	7	21	1 27
Unmarried Mother	333	34	299	281 52
Widow	93	16	77	8 85
Widower	2		2	2
Deserted Woman	156	19	137	23 133
Deserting Woman	7	3	4	1 6
Divorced Woman	20	12	8	6 14
Separated Woman	5	2	3	1 4
Married Couple Apart -Woman	10		10	3 7
Single Man	1		1	1
SUB-TOTAL	683	99	584	324 359
Grandfather	9	2	7	2 7
Grandmother	34	5	29	13 21
Step-mother	1		1	1
Aunt	15	1	14	2 13
TOTAL	742	107	635	341 401

DPW ANNUAL STATISTICAL REPORT

1937

CLASSIFICATION OF GPA CASES BY COLOR AND SEX

Sex	TOTAL			EMPLOYABLE			LIGHT WORK			UNEMPLOYABLE			UNCLASSIFIED		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro
Male	2630	1522	1108	1041	649	392	213	131	82	1306	704	602	70	38	32
Female	1788	779	1009	139	82	57	114	35	79	1457	628	829	78	34	44
TOTAL	4418	2301	2117	1180	731	449	327	166	161	2763	1332	1431	148	72	76

PERCENTAGE ANALYSIS OF SEX OF GPA CASES BY

CLASSIFICATION AND COLOR

Sex	TOTAL			EMPLOYABLE			LIGHT WORK			UNEMPLOYABLE			UNCLASSIFIED		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro
Male	60	66	52	88	89	87	65	79	51	47	53	42	47	53	42
Female	40	34	48	12	11	13	35	21	49	53	47	58	53	47	58
TOTAL	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100

PERCENTAGE ANALYSIS OF CLASSIFICATION OF GPA CASES BY COLOR AND SEX

Sex	TOTAL					WHITE					NEGRO						
	Tot.	Empl.	L.	W.	Unempl.	Unclass.	Tot.	Empl.	L.	W.	Unempl.	Unclass.	Tot.	Empl.	L.	W.	Unempl.	Uncl.
Male	100	39	8	50	3	100	43	9	46	2	100	35	7	55	3		
Female	100	8	6	82	4	100	11	4	81	4	100	6	8	82	4		
TOTAL	100	27	7	63	3	100	32	7	58	3	100	21	8	67	4		

DPW ANNUAL STATISTICAL REPORT

1937

AGE OF GPA PERSONS BY CLASSIFICATION AND COLOR

AGE	NUMBER OF PERSONS														
	TOTAL			EMPLOYABLE			LIGHT WORK			UNEMPLOYABLE			UNCLASSIFIED		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro
65 and over	687	419	268	33	23	10	12	8	4	640	388	252	2		2
45 under 65	2617	1447	1170	416	297	119	253	153	100	1947	997	950	1		1
25 under 45	2658	1415	1243	1463	875	588	214	105	109	978	432	546	3	3	
16 under 25	1107	647	460	596	370	226	64	38	26	444	237	207	3	2	1
Under 16	5016	2789	2227	3336	1913	1423	372	194	178	1291	666	625	17	16	1
Unknown	733	334	399	13	1	12				12	1	11	708	332	376
TOTAL	12,818	7051	5767	5857	3479	2378	915	498	417	5312	2721	2591	734	353	381

PERCENTAGE ANALYSIS OF AGE OF GPA PERSONS BY CLASSIFICATION AND COLOR

Age	TOTAL			EMPLOYABLE			LIGHT WORK			UNEMPLOYABLE			UNCLASSIFIED		
	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro	Total	White	Negro
65 and over	5	6	5	1	1	*	1	2	1	12	14	10	*		1
45 under 65	20	21	20	7	8	5	28	31	24	37	37	37	*		*
25 under 45	21	20	21	25	25	25	23	21	26	19	16	21	0.5	1	-
16 " 25	9	9	8	10	11	10	7	7	6	8	9	8	0.5	*	*
Under 16	39	39	39	57	55	60	41	39	43	24	24	24	2	5	*
Unknown	6	5	7	*	*	*	-			*	*	*	97	94	99
TOTAL	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100

*Less than 1%.

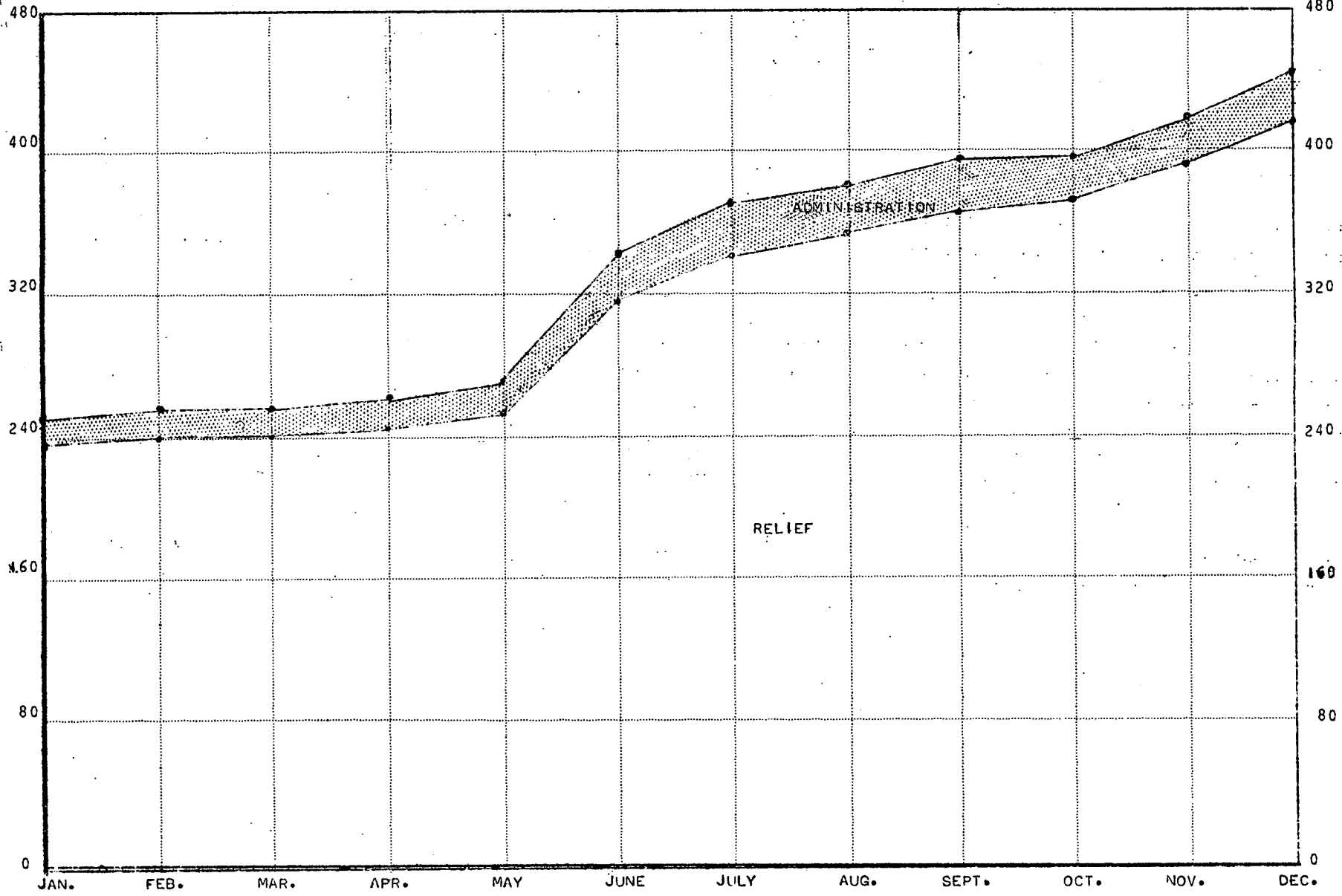
FIG. XII

DPW ANNUAL STATISTICAL REPORT

1937
TOTAL OBLIGATIONS

THOUSANDS
OF
DOLLARS

THOUSANDS
OF
DOLLARS



DPW ANNUAL STATISTICAL REPORT

1937

TOTAL OBLIGATIONS

1937	Total	Relief	Adminis.	MONTHLY VARIATION						
				AMOUNT			PERCENTAGE			
				Total	Relief	Adminis.	Tot.	Relief	Admin.	
January	\$ 254,745.30	\$ 239,396.10	\$ 15,349.20							
February	258,381.63	241,470.95	16,910.68	\$ 3,636.33	\$ 2,074.85	\$ 1,561.48	1.4	.9	10.2	
March	257,883.09	241,384.47	16,498.62	- 498.54	- 86.48	- 412.06	-.2	- .	-2.4	
April	263,577.04	246,846.01	16,731.03	5,693.95	5,461.54	232.41	2.2	2.3	1.4	
May	271,918.90	255,046.14	16,872.76	8,301.86	8,200.13	141.73	3.2	3.3	.8	
June	340,562.82	316,415.48	24,147.34	68,643.92	61,369.34	7,274.58	25.2	24.1	43.1	
July	370,817.32	342,395.56	28,421.76	30,254.50	25,980.08	4,274.42	8.9	8.2	17.7	
August	381,725.04	352,674.82	29,050.22	10,907.72	10,279.26	628.46	2.9	3.0	2.2	
September	395,530.75	366,690.15	28,840.60	13,805.71	14,015.33	- 209.62	3.6	4.0	-.7	
October	395,791.39	370,866.27	24,925.12	260.64	4,176.12	-3,915.48	.1	1.1	-13.6	
November	418,116.86	392,665.84	25,451.02	22,325.47	21,799.57	525.90	5.6	5.9	2.1	
December	446,495.65	417,995.22	28,500.43	28,378.79	25,329.38	3,049.41	6.8	6.5	12.0	
TOTAL	4,055,545.79 ^a	3,783,847.01	271,698.78	191,750.35	178,599.12	13,151.23	75.3	74.6	85.7	
Jan. - May	1,306,505.96	1,224,143.67	82,362.29	17,173.60	15,650.04	1,523.56	6.7	6.5	9.9	
June - Dec.	2,749,039.83	2,559,703.34	189,336.49	105,932.83	101,579.74	4,353.09	31.1	32.1	18.0	

*Less than 0.1%.

^aIn addition \$36,521.08 was paid for OAA funeral expenses.

DPW ANNUAL STATISTICAL REPORT

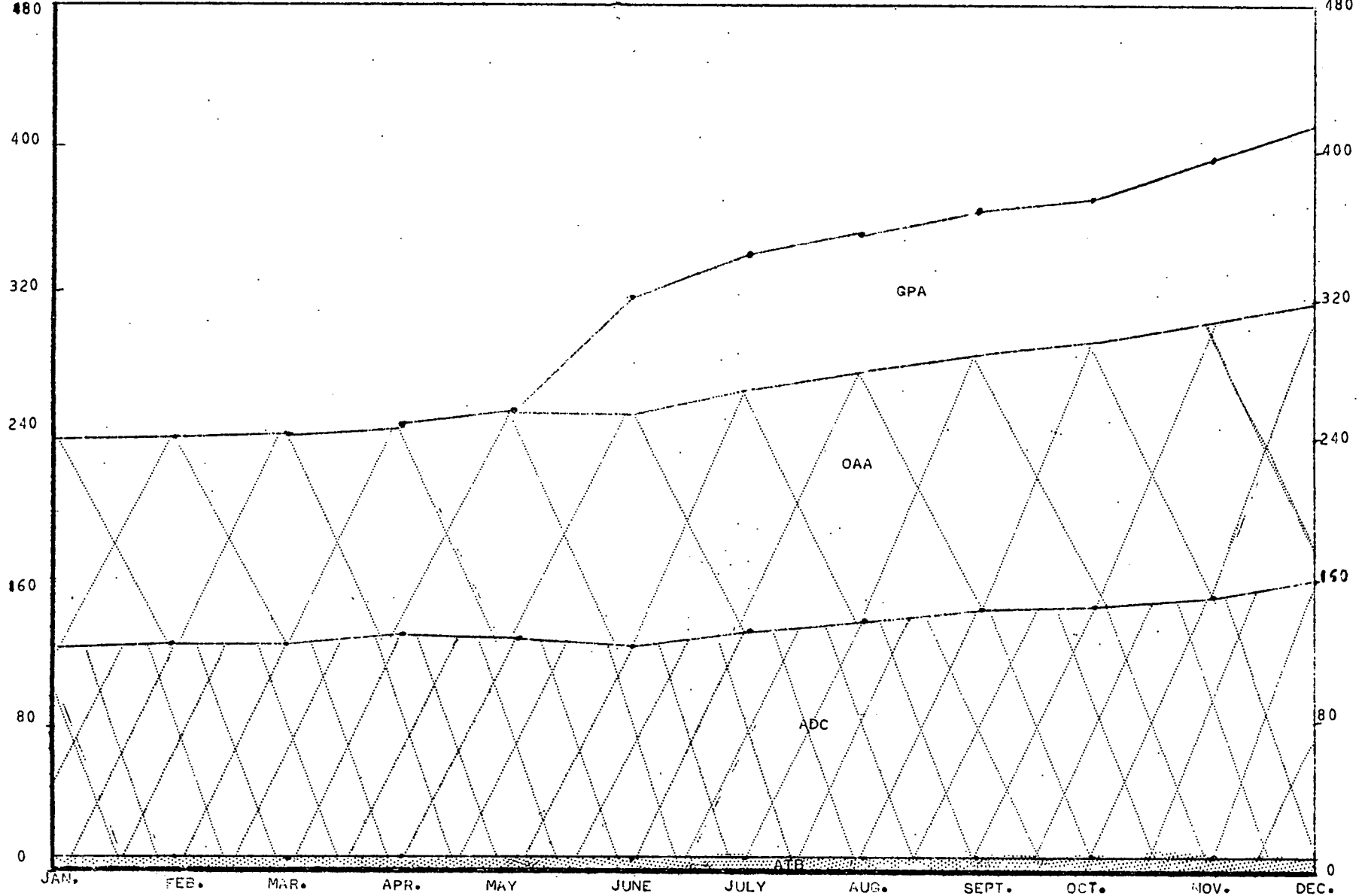
1937

FIG. XIII

RELIEF OBLIGATIONS BY CATEGORIES CUMULATED

THOUSANDS
OF
DOLLARS

THOUSANDS
OF
DOLLARS



17a

1937

RELIEF OBLIGATIONS

1937	Total	ADC ^a	ATB	GPA	OAA
January	\$ 239,396.10	\$ 114,438.62	\$ 7448.99		\$ 117,508.49
February	241,470.95	115,542.45	7832.99		118,095.51
March	241,384.47	115,130.79	8076.03		118,177.65
April	246,846.01	119,826.34	8303.72		118,715.95
May	255,046.14	119,133.42	8286.70		127,626.02
June	316,415.48	114,103.11	8252.38	\$ 64,526.91	129,533.08
July	342,395.56	122,859.29	8285.18	78,258.60	132,992.49
August	352,674.82	127,955.25	8516.17	78,072.08	138,131.32
September	356,690.15	134,604.41	8543.86	81,472.76	142,069.12
October	370,866.27	135,607.31	8518.85	80,460.57	146,279.54
November	392,665.84	142,804.85	8185.95	89,068.01	152,607.03
December	417,995.22	152,393.06	8024.31	99,210.84	158,367.01
TOTAL	3,783,847.01	1,514,398.90	98,275.13	571,069.77	1,600,103.21 ^b
Average Per Month	315,320.58	126,199.90	8,189.59	81,581.40	133,341.93
Increase Jan.-Dec.	178,599.12	37,954.44	575.32	34,683.93	40,858.52
Percentage Increase	74.6	33.2	7.7	53.8	34.8
Percentage Of Total	100	40.0	2.6	15.1	42.3

AVERAGE RELIEF PER CASE

1937	TOTAL		ADC		ATB		GPA		OAA	
	Cases	Average Grant	Cases	Average Grant	Cases	Average Grant	Cases	Average Grant	Cases	Average Grant
Jan.	8967	\$26.70	2942	\$38.90	373	\$19.97			5652	\$20.79
Feb.	8886	27.17	2891	39.97	375	20.89			5620	21.01
March	8809	27.40	2806	41.03	382	21.14			5621	21.02
April	9126	27.05	3080	38.90	382	21.74			5664	20.96
May	9542	26.73	3088	38.58	376	22.04			6078	21.00
June	12,515	25.28	3229	35.34	374	22.07	2742	\$23.53	6170	20.99
July	13,013	26.31	3346	36.72	376	22.04	2934	26.67	6357	20.92
Aug.	13,311	26.49	3411	37.51	381	22.35	2952	26.63	6587	20.97
Sept.	13,464	27.23	3441	39.12	381	22.42	2864	28.45	6778	20.96
Oct.	13,854	26.77	3483	38.93	385	22.13	2931	27.45	7055	20.73
Nov.	14,305	27.45	3515	40.63	369	22.18	3001	29.68	7420	20.57
Dec.	14,901	28.05	3612	42.19	360	22.29	3302	30.05	7627	20.76
TOTAL		322.93		467.84		261.37		193.06		250.56
Average Per Mon.	11,113 ^c	26.92 ^c	3237	38.99	376	21.78	2958	27.53	6386	20.88
Increase Jan.-Dec.	5,934		670		-13		560		1975	
Percent Increase	66.2		22.8		-3.5		20.4		34.9	
Percent Total	100		26.4		2.6		24.6		46.4	

^aIncludes supplementation from GPA city funds.

^bIn addition \$36,521.08 was paid for funeral expenses.

^cCombined average for January - May, and June- December.

DPW ANNUAL STATISTICAL REPORT

1937

ADC RELIEF OBLIGATIONS AND AVERAGE RELIEF PER CASE

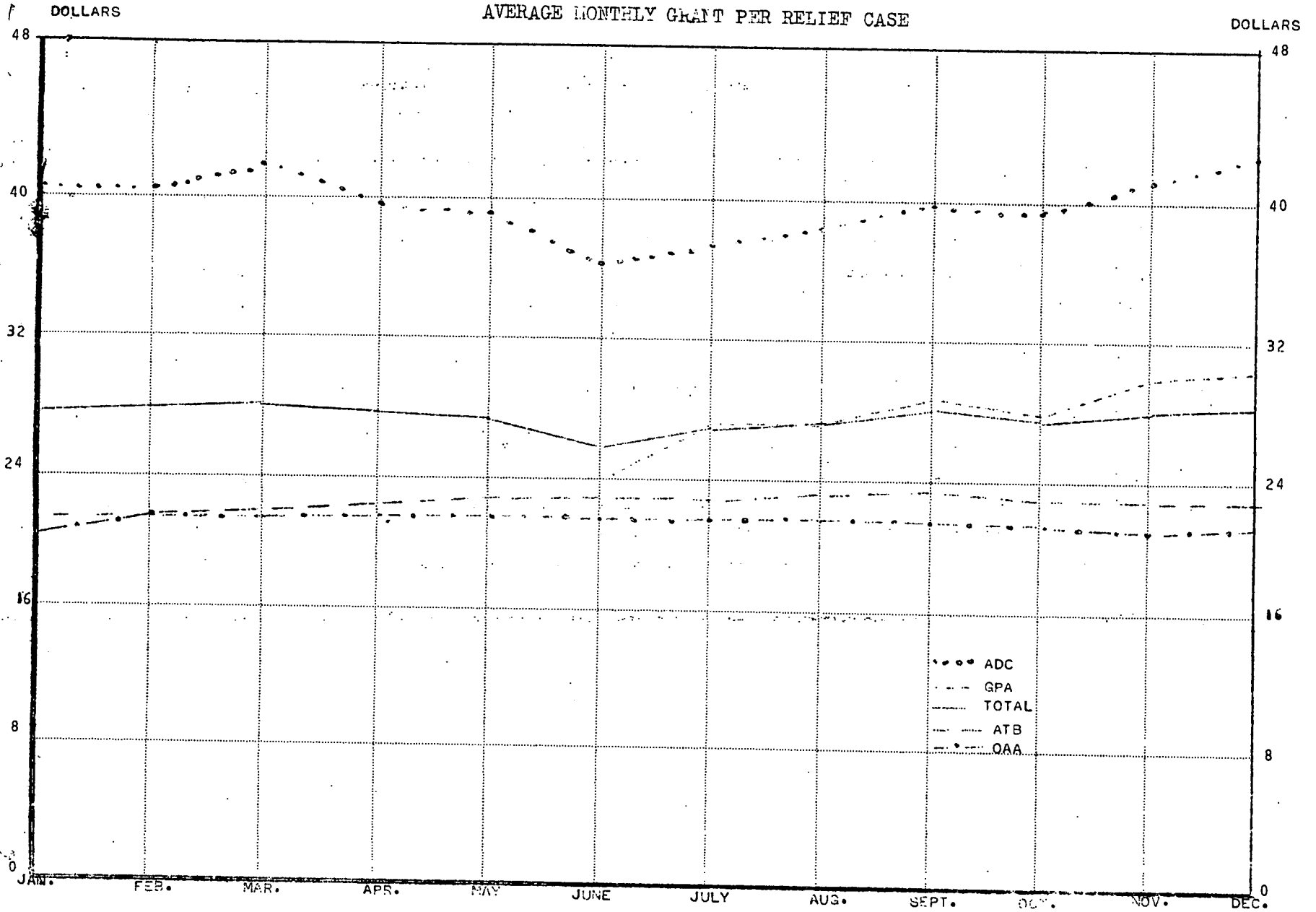
1937	TOTAL			ADC FUNDS			GPA SUPPLEMENTATION		
	Relief Oblig.	Cases	Average Grant	Relief Oblig.	Cases	Average Grant	Relief Oblig.	Cases	Average Grant
Jan.	\$ 114,438.62	2942	\$38.90	\$ 99,391.79	2942	\$33.78	\$ 15,046.83	910	\$ 16.53
Feb.	115,542.45	2891	39.97	97,106.39	2891	33.59	18,436.06	1159	15.91
March	115,130.79	2806	41.03	94,381.59	2806	33.64	20,749.20	1299	15.97
April	119,826.34	3080	38.90	100,235.01	3080	32.54	19,591.33	1578	12.42
May	119,133.42	3088	38.58	102,516.71	3088	33.20	16,616.71	1311	12.67
June	114,103.11	3229	35.34	107,180.11	3229	33.19	6,923.00	518	13.36
July	122,859.29	3346	36.72	110,807.80	3346	33.12	12,051.49	717	16.81
August	127,955.25	3411	37.51	114,314.16	3411	33.51	13,641.09	920	14.83
Sept.	134,604.41	3441	39.12	118,192.17	3441	34.35	16,412.24	1222	13.43
Oct.	135,607.31	3483	38.93	118,134.13	3483	33.92	17,473.18	1271	13.75
Nov.	142,804.85	3515	40.63	121,090.18	3515	34.45	21,714.67	1455	14.92
Dec.	152,393.06	3612	42.19	126,145.18	3612	34.92	26,247.88	1780	14.75
TOTAL	1,514,398.90		467.84	1,309,495.22		404.54	204,903.68		173.94
Average Per Month		3237	38.99		3237	33.71		1178	14.50

FIG. XIV

DPW ANNUAL STATISTICAL REPORT

1937

AVERAGE MONTHLY GRANT PER RELIEF CASE



DPW ANNUAL STATISTICAL REPORT

1937

ADMINISTRATIVE COSTS

1937	TOTAL		ADC	ATB	GPA	OAA
	Cost	Percent				
January	\$ 15,349.20	6.0	\$ 8,268.58	525.83		\$ 6554.79
February	16,910.68	6.5	9,040.65	535.90		7334.13
March	16,498.62	6.4	9,205.40	426.66		6866.56
April	16,731.03	6.3	8,436.37	464.51		7830.15
May	16,872.76	6.2	8,966.59	567.84		7338.33
June	24,147.34	7.1	8,763.52	511.41	8,124.41	6748.00
July	28,421.76	7.7	8,762.60	318.76	12,593.68	6746.72
August	29,050.22	7.6	9,313.90	469.36	11,961.94	7305.02
September	28,840.60	7.3	10,302.74	408.28	10,906.32	7223.26
October	24,925.12	6.3	8,170.38	374.82	9,531.61	6848.31
November	25,451.02	6.1	10,078.40	214.01	7,547.12	7611.49
December	28,500.43	6.4	11,101.24	224.61	9,071.12	8103.46
TOTAL	\$271,698.78	6.7	\$110,410.37	\$5041.99	\$69,736.20	\$86,510.22
Percentage	100		40.6	1.9	25.7	31.8

Kovako-Scott

(Worker's full name)

1-12-39

(Date)

32

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~county~~ Baltimore City State Maryland

Name of agency or office Department of Public Welfare.
(Office of custody) (Office which made the record, if different)

Address of office of custody 331 St Paul Place, (Statistician's Office)
(Name of building, room number, street address)

1. Title (Miscellaneous)
(Give present full title in quotes; assigned title, if any. In brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1933-1936
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Drawers not labeled
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another

record. ~~_____~~ are missing, if possible ~~_____~~

6. Contents Correspondence, reports and information respecting
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
administrative services and expenses, including advice
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
and information regarding operation of Baltimore
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
Emergency Relief Commission; monthly reports of
complaints; monthly lists of persons on Old Age relief;
monthly lists of aliens on relief; B.E.R.C. annual reports; B.E.R.C.
monthly review; monthly analysis of case load by birth plan of
head of family and color; monthly case load reports for State

6. Contents—continued Aid and Charities; Boy Scouts of America activities; monthly budget allotments to Comptroller; maximum allotment guide for weekly reports; monthly reports of homeless men; weekly analysis of cash experiment of closings, expenditures and average relief; c.c.c. bulletins; monthly Central Registration (Cont. on line 12)

7. Arrangement Alph. by subjects
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed on plain paper and mimeographed forms
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
also handwritten on plain paper.

10. Size of drawers 11 1/2" x 14" x 26" Average 5000 papers per drawer.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1933-1936, 2 drawers on west wall in
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
Statisticians office.

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

continued from line 6
reports; monthly B.E.P.C. case closings and reasons; monthly clothing expenditures; clothing and sewing center reports; B.E.P.C. cooperative cases with Family Welfare Association; correspondence to and from out of town relief agencies pertaining to set up and operations; monthly C.W.A. statistical reports; (continue on addenda

13. (For use in Florida.) Early imprints _____ sheet _____)
(Author) (Publisher)

(Place of publication)

(Date of publication)

(Miscellaneous)

Serial #32

continued from line 12

Addenda Sheet.

daily obligation reports; Monthly B.F.R.C. reports of dependent children under 16; B.F.R.C. district secretary's meetings and minutes pertaining to general relief matters, social workers and operations; monthly B.F.R.C. department of public welfare cases; monthly B.F.R.C., Baltimore plan for emergency relief work in education; monthly analysis of relief load by employability; monthly reports of employment in industries; monthly analysis of family status and color; monthly home economics reports; monthly reports of usual industry of head of family; monthly intake of case load reports; monthly intake reports of reasons for opening; monthly reports of interviews with clients; monthly reports of suspended cases reopened; secretarys' daily log of cases accepted and rejected; B.F.R.C. monthly reports of total numbers of individuals in each district by color; monthly reports of legal department pertaining to status of cases, classifications, sources and dispositions; monthly intake of legal aid society, classified by party referring cases; monthly reports of medical cases; special studies respecting major problems, old age cases, secondary problems, female single, widows, male single, desertions, etc.; monthly reports of percentage rent cases of total relief cases.

WORKS PROGRESS ADMINISTRATION

SURVEY OF STATE AND LOCAL HISTORICAL RECORDS, 1936

Historical Records Survey

(Name of State)

THE NEWSPAPER FORM

(Leave this space blank)

County City of town

Agency or department

Bureau

Name of other owner, if any

Name of building (Street address)

1. (Name of paper) (Place of publication)

2. (Frequency of publication) (Dates of publication)

3. Dates covered by holdings of the above

4. Dates for which bound

5. Dates for which unbound but arranged

6. Dates for which loose

7. Merged with or succeeded by Date

8. Successor to Date

9. Location, by years (Room and vault names or numbers)

10. Other information

SCOTT-KOVAKA
(Worker's full name)

1-25-39
(Date)

33
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ **BALTIMORE CITY** State **MARYLAND**

Name of agency or office **DEPARTMENT OF PUBLIC WELFARE**
(Office of custody) (Office which made the record, if different)

Address of office of custody **331 ST. PAUL PLACE**
(Name of building, room number, street address)
STATISTICAL DIVISION

1. Title **(ENTRY TICKET - GENERAL PUBLIC ASSISTANCE)**
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities)

or both)

2. Dates **1937--**
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity **2 - STEEL FILE DRAWERS**
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling **DRAWERS LABELED - "ENTRIES A-H AND I-Z"**
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records **NONE.**
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents **CONTAINING GENERAL PUBLIC ASSISTANCE ENTRY TICKETS REPRESENTING NEW CASES EXCEPTED FOR RELIEF - ENTRY TICKETS SHOW INVESTIGATOR'S NAME, CENTRAL PURCHASING BUREAU AND DEPARTMENT OF PUBLIC WELFARE NUMBERS, NAME AND ADDRESS OF CLIENTS, SEMI-MONTHLY GRANT FOR STATE AND CITY, NUMBER IN FAMILY AND TOTAL GRANT, AMOUNT OF MONTHLY GRANT, RACE, DATE OF BIRTH, DATE EFFECTIVE, REMARKS PERTAINING TO THE CASE, DATE OF APPROVAL AND CENTRAL PAYROLL BUREAU VERIFICATION.**
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued _____

7. Arrangement ALPHABETICALLY BY NAMES OF CLIENTS.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN AND TYPED ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWERS 6"x9"x18" - AVERAGE 5000-TICKETS PER
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
DRAWERS.

11. Location by dates and quantities 1927 TO DATE - 2 STEEL FILE DRAWERS, LOCATED
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
ON SOUTH WALL OF STATISTICAL DEPARTMENT.

12. Other information RECORDS AND CONTAINERS ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

DEPARTMENT OF PUBLIC WELFARE

33

GENERAL PUBLIC ASSISTANCE ENTRY TICKET

CENTRAL PAYROLL BUREAU: The person herein indicated has met the requirements of this department relative to general public assistance allowance which is hereby certified correct for payroll purposes until further notice.

C. P. B. No.....NAME.....

REMARKS:.....

D. P. W. No.....ADDRESS.....

SEMI-MONTHLY GRANT.....STATE \$.....CITY \$.....

No. IN FAMILY.....TOTAL \$.....

MONTHLY GRANT.....\$.....

APPROVED:.....

RACE.....DATE OF BIRTH.....

19.....

DATE EFFECTIVE

(Director Department of Public Welfare)

NOTE: This entry ticket is to be promptly executed in duplicate by the Department of Public Welfare. The original forwarded to the Central Payroll Bureau, and the duplicate retained for record and file.

Central Payroll Bureau Verification

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Kovaka-Scott

1-25-39

34

(Worker's full name)

(Date)

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)

Address of office of custody 331 St. Paul Place.
(Name of building, room number, street address)

1. Title (General Public Assistance - Emergency Allowances) "Emergencies"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1937--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Drawer labeled "Emergencies"
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Office copies of General Public Assistance emergency allowance; kept as a record of client's emergency allowances; record of emergency allowances transcribed to statistical card record; emergency allowance tickets show investigator's name; Central Payroll Bureau number; Dept. of Public Welfare number; name and address of client; race; number in family group; amount of semi-monthly grant; effective date of semi-monthly grant; reason for emergency grant;
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued date of entry on emergency payroll; amounts of emergency allowance from state and city also total amount of the grant; remarks relative to client needing clothing for certain member of the family, car-fare; shoes, late check, hospitalization, etc; date approved and signature of (cont. on line 12)

7. Arrangement Alph. by names of clients
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel file drawer 6" x 9" x 18" Approx. 3000 tickets
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1937 to date, 1 steel file drawer on south wall in statistical clerks' office.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)

Continued from line 6:-
officer in financial division.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

**DEPARTMENT OF PUBLIC WELFARE
GENERAL PUBLIC ASSISTANCE
EMERGENCY ALLOWANCE**

(34)

CENTRAL PAYROLL BUREAU: THE PERSON HEREIN INDICATED HAS MET THE REQUIREMENTS OF THIS DEPARTMENT RELATIVE TO A GENERAL PUBLIC ASSISTANCE EMERGENCY ALLOWANCE, WHICH IS HEREBY CERTIFIED CORRECT FOR PAYROLL PURPOSES.

EMERGENCY ALLOWANCE		
STATE	CITY	TOTAL
C. P. B. NO. _____ NAME _____		REMARKS _____ _____ _____ APPROVED _____ 19____
D. P. W. NO. _____ ADDRESS _____		
RACE _____ FAMILY GROUP _____		
SEMI-MONTHLY GRANT _____ \$ _____		
EFFECTIVE DATE SEMI-MONTHLY GRANT _____		
REASON FOR EMERGENCY ALLOWANCE _____		
ENTRY ON EMERGENCY PAYROLL ENDING _____		
FINANCIAL DIVISION		

NOTE: THIS EMERGENCY ALLOWANCE TICKET IS TO BE PROMPTLY EXECUTED IN DUPLICATE BY THE DEPARTMENT OF PUBLIC WELFARE. THE ORIGINAL FORWARDED TO THE CENTRAL PAYROLL BUREAU, AND THE DUPLICATE RETAINED FOR RECORD AND FILE.

SCOTT-KOVAKA
(Worker's full name)

1-25-39
(Date)

35
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND
Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)
Address of office of custody 331 ST. PAUL PLACE
(Name of building, room number, street address)
STATISTICAL DIVISION.

1. Title (CHANGE TICKET - GENERAL PUBLIC ASSISTANCE)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1937--
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 1-STEEL FILE DRAWER
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling DRAWER NOT LABELED
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINING GENERAL PUBLIC ASSISTANCE CHANGE TICKETS INVOLVING CHANGE OF ADDRESSES OF CLIENTS, CHANGE OF GRANTS AND PAYEES WHICH REVISIONS ARE TRANSFERRED TO STATISTICAL RECORDS FOR PAYROLL ADJUSTMENTS. - CHANGE TICKETS SHOW NAME OF INVESTIGATOR, CENTRAL PURCHASING BUREAU AND DEPARTMENT OF PUBLIC WELFARE NUMBERS, AMOUNT OF SEMI-MONTHLY STATE AND CITY-OLD AND NEW GRANTS, AMOUNT OF MONTHLY OLD AND NEW GRANTS AND TOTALS, NAME OF CLIENT, NEW ADDRESS, FORMER ADDRESS, RACE, NUMBER IN FAMILY - FROM - TO, DATE EFFECTIVE, REMARKS RESPECTING CHANGE,
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued DATE OF APPROVAL AND CENTRAL PAYROLL BUREAU
VERIFICATION.

7. Arrangement ALPHABETICALLY BY NAMES OF CLIENTS
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN AND TYPED ON PRINTED FORMS
(Handwritten. Handwritten printed form./Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWER, 6"x9"x18" AVERAGE 2000 TICKETS
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1937 TO DATE - 1-STEEL FILE DRAWER, LOCATED
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
ON SOUTH WALL OF STATISTICAL DEPARTMENT.

12. Other information RECORDS AND EQUIPMENT IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____ (Author) _____ (Publisher)

(Place of publication)

(Date of publication)

DEPARTMENT OF PUBLIC WELFARE

35

GENERAL PUBLIC ASSISTANCE CHANGE TICKET

CENTRAL PAYROLL BUREAU: The general public assistance allowance for the person herein indicated has been changed in accordance with the requirements of this department and is hereby certified correct for payroll purposes until further notice.

	OLD GRANT		NEW GRANT	
	SEMI-MONTHLY		SEMI-MONTHLY	
C. P. B. No.....	STATE \$	CITY \$	STATE \$	CITY \$
D. P. W. No.....	MONTHLY	TOTAL \$	MONTHLY	TOTAL \$
	\$		\$	

NAME.....

NEW ADDRESS.....

FORMER ADDRESS.....

RACE..... No. in Family: From..... to.....

DATE EFFECTIVE.....

REMARKS:.....

APPROVED:.....19.....

NOTE: This change ticket is to be promptly executed in duplicate by the Department of Public Welfare. The original forwarded to the Central Payroll Bureau, and the duplicate retained for record and file.

(Director Department of Public Welfare)
Central Payroll Bureau Verification

Kouakou-Scott
(Worker's full name)

1-26-39
(Date)

36^F
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland
Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)
Address of office of custody 331 St. Paul Place
(Name of building, room number, street address)

1. Title (General Public Assistance - Cut Off Tickets)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
"Closings A-Z"
or both)

2. Dates 1937
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Drawer labeled "Closings A-Z"
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another
record. Explain why records are missing, if possible)

6. Contents Office copies of General Public Assistance
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
Cut Off tickets kept as a record for statistical
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
purpose; Cut Off tickets show Central Payroll Bureau
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
number; Dept. of Public Welfare number; name and
address of client; amounts of semi-monthly grant from
State and city; number of persons in family; total amount
of grant; amount of monthly grant; race; name of
investigator; inclusive date effective; remarks relating

6. Contents—continued now separated; date approved and signature of Director of Department of Public Welfare; date of Central Payroll Bureau verification.

7. Arrangement Alph. by names of clients
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form, by title and identification number)

9. Writing Typed and handwritten on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel file drawer 6" x 9" x 18" Approx 3400 Tickets
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1939 to date, 1 steel file drawer on south wall in statistical clerks' office.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication)

(Date of publication)

GENERAL PUBLIC ASSISTANCE CUT-OFF TICKET



CENTRAL PAYROLL BUREAU: The general public assistance allowance for the person herein indicated has been discontinued in accordance with the records of this department.

C. P. B. No.....NAME.....

D. P. W. No.....ADDRESS.....

SEMI-MONTHLY GRANT.....STATE \$.....CITY \$.....

No. IN FAMILY.....TOTAL \$.....

MONTHLY GRANT.....\$.....

RACE.....

INVESTIGATOR.....

INCLUSIVE DATE EFFECTIVE.....

NOTE: This cut-off ticket is to be promptly executed in duplicate by the Department of Public Welfare. The original forwarded to the Central Payroll Bureau, and the duplicate retained for record and file.

REMARKS
HOW SEPARATED }

APPROVED:

19.....

(Director Department of Public Welfare)

Central Payroll Bureau Verification

--	--	--	--

Kovaka - Scott
(Worker's full name)

1-5-39
(Date)

37-A
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland
Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)
Address of office of custody 331 St. Paul Place
(Name of building, room number, street address)

1. Title (Statistical Record - General Public Assistance)
"G.P.A. 1937 Active"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1937
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 4 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Drawers labeled "G.P.A. 1937 Active"
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Yearly statistical card records of General Public Assistance of active cases; individual cards show name and address of client; date and reason for closing; name of cooperative agency (if any); Dept. of Public Welfare number; Central Payroll Bureau number; number in family; number of persons 65 and over, 16 to 65 and number under 16 years; category; date case opened; date closed; civil status; family status; color; length of residence; religion; minor (yes or no);
Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record. their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached

6. Contents—continued illegitimacy (yes or no); name of case worker; problems (major and secondary); on reverse side of card, amount of grant; classification of relief (in code); dates carried over; dates of new grant, recurrent grant and date closed; supplementation grant; amounts of emergency (cont. on line 12)
7. Arrangement Alph. by names of clients.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Typed and handwritten on printed cards.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of steel file drawers 6" x 9" x 18" Average 1300 cards per drawer.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities 1937, 4 steel file drawers on west wall in statisticians office.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 6
grant from city and from state; age of person in new case; sex.
Note: City and state reports (monthly and yearly) are made from these records, also referred to for comparison of prior relief allotments.
13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

SCOTT-KOVAKA

(Worker's full name)

1-26-39

(Date)

37-B

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)

Address of office of custody 331 ST. PAUL PLACE
STATISTICAL DIVISION
(Name of building, room number, street address)

1. Title (STATISTICAL CARDS - GENERAL PUBLIC ASSISTANCE - ACTIVE CASES)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1938 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 6 STEEL FILE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling DRAWERS LABELED "EASTERN - SOUTHERN - NORTHERN - WESTERN"
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINING STATISTICAL RECORDS OF ACTIVE CASES RECEIVING GENERAL PUBLIC ASSISTANCE COVERING THE HISTORY OF EACH INDIVIDUAL CASE TO SERVE THE PURPOSE OF PREPARING STATISTICAL REPORTS. -- STATISTICAL CARDS SHOW NAME AND ADDRESS OF MAN OR WOMAN, DEPARTMENT OF PUBLIC WELFARE AND CENTRAL PURCHASING BUREAU NUMBERS, WARD NUMBER, DATE CASE OPENED, DATE CASE CLOSED, NAME OF WORKER, PERSONS IN FAMILY - SHOWING NAME - SEX - DATE, CO-OPERATIVE AGENCY, DATE MADE, DATE CANCELLED, FAMILY STATUS - U.C., MARRIED COUPLE - UNMARRIED COUPLE - UNMARRIED MOTHER - WIDOW - WIDOWER - MAN OR WOMAN - DESERTED - DIVORCED - SEPARATED - MARRIED COUPLE APART-

6. Contents—continued SINGLE MAN OR SINGLE WOMAN - GRANDFATHER - GRANDMOTHER - BROTHER - SISTER - STEPFATHER - STEPMOTHER - STEPBROTHER - STEPSISTER AND UN-ATTACHED, EMPLOYABLES, MALE OR FEMALE, PROBLEMS (MAJOR OR SECONDARY), TYPE OF INDUSTRY AND OCCUPATION, COLOR, RELIGION, YEAR TO CITY, BIRTHPLACE, NATURALIZATION, MINOR, ORPHAN, MIND OR ORPHAN, ILLEGITIMATE, CODE, AMOUNT OF GRANT, NUMBER IN FAMILY WITH AGES RANGING FROM } CONT. ON LINE 12.

7. Arrangement ALPHABETICALLY BY NAMES OF CLIENTS
 (Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
 (Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN AND TYPED ON PRINTED CARDS.
 (Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWERS 6"x9"x18" AVERAGE 1000 CARDS PER DRAWER
 (Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1938 TO DATE 6-STEEL FILE DRAWERS LOCATED ON SOUTH WALL OF STATISTICAL DEPARTMENT.
 (Room. vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information RECORDS AND CONTAINERS ARE IN EXCELLENT CONDITION.
 (Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
CONTINUED FROM LINE 6-} UNDER 16 YEARS TO OVER 65 YEARS; EMERGENCIES
 (Whether record is known to have been kept earlier than dates shown in item 2)
FOR STATE AND CITY AND SUPPLEMENTATION, ALSO IF CASE IS CARRIED OVER FROM PREVIOUS PERIOD-INTAKE REPORT AS TO WHETHER-NEW-OLD-OR RECURRENT, ASSISTED AND

CASE CLOSED.

2-	STEEL FILE DRAWERS	LABELED	"	EASTERN
2-	"	"	"	" SOUTHERN "
1-	"	"	"	" NORTHERN "
1-	"	"	"	" WESTERN "

13. (For use in Florida.) Early imprints _____
 (Author) (Publisher)

 (Place of publication) (Date of publication)

Ward

18

19

E

PE

U

Surname John Doe Man

DPW or CPB No.

Date Opened

Date Closed

R

WORKER

ADC

ATB

Woman

GPA

OAP

Address 1808 Polka Mine
1110 W. 1st St. / Drawer

PERSONS IN FAMILY

Name Sex Date Name Sex Date

Current
all categories

1938 - 1939

Cooper. Agency

Date made

Date canc.

PROBLEMS

Major

Secondary

FAMILY STATUS

Employables

MW MW MW MW
MC UC UM WR DES DIV SEP MCA SM SW

Male 17

GF GM BS SF SM SB SS UA

Female 0

M

W

Industry Engineering - melt cap
Manufacturing

Color P

Religion none

Yr. to City 63

T

Occupation Sample

Birthplace Cheyenne Wyo

Naturaliz. Pole

L

Minor

Orphan

Minor & Orphan

Illeg.

I

H

NUMBER OF

DRAWERS?

5400 Per Year

SCOTT-KOVAKA
(Worker's full name)

1-13-39
(Date)

38-A
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)

Address of office of custody 331 ST. PAUL PLACE
STATISTICAL DIVISION
(Name of building, room number, street address)

1. Title (STATISTICAL CARDS - GENERAL PUBLIC ASSISTANCE - CLOSED CASES)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1933 to 1936
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity STEEL FILE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling DRAWERS NOT LABELED
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINING STATISTICAL RECORDS OF CLOSED CASES HAVING RECEIVED

(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,

GENERAL PUBLIC ASSISTANCE, COVERING THE HISTORY OF EACH INDIVIDUAL
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by

CASE RETAINED FOR THE PURPOSE OF PREPARING STATISTICAL REPORTS
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

AND FOR THE PURPOSE OF COMPARISON. - STATISTICAL CARDS SHOW NAME
AND ADDRESS OF CLIENTS, DATE OF LAST OPENING OF CASE AND DATE OF CLOSING,
DISTRICT FROM WHICH APPLICATION EMANATED, FAMILY STATUS, I.E. MARRIED COUPLE,
UN-MARRIED COUPLE, UN-MARRIED MOTHER, WIDOW, WIDOWER, DESERTED MAN OR WOMAN,
DIVORCED MAN OR WOMAN, SEPARATED MAN OR WOMAN, MARRIED COUPLE - APART, SINGLE
MAN OR WOMAN, ORPHAN, MEMBERS OF HOUSEHOLD, EXACT DATE OF BIRTH OR DEATH,
BIRTHPLACE, LAST OCCUPATION - SHOWING TYPE OF INDUSTRY - WHETHER SKILLED,
UN-SKILLED OR CLERK, MAJOR INTAKE CARE CASES - SHOWING NUMBER CARRIED OVER -
NEW - OLD OR RECURRENT, RECEIVED FROM OTHER DISTRICTS, CLASSIFICATION -

6. Contents—continued SHOWING NUMBER OF ACTIVE RELIEF CASES — ACTIVE SERVICE ONLY — INACTIVE OBLIGATIONS ONLY — INACTIVE, NEEDING ATTENTION; NUMBER OF CASES CLOSED, CARRIED FORWARD FOR RELIEF — CARRIED FORWARD — NO RELIEF AT END OF MONTH. MINOR CARE CASES INVOLVE NUMBER OF DIRECT SERVICE CASES — REPORT ON CLOSED CASES — INVESTIGATED FOR OUT-OF-TOWN AGENCY — OUT-OF-TOWN INQUIRY FORWARDED — INTAKE CLASSIFICATION AND END OF MONTH SET-UP IS IDENTICALLY THE SAME GENERAL INFORMATION AS THAT SHOWN ABOVE RESPECTING — MAJOR CARE CASES. — STATISTICAL CARDS ALSO SHOW OTHER MEMBERS OF THE HOUSEHOLD — SEX — AGE AND RELATIONSHIP, COLOR, PARENTAGE CLASS, RACIAL STOCK, RELIGION, DATE CAME TO THE UNITED STATES AND CITY, NATURALIZATION DATE, } CON'T. ON LINE 12.

7. Arrangement ALPHABETICALLY BY NAMES OF CLIENTS
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN AND TYPED ON PRINTED CARDS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWERS 6" x 9" x 18" — AVERAGE 3500 CARDS PER DRAWER.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1933 TO 1936 STEEL FILE DRAWERS LOCATED ON WEST WALL OF STATISTICAL DIVISION OFFICE.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information RECORDS AND EQUIPMENT ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
CONTINUED FROM LINE 6: — — — 1ST AND 2ND PAPERS OF BOTH MAN OR WOMAN ALSO SHOWS NUMBER OF WORK RELIEF AND DIRECT RELIEF CASES, APPLICATIONS NOT ACCEPTED AND THOSE YET TO BE INVESTIGATED. — REVERSE SIDE OF CARDS GIVES A FULL LIST OF PROBLEMS PRESENTED AND SERVICES RENDERED, BEARING UPON HEALTH MATTERS — INDUSTRIAL MATTERS — BEHAVIOR OR CONDUCT AND OTHER MISCELLANEOUS PROBLEMS OR SERVICES.

NOTE: — THESE CARDS WERE REPLACED BY SLIGHTLY DIFFERENT CARDS IN YEAR 1937 — REFER TO SERIALS FOLLOWING FOR SUBSEQUENT RECORDS.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Check through month symbol
 ✓ problems presented

Check through month symbol
 ✓ for services rendered by us or through our efforts.

PROBLEMS PRESENTED				SERVICES RENDERED			
Member		Month		Member		Month	
A. HEALTH, PHYSICAL							
1. Anemia	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
2. Asthma	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
3. Blindness or sight seriously impaired	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
4. Cancer	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
5. Cardiac	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
6. Convalescence	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
7. Dental care needed	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
8. Diabetes	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
9. Endocrins disturbance	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
10. Epilepsy	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
11. Gonorrhea	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
12. Gynecological	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
13. Hearing seriously impaired	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
14. Malnutrition	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
16. Maternity	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
16. Optical care needed	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
17. Paralyzed or crippled	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
18. Pellagra	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
19. Respiratory system, disease of other than tb.	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
20. Speech impaired	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
21. Syphilis	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
22. Tuberculosis	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
23. Vaginitis	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
24. Other acute illness	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
25. Other chronic illness	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
26. Death	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
B. HEALTH, MENTAL							
27. Mental defectiveness diagnosed	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
28. Mental defectiveness suspected	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
29. Mental disorder suspected	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
30. Neurosis diagnosed	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
31. Psychosis diagnosed	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
32. Other mental disorder diagnosed	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
C. INDUSTRY							
33. Death from indust. accident or occup. dis.	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
34. Disability from indust. accid. or occup. dis.	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
35. Illegal occupation	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
36. Insufficient earnings full time work	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
37. Need for vocational or industrial adjust.	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
38. Sabbath observer	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
39. Seasonal employment	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
40. Strike or lockout	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
41. Underemployment	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
42. Unemployment	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
D. BEHAVIOR							
43. Alcoholism	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
44. Attitude produc. conflict bet. hus. and wife	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
45. Attitude produc. conflict bet. others in fam.	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
46. Attitude produc. conflict with community	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
47. Begging tendency	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
48. Children born out of wedlock	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
49. Drug habit	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
50. Family desertion	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
51. Inadequate parental care	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
52. Irregular school attendance	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
53. Irregular sex relationships	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
64. Juvenile delinquency	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
55. Non-contributing children at home	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
66. Non-support of dependent parents	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
57. Non-support of family	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
58. Non-support of illegitimate child	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
59. Other personality or behavior problems	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
E. OTHER PROBLEMS							
60. Bad housing	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
61. Debt	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
62. Immigration problem	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
63. Imprisonment	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
64. Inability to read or write	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
65. Inability to speak English	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
66. Insurance problem	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
67. Legal entanglements	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
68. Nomadic family	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
69. Non-citizenship	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
70. Non-residence	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
71. Old age	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
72. Orphan	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
73. Overcrowding—more than two to a room	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
74. Poor home-making	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
75. Property entanglements	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
76. Unfriendlyness of relatives	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
77. Widow with dependent children	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
78. Widower with dependent children	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
A. HEALTH, PHYSICAL							
1. Convalescent care	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
2. Dental care	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
3. Inst. care for aged or handicapped (excl. of 11 or 17)	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
4. Nutrition instruction	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
5. Optical care	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
6. Persuaded patient to have treatment	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
7. Persuaded pa. to remain in hosp. or inst.	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
8. Physical examination, no treatment	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
9. Physical treatment—clinic	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
10. Physical treatment—externo or pri. phys.	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
11. Physical treatment—hos. or sanatorium	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
12. Pra-natal or post-natal care	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
13. Surgical appliance secured	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
14. Visiting nurse	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
15. Other adjustment due to physical prob.	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
16. Funeral arrangements	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
B. HEALTH, MENTAL							
17. Care in hospital or custodial institution	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
18. Non-custodial psychiatric treatment	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
19. Psychiatric examination	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
20. Other mental treatment	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
C. INDUSTRY							
21. Business equipment provided	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
22. Compensation adjustment	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
23. Emp. secured—through Fed. Emp. Sarv.	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
24. Emp. sec.—not through Fed. Emp. Sarv.	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
25. Relief work	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
26. Trade training	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
27. Union adjustment	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
28. Vocational guidance	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
29. Wage increase secured	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
30. Other industrial adjustment	9 10 11	12 1 2	3 4 5	6 7 8	9 10 11	12 1 2	3 4 5 6 7 8
D. BEHAVIOR </							

G.P.A

Old Bernard
Obselets

BALTIMORE EMERGENCY RELIEF COMMISSION										Resident (Check)	Transient (Check)	Dist.	Year 1933-34		
Surname Wilson		Given Names Bernard										12			
Address (1) 1314 E. North Ave.		Date of Last Opening 5/28/34			Date of Closing					Family Status (Check) MC UC UM W Wr Des Div Sep MCA SW SW Orph					
(2)										MAJOR CARE CASES					
(3)															
1 Members of Household		Exact date of— Birth Death		Birthplace		Last Occupation				Intake Classification Carried over 9 10 11 12 1 2 3 4 5 6 7 8 New 9 10 11 12 1 2 3 4 5 6 7 8 Old 9 10 11 12 1 2 3 4 5 6 7 8 Recurrent 9 10 11 12 1 2 3 4 5 6 7 8 Rec'd from other dist. 9 10 11 12 1 2 3 4 5 6 7 8 Active—Relief 9 10 11 12 1 2 3 4 5 6 7 8 Active—Service only 9 10 11 12 1 2 3 4 5 6 7 8 Inact.—Obs. only 9 10 11 12 1 2 3 4 5 6 7 8 Inact.—Needing atten. 9 10 11 12 1 2 3 4 5 6 7 8 Closed 9 10 11 12 1 2 3 4 5 6 7 8 Carried for'd—Relief 9 10 11 12 1 2 3 4 5 6 7 8 Carried for'd—No rel. 9 10 11 12 1 2 3 4 5 6 7 8					
1 Man Bernard		6/15/10		Ga.		Text. & Cloth. Spinner									
2 Woman															
3 Children															
4															
5															
6															
7															
8															
9															
10															
11															
12 Others in Household		Sex 16+ 16-		Relation		RELIEF				MINOR CARE CASES					
13						Work relief 9 10 11 12 1 2 3 4 5 6 7 8				Direct service 9 10 11 12 1 2 3 4 5 6 7 8					
14						Direct relief only 9 10 11 12 1 2 3 4 5 6 7 8				Report on closed case 9 10 11 12 1 2 3 4 5 6 7 8					
						Work relief & direct relief (1) 9 10 11 12 1 2 3 4 5 6 7 8				Inves. for O. T. agency 9 10 11 12 1 2 3 4 5 6 7 8					
Color White		Parentage Class N.P.		Racial Stock French		Religion None						O. T. inquiry forwarded 9 10 11 12 1 2 3 4 5 6 7 8			
Date Came to— U. S. City		Naturalization Date 1st Papers 2nd Papers		APPLICATION ONLY											
Man 2/15/34				Application accepted not											
Woman				yet investigated 9 10 11 12 1 2 3 4 5 6 7 8											
								Carried over 9 10 11 12 1 2 3 4 5 6 7 8							
								New 9 10 11 12 1 2 3 4 5 6 7 8							
								Old 9 10 11 12 1 2 3 4 5 6 7 8							
								Recurrent 9 10 11 12 1 2 3 4 5 6 7 8							
								Rec'd from other dist. 9 10 11 12 1 2 3 4 5 6 7 8							
								Relief 9 10 11 12 1 2 3 4 5 6 7 8							
								Service only 9 10 11 12 1 2 3 4 5 6 7 8							
								Closed 9 10 11 12 1 2 3 4 5 6 7 8							
								Carried for'd—relief 9 10 11 12 1 2 3 4 5 6 7 8							
								Carried for'd—no rel. 9 10 11 12 1 2 3 4 5 6 7 8							

(1) This figure is included in above figure for "Work relief."

SCOTT-KOVAKA

(Worker's full name)

1-27-39

(Date)

38-B

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)

Address of office of custody 331 ST. PAUL PLACE
STATISTICAL DIVISION
(Name of building, room number, street address)

1. Title (STATISTICAL CARDS - GENERAL PUBLIC ASSISTANCE - CLOSED CASES)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
"CLOSINGS"

or both)

2. Dates 1937--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 6 STEEL FILE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling DRAWERS LABELED AS SHOWN ON LINE 12.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINING STATISTICAL RECORDS OF CLOSED CASES HAVING RECEIVED
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
GENERAL PUBLIC ASSISTANCE, COVERING THE HISTORY OF EACH INDIVIDUAL CASE
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
RETAINED FOR THE PURPOSE OF PREPARING STATISTICAL REPORTS. - STATISTICAL
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
CARDS SHOW NAME AND ADDRESS OF MAN OR WOMAN, DEPARTMENT OF PUBLIC WELFARE
AND CENTRAL PURCHASING BUREAU NUMBERS, WARD NUMBER, DATE CASE OPENED, DATE
CASE CLOSED, NAME OF WORKER, PERSONS IN FAMILY - SHOWING NAME - SEX - DATE, CO-OPERATIVE,
AGENCY, DATE MADE, DATE CANCELLED, FAMILY STATUS - U.S. = MARRIED COUPLE - UNMARRIED
COUPLE - UNMARRIED MOTHER - WIDOW - WIDOWER - MAN OR WOMAN - DESERTED - DIVORCED - SEPARATED

6. Contents—continued MARRIED COUPLE APART - SINGLE MAN OR SINGLE WOMAN - GRANDFATHER - GRAND-MOTHER - BROTHER - SISTER - STEPFATHER - STEPMOTHER - STEPBROTHER - STEPSISTER AND UN-ATTACHED EMPLOYABLES, MALE OR FEMALE, PROBLEMS (MAJOR OR SECONDARY), TYPE OF INDUSTRY AND OCCUPATION, COLOR, RELIGION, YEAR TO CITY, BIRTHPLACE, NATURALIZATION, MINOR, ORPHAN, MINOR AND ORPHAN, ILLEGITIMATE, CODE, AMOUNT OF GRANT, NUMBER IN FAMILY WITH AGES RANGING FROM UNDER 16 YEARS TO OVER 16 } CON'T. ON LINE 12.

7. Arrangement ALPHABETICALLY BY NAMES OF CLIENTS
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN AND TYPED ON PRINTED CARDS
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWERS 6" x 9" x 18" AVERAGE 1000 CARDS PER DRAWER.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1937 TO DATE 6-STEEL FILE DRAWERS, LOCATED ON SOUTH WALL OF STATISTICAL DEPARTMENT.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information RECORDS AND EQUIPMENT ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

CONTINUED FROM LINE 6: } 65 YEARS, EMERGENCIES FOR STATE AND CITY AND SUPPLEMENTATION, ALSO IF CASE IS CARRIED OVER FROM PREVIOUS-INTAKE REPORT AS TO

- WHETHER-NEW-OLD OR RECURRENT, ASSISTED AND CASE CLOSED.
- 1-DRAWER LABELED "CLOSINGS 1937"
 - 1-DRAWER LABELED "CLOSINGS - JAN. FEB. MARCH 1938"
 - 1- " " "CLOSINGS - APR. MAY 1938"
 - 1- " " "CLOSINGS - JUNE, JULY 1938"
 - 1- " " "CLOSINGS - AUG. OCT. 1938"
 - 1- " " "CLOSINGS - NOV. DEC. "

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

Kovack-Scott

(Worker's full name)

1-26-39

(Date)

39

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City _____ State Maryland

Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)

Address of office of custody 331 St. Paul Place
(Name of building, room number, street address)

1. Title (Aid To Dependent Children Allowance - Entry Tickets)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1938 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling 1st. drawer labeled A-O; 2nd drawer is not labeled.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None.
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Office copies of Aid To Dependent Children Allowance Entry Tickets kept as a record for statistical purposes; entry tickets show name of investigator; Central Payroll Bureau number; Dept. of Welfare number; name and address of client; amounts of semi-monthly grant from state and city; number of persons in family; total amount of grant; amount of monthly grant; race; date effective; remarks relative to client's circumstances, health of child, unsuitable
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued home, addition in family group, insufficient income; date approved and signature of Director, Dept. of Public Welfare; date of Central Payroll Bureau verification.

7. Arrangement Alph. by names of clients.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on printed forms
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel file drawer 6" x 9" x 18" Average 4000 per drawer.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1938 to date 2 steel file drawers
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
on south wall in statistical clerk's office.

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication)

(Date of publication)

Investigator.....

DEPARTMENT OF PUBLIC WELFARE

Aid to Dependent Children Allowance
ENTRY TICKET

39

CENTRAL PAYROLL BUREAU: The person herein indicated has met the requirements of this department relative to aid to dependent children allowance which is hereby certified correct for payroll purposes until further notice.

C. P. B. No.....NAME.....

REMARKS:.....

D. P. W. No.....ADDRESS.....

SEMI-MONTHLY GRANT.....STATE \$.....CITY \$.....

FAMILY GROUP.....TOTAL \$.....

APPROVED:.....

MONTHLY GRANT.....\$.....

.....19.....

RACE

(Director Department of Public Welfare)

DATE EFFECTIVE

Central Payroll Bureau Verification

NOTE: This entry ticket is to be promptly executed in duplicate by the Department of Public Welfare. The original forwarded to the Central Payroll Bureau, and the duplicate retained for record and file.

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Kovaka-Scott
(Worker's full name)

1-27-39
(Date)

40
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)

Address of office of custody 331 St. Paul Place
(Name of building, room number, street address)

1. Title (Aid To Dependent Children - Emergency Allowance Tickets) "Emergencies"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1938--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Drawer labeled "Emergencies A-2"
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Office copies of emergency allowance tickets kept as a record for statistical purpose, data transferred to their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by statistical card record; emergency allowance tickets show name of investigator; Central Payroll Bureau number; Dept. of Public Welfare number; name and address of client; race and number of persons in family group; amount of semi-monthly state grant; effective date of semi-monthly state grant; reason for emergency allowance; date of entry on emergency payroll;
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record. Each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued amounts of emergency allowance from state and city, and total; remarks concerning the budget of client and circumstances developed since receiving last check; date approved and signature of officer in financial division.

7. Arrangement Alph. by names of clients.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel file drawer 6" x 9" x 18" Approx. 3000 Tickets
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1938 to date, 1 steel file drawer on south wall in statistical clerk's office.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication)

(Date of publication)

**DEPARTMENT OF PUBLIC WELFARE
AID TO DEPENDENT CHILDREN
EMERGENCY ALLOWANCE**

(40)

CENTRAL PAYROLL BUREAU: THE PERSON HEREIN INDICATED HAS MET THE REQUIREMENTS OF THIS DEPARTMENT RELATIVE TO AID TO DEPENDENT CHILDREN EMERGENCY ALLOWANCE, WHICH IS HEREBY CERTIFIED CORRECT FOR PAYROLL PURPOSES.

EMERGENCY ALLOWANCE		
STATE	CITY	TOTAL
REMARKS		
APPROVED _____ 19____		
FINANCIAL DIVISION		

C. P. B. NO. _____ NAME _____	
D. P. W. NO. _____ ADDRESS _____	
RACE _____ FAMILY GROUP _____	
SEMI-MONTHLY STATE GRANT _____ \$ _____	
EFFECTIVE DATE SEMI-MONTHLY STATE GRANT _____	
REASON FOR EMERGENCY ALLOWANCE _____	
ENTRY ON EMERGENCY PAYROLL ENDING _____	

NOTE: THIS EMERGENCY ALLOWANCE TICKET IS TO BE PROMPTLY EXECUTED IN DUPLICATE BY THE DEPARTMENT OF PUBLIC WELFARE. THE ORIGINAL FORWARDED TO THE CENTRAL PAYROLL BUREAU, AND THE DUPLICATE RETAINED FOR RECORD AND FILE.

SCOTT-KOVAKA
(Worker's full name)

1-23-39
(Date)

41
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND
Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)
Address of office of custody 331 ST. PAUL PLACE
(Name of building, room number, street address)
STATISTICAL DIVISION

1. Title (CHANGE TICKET - AID TO DEPENDENT CHILDREN ALLOWANCE)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities)

or both)

2. Dates 1938 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 - STEEL FILE DRAWER
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling DRAWER LABELED "CHANGES A TO Z"
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINING AID TO DEPENDENT CHILDREN ALLOWANCE CHANGE
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
TICKETS RESPECTING CHANGES IN AMOUNT OF BUDGETS AND ADDRESSES OF CLIENTS FOR THE PURPOSE OF REVISING PAYROLL FIGURES AND STATISTICAL RECORDS. CHANGE TICKETS SHOW INVESTIGATOR'S NAME, CENTRAL PAYROLL BUREAU AND DEPARTMENT OF PUBLIC WELFARE NUMBERS, AMOUNTS OF OLD AND NEW, SEMI-MONTHLY AND MONTHLY, STATE AND CITY, GRANTS WITH TOTALS, NAME OF CLIENT, NEW ADDRESS, FORMER ADDRESS, RACE, FAMILY GROUP CHANGED FROM - TO, DATE EFFECTIVE, REMARKS

6. Contents—continued RELATIVE TO REASON OF CHANGE AND DATE OF APPROVAL; ALSO CENTRAL PAYROLL BUREAU VERIFICATION.

7. Arrangement ALPHABETICALLY BY NAMES OF CLIENTS
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN AND TYPED ON PRINTED FORMS
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWER 6" x 9" x 18" AVERAGE 4000 TICKETS PER DRAWER
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1938 TO DATE - 1-STEEL FILE DRAWER, LOCATED ON SOUTH WALL OF STATISTICAL DEPARTMENT.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information RECORDS AND EQUIPMENT ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____ (Author) _____ (Publisher)

(Place of publication)

(Date of publication)

Investigator.....

DEPARTMENT OF PUBLIC WELFARE

Aid to Dependent Children Allowance

(41)

CHANGE TICKET

CENTRAL PAYROLL BUREAU: The aid to dependent children allowance for the person herein indicated has been changed in accordance with the requirements of this department and is hereby certified correct for payroll purposes until further notice.

	OLD GRANT		NEW GRANT	
	SEMI-MONTHLY		SEMI-MONTHLY	
C. P. B. No.....	STATE \$	CITY \$	STATE \$	CITY \$
D. P. W. No.....	MONTHLY	TOTAL \$	MONTHLY	TOTAL \$

NAME.....

REMARKS:.....

NEW ADDRESS.....

FORMER ADDRESS.....

APPROVED:.....

RACE..... Family Group: From..... to.....

.....19.....

DATE EFFECTIVE.....

(Director Department of Public Welfare)

NOTE: This change ticket is to be promptly executed in duplicate by the Department of Public Welfare. The original forwarded to the Central Payroll Bureau, and the duplicate retained for record and file.

Central Payroll Bureau Verification

SCOTT - KOVAKA
(Worker's full name)

1-20-39
(Date)

42
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND
Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)
Address of office of custody 331 ST. PAUL PLACE
(Name of building, room number, street address)
STATISTICAL DIVISION

- Title (CUT-OFF TICKET-AID TO DEPENDENT CHILDREN ALLOWANCE)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
- Dates 1937--
(Earliest and latest dates; missing dates. Show exact date of breaks)
- Quantity 2 - STEEL FILE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other)
- Labeling DRAWERS LABELED - "CLOSINGS A TO O - P TO Z"
(Explain fully; years; numbers; letters; number of records so labeled)
- Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents CONTAINING CUT-OFF TICKETS RESPECTING AID TO DEPENDENT CHILDREN INCIDENT TO MEMBERS OF THE FAMILY OR OTHER RESPONSIBLE PARTIES HAVING SECURED EMPLOYMENT IN PRIVATE INDUSTRIES, FINANCIAL ADJUSTMENTS, MISREPRESENTATIONS, WORKS PROGRESS ADMINISTRATION PLACEMENTS, MOVED OR UNABLE TO LOCATE, INCOME SUFFICIENT, TRANSFERRED TO ANOTHER TYPE OF ASSISTANCE, CHANGE OF PAYEE, INSURANCE ADJUSTMENTS, LEGAL RESPONSIBILITY, NONE RESIDENCE, RESOURCES AVAILABLE, CASE COMBINATION, UNEMPLOYMENT COMPENSATION, RELATIVES ASSUMED CARE, MATURITY, DEATHS, INELIGIBLE UNDER
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued PHYSICAL INCAPACITY, PLACED IN INSTITUTION, PLACED OUT OF HOME, PLACED WITH RELATIVES, FULL TIME EMPLOYMENT AND REFUSAL TO ACCEPT DEPARTMENT OF PUBLIC WELFARE PLAN, } WHICH INFORMATION IS TRANSCRIBED TO STATISTICAL CARDS AND FOR USE IN COMPILING CITY AND STATE (MONTHLY AND YEARLY) STATISTICAL REPORTS AS WELL AS FOR COMPARISON PURPOSES OF PREVIOUS RELIEF CASE LOAD ALLOTMENTS AND DISTRIBUTIONS. (CONT. LINE 12)
7. Arrangement ALPHABETICALLY BY NAMES OF CLIENTS
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing HANDWRITTEN AND TYPED ON PRINTED FORMS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF STEEL FILE DRAWERS 6" x 9" x 18" AVERAGE 4000 TICKETS PER DRAWER.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities 1937 TO DATE - 2 STEEL FILE DRAWERS, LOCATED ON SOUTH WALL OF STATISTICAL CLERK'S OFFICE
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information RECORDS AND EQUIPMENT ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
CONTINUED FROM LINE 6: - CUT-OFF TICKETS SHOW NAME AND ADDRESS OF CLIENT, CENTRAL PURCHASING BUREAU AND DEPT. OF PUBLIC WELFARE NUMBERS, AMOUNT OF PER ANNUM ALLOWANCE AND AMOUNT OF SEMI-MONTHLY RATE, INCLUSIVE DATE, RACE, DATE ISSUED, REMARKS INDICATING REASONS OF CUT-OFF, NUMBER IN FAMILY, DATE OF APPROVAL OF CUT-OFF, CENTRAL PAYROLL BUREAU VERIFICATION AND CASE WORKER'S NUMBER AND NAME. NOTE: - THESE PARTICULAR RECORDS WILL NO LONGER BE RETAINED AFTER FEBRUARY 1939, BUT HOWEVER THE INFORMATION CONTAINED THEREIN WILL BE TRANSFERRED TO PERMANENT
13. ~~STATISTICAL CARD RECORD FILES.~~ STATISTICAL CARD RECORD FILES.
(Author) (Publisher)

(Place of publication)

(Date of publication)

DEPARTMENT OF PUBLIC WELFARE

Aid to Dependent Children Allowance

42

CUT-OFF TICKET

CENTRAL PAYROLL BUREAU: The aid to dependent children allowance for the person herein indicated has been discontinued in accordance with the records of this department.

NAME C. P. B. No.

ADDRESS D. P. W. No.

PER ANNUM ALLOWANCE \$

SEMI-MONTHLY RATE \$

INCLUSIVE DATE

RACE

DATE ISSUED

REMARKS
HOW SEPARATED }

NO. IN FAMILY
APPROVED:

19.....

(Director Department of Public Welfare)

Central Payroll Bureau Verification

NOTE: This cut-off ticket is to be promptly executed in duplicate by the Department of Public Welfare. The original forwarded to the Central Payroll Bureau, and the duplicate retained for record and file.

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Kovaka-Scott
(Worker's full name)

1-25-39
(Date)

44
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland
Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)
Address of office of custody 331 St. Paul Place.
(Name of building, room number, street address)

1. Title (Old-Age Pension ~~~~ Change Tickets)
"Changes A-Z"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1938--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Drawer labeled "Changes A-Z".
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Office copies of change tickets kept as a record of
certifications of changes in old age pension allowances;
changes of allowances transferred from this ticket to
statistical record; change ticket shows Central Payroll
Bureau number; Dept. of Public Welfare number; name and
address of client; amount of semi-monthly grant and
amount of grant per month of old grant; amount of semi-
monthly grant and amount of grant per month of new

6. Contents—continued grant; race; number in family and inclusive dates; name of investigator; date effective; former address of client; remarks relative to change of address, change of budget and family status.

7. Arrangement Alph. by names of clients
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel file drawer 6"X9"X18" Approx. 300 tickets.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1938 to date, 1 steel file drawer on south wall in statistical clerks' office.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

OLD-AGE PENSION CHANGE TICKET

HH

CENTRAL PAYROLL BUREAU: The old-age pension for the person herein indicated has been changed in accordance with the requirements of this department and is hereby certified correct for payroll purposes until further notice.

C. P. B. No. NAME

..... FORMER ADDRESS

D. P. W. No. ADDRESS

OLD GRANT		NEW GRANT	
SEMI-MONTHLY	\$	SEMI-MONTHLY	\$
PER MONTH	\$	PER MONTH	\$

REMARKS:

RACE No. in Family: From to

APPROVED:

INVESTIGATOR

..... 19

DATE EFFECTIVE

(Director Department of Public Welfare)

NOTE: This change ticket is to be promptly executed in duplicate by the Department of Public Welfare. The original forwarded to the Central Payroll Bureau, and the duplicate retained for record and file.

Central Payroll Bureau Verification

Kouka-Scott
(Worker's full name)

1-23-39
(Date)

43
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland
Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)
Address of office of custody 331 St. Paul Place.
(Name of building, room number, street address)

- Title (Old-Age Pension Entry Tickets)
"Entries"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
- Dates 1936--
(Earliest and latest dates; missing dates. Show exact date of breaks)
- Quantity 2 steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)
- Labeling Drawers labeled "Entries A-K; Entries L-Z."
(Explain fully; years; numbers; letters; number of records so labeled)
- Discontinued and missing records None.
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)
- Contents Office copies of entry tickets kept as record of certifications and grants; statistical card record also transcribed from this ticket; tickets show central Payroll Bureau number; Dept. of Public Welfare number; name and address of client; amount of semi-monthly grant; number in family; amount of monthly grant; race; date of birth; name of investigator; date effective; remarks relative to client and circumstances; date approved and signature of

6. Contents—continued Director of Dept. of Public Welfare; date of Central Payroll Bureau verification.

7. Arrangement Alph. by names of clients.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel drawers 6" x 9" x 18" Average 3200 per drawer
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1936 to date, 2 steel file drawers on south wall in statistical clerk's office.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

OLD-AGE PENSION ENTRY TICKET

43

CENTRAL PAYROLL BUREAU: The person herein indicated has met the requirements of this department relative to old-age assistance which is hereby certified correct for payroll purposes until further notice.

C. P. B. No.....NAME.....

REMARKS:.....

D. P. W. No.....ADDRESS.....

SEMI-MONTHLY GRANT.....\$.....

No. IN FAMILY.....

MONTHLY GRANT.....\$.....

RACE.....DATE OF BIRTH.....

APPROVED:.....

INVESTIGATOR.....

.....19.....

DATE EFFECTIVE.....

(Director Department of Public Welfare)

NOTE: This entry ticket is to be promptly executed in duplicate by the Department of Public Welfare. The original forwarded to the Central Payroll Bureau, and the duplicate retained for record and file.

Central Payroll Bureau Verification

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Kovaka-Scott
(Worker's full name)

1-25-39
(Date)

44-A ✓
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland
Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)
Address of office of custody 331 St. Paul Place
(Name of building, room number, street address)

1. Title (Old Age Assistance - Grant Authorizations - Pending Cases) "Pending A-Z"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1937--
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling Drawer labeled "Pending A-Z"
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Office copies of Old Age Assistance grant authorizations kept as a record of client's change of address, change of grants and change of case worker; record of changes are transferred to statistical card record; grant authorization ticket shows payroll number; welfare number; dates shown opposite headings viz: entry, change, emergency, fuel, ice and cut-off; name of client, old address; old semi-monthly grant showing amounts from state, city, total and monthly;
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record. Each, should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued name of client and new address; new semi-monthly grant showing amounts from state, city, total and monthly; amount of one time emergency payment; changes of number of persons in family; date of birth; race; religion; date issued; date effective; remarks relative to reason for change of grant; (cont. on line 12)

7. Arrangement Alph. by names of clients
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None.
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel file drawer 6" x 9" x 18" Approx. 300 tickets
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1937, 1 steel file drawer on south wall in statistical clerk's office.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 6 ~~~~~ check mark or date check delivered opposite heading Deliver Checks; signatures of investigator, supervisor, field supervisor and assistant director; also initials of officer in financial division; amounts of old and new grants.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

GRANT AUTHORIZATION

CENTRAL PAYROLL BUREAU

1

PAYROLL NO.

WELFARE NO.

OLD AGE ASSISTANCE

ENTRY

CHANGE

EMERGENCY

FUEL

ICE

CUT OFF

NAME (PRINT)

ADDRESS (PRINT)

TO

NAME (PRINT)

ADDRESS (PRINT)

SEMI-MONTHLY GRANT

STATE	CITY	TOTAL	MONTHLY
-------	------	-------	---------

SEMI-MONTHLY GRANT

STATE	CITY	TOTAL	MONTHLY
-------	------	-------	---------

\$ \$ \$ \$

\$ \$ \$ \$

ONE TIME EMERGENCY PAYMENT

\$

OLD

NUMBER IN FAMILY

TO

NUMBER IN FAMILY

DATE OF BIRTH

RACE

RELIGION

DATE ISSUED

DATE EFFECTIVE

44-A

REMARKS:

NEW

DELIVER CHECK

APPROVED:

FIELD SUPERVISOR

FIN. DIV.

INVESTIGATOR

SUPERVISOR

ASST. DIRECTOR

INITIALS

Kovaka-Scott
(Worker's full name)

1-23-39
(Date)

45
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland
Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)
Address of office of custody 331 St. Paul Place.
(Name of building, room number, street address)

1. Title (Old-Age Pension—Cut-Off Tickets)
"Closings"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1936--
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling Drawer labeled "Closings A-Z"
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Office copies of cut-off tickets kept as a record of discontinued old age pensions; also for transcription of dates and reasons of discontinuances to statistical cards; tickets show case worker number and name; Central Payroll Bureau number; Dept. of Public Welfare number; name and address of client; number in family; semi-monthly rate; per annum allowance; race; date effective; remarks-how separated (such as person not eligible; under 65; deceased; can-not prove citizenship; refusal of

6. Contents—continued assignment of insurance; etc.); date approved and signature of Director Dept. of Public Welfare; date of Central Payroll Bureau verification.

7. Arrangement Alph. by names of clients.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel file drawer 6" x 9" x 18" Approx. 2500 tickets.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1936 to date, 1 steel file drawer on west wall in Statistical clerks' office.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Case Worker No.....Name.....

DEPARTMENT OF PUBLIC WELFARE

OLD - AGE PENSION
CUT - OFF TICKET

45

CENTRAL PAYROLL BUREAU: The old-age pension for the person herein indicated has been discontinued in accordance with the records of this department.

C. P. B. No.....NAME.....

D. P. W. No.....ADDRESS.....

No. IN FAMILY.....

SEMI-MONTHLY RATE..... \$.....

PER ANNUM ALLOWANCE..... \$.....

RACE.....

DATE EFFECTIVE.....

REMARKS
HOW SEPARATED }

APPROVED:

19.....

(Director Department Public Welfare)

Central Payroll Bureau Verification

NOTE: This cut-off ticket is to be promptly executed in duplicate by the Department of Public Welfare. The original forwarded to the Central Payroll Bureau, and the duplicate retained for record and file.

SCOTT-KOVAKA
(Worker's full name)

1-20-39
(Date)

46[✓]
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County BALTIMORE CITY State MARYLAND
Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)
Address of office of custody 331 ST. PAUL PLACE
(Name of building, room number, street address)
STATISTICAL DIVISION

1. Title (MATURITY RECORD - ACTIVE CASES - AID TO DEPENDENT CHILDREN)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
2. Dates 1933--
(Earliest and latest dates; missing dates. Show exact date of breaks)
3. Quantity 4-STEEL FILE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other)
4. Labeling DRAWERS NOT LABELED
(Explain fully; years; numbers; letters; number of records so labeled)
5. Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

- ✓ 6. Contents CONTAINING RECORD OF ACTIVE CASES OF DEPENDENT CHILDREN
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by individual is still eligible to receive aid the case is then transferred over to general public assistance for necessary relief - cards show case number, payroll number, number in family, number of children, maturity date, name and address of payee.)
PENDING MATURITY AT AGE OF 16 YEARS, AFTER WHICH TIME IF THE
INDIVIDUAL IS STILL ELIGIBLE TO RECEIVE AID THE CASE IS THEN
TRANSFERRED OVER TO GENERAL PUBLIC ASSISTANCE FOR NECESSARY
RELIEF - CARDS SHOW CASE NUMBER, PAYROLL NUMBER, NUMBER IN
FAMILY, NUMBER OF CHILDREN, MATURITY DATE, NAME AND ADDRESS
OF PAYEE.

6. Contents—continued _____

7. Arrangement ALPHABETICALLY BY NAME OF CLIENT
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN AND TYPED ON PRINTED CARDS
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWERS 4" x 5 1/2" x 24" - AVERAGE 3000 CARDS
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
PER DRAWER

11. Location by dates and quantities 1933 To Date, 4 - STEEL FILE DRAWERS, LOCATED
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
ON THE WEST WALL OF STATISTICAL DIVISION CLERK'S OFFICE.

12. Other information RECORDS AND EQUIPMENT ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

SCOTT-KOVAKA
(Worker's full name)

1-19-39
(Date)

47
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~1~~ BALTIMORE CITY State MARYLAND
Name of agency or office DEPARTMENT OF PUBLIC WELFARE
(Office of custody) (Office which made the record, if different)
Address of office of custody 331 ST. PAUL PLACE
(Name of building, room number, street address)
STATISTICAL DIVISION

- Title "CLOSED ADC. MATURITY"
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
or both) (MATURITY RECORD - CLOSED CASES - AID TO DEPENDENT CHILDREN)
- Dates 1933--
(Earliest and latest dates; missing dates. Show exact date of breaks)
- Quantity 3-STEEL FILE DRAWERS
(Number of volumes; file drawers; file boxes; bundles; other)
- Labeling AS SHOWN ON LINE 1.
(Explain fully; years; numbers; letters; number of records so labeled)
- Discontinued and missing records NONE
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)
- Contents CONTAINING RECORD OF CLOSED CASES OF DEPENDENT CHILDREN
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
HAVING REACHED THE AGE OF MATURITY (16 YEARS) WHICH IS THE CASE STILL JUSTIFIES RELIEF IS THEN TRANSFERRED OVER TO GENERAL PUBLIC ASSISTANCE.
CARDS SHOW CASE NUMBER, PAYROLL NUMBER, NUMBER IN FAMILY, NUMBER OF CHILDREN, MATURITY DATE, NAME AND ADDRESS OF PAYEE.
NOTE :- DATE OF CLOSING IS REPRESENTED BY DATE OF MATURITY OF CHILD AT AGE OF 16 YEARS.

6. Contents—continued _____

7. Arrangement ALPHABETICALLY BY NAME OF CLIENT
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing HANDWRITTEN AND TYPED ON PRINTED CARDS
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size OF STEEL FILE DRAWERS 4" x 5 1/2" x 24" - AVERAGE 2000 CARDS PER
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
DRAWER.

11. Location by dates and quantities 1933 TO DATE - 3 - STEEL FILE DRAWERS, LOCATED
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
ON THE WEST WALL OF STATISTICAL DIVISION CLERK'S OFFICE.

12. Other information RECORDS AND EQUIPMENT ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Kovaka-Scott
(Worker's full name)

1-24-39
(Date)

48
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record if different)

Address of office of custody 331 St. Paul Place
(Name of building, room number, street address)

1. Title (Assistance To The Blind-Entry Tickets)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
"A.T.B."

2. Dates 1938--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Drawer labeled A.T.B.
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Office copies of entry tickets kept as a record of certifications and grants; statistical record transcribed from this ticket; ticket shows name of case worker; Central Payroll Bureau number; Dept. of Public Welfare number; name and address of client; number in family; semi-monthly rate; per annum allowance; race; date effective; remarks relative to circumstances of client; date approved and signature of Director of Dept. of Public Welfare; date
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued of Central Payroll Bureau verification.

7. Arrangement Alph. by names of clients
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel drawer 6" x 9" x 18" Approx. 100 tickets
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1938 to date, 1 steel file drawer on south wall in statistical clerk's office.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

Case Worker.....

DEPARTMENT OF PUBLIC WELFARE

ASSISTANCE TO THE BLIND
ENTRY TICKET

48

CENTRAL PAYROLL BUREAU: The person herein indicated has met the requirements of this department relative to assistance to the blind which is hereby certified correct for payroll purposes until further notice.

C. P. B. No..... NAME.....

D. P. W. No..... ADDRESS.....

No. IN FAMILY.....

SEMI-MONTHLY RATE..... \$.....

PER ANNUM ALLOWANCE..... \$.....

RACE.....

DATE EFFECTIVE.....

REMARKS.....

APPROVED:.....

19.....

(Director Department of Public Welfare)

Central Payroll Bureau Verification

NOTE: This entry ticket is to be promptly executed in duplicate by the Department of Public Welfare. The original forwarded to the Central Payroll Bureau, and the duplicate retained for record and file.

Kovaka-Scott
(Worker's full name)

1-31-39
(Date)

49
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland
Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)
Address of office of custody 331 St. Paul Place
(Name of building, room number, street address)

1. Title (Assistance To Blind-Change Tickets)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1938--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Drawer not labeled
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Office copies of change tickets kept as a record of changes in drafts and changes of their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached
addresses; record of changes are transferred to individual statistical record of client; change ticket shows case worker, number and name; old and new Dept. of Public Welfare case numbers; old and new Central Payroll Bureau payroll numbers; old rate for per annum and semi-monthly; new rate for per

6. Contents—continued annum and semi-monthly; name and new address of client; former address; date effective; race; remarks relative to changes made; date approved and signature of Director of Dept. of Public Welfare; also date of Central Payroll Bureau Verification.

7. Arrangement Alph. by names of clients.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel file drawer 6" x 9" x 18" Approx 200 tickets.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1938 to date, 1 steel file drawer on south wall in statistical clerk's office.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

Case Worker No. Name

DEPARTMENT OF PUBLIC WELFARE
ASSISTANCE TO THE BLIND
CHANGE TICKET

49

CENTRAL PAYROLL BUREAU: The assistance to the blind allowance for the person herein indicated has been changed in accordance with the requirements of this department and is hereby certified correct for payroll purposes until further notice.

D. P. W. CASE NUMBER		C. P. B. PAYROLL NUMBER		OLD RATE		NEW RATE	
OLD	NEW	OLD	NEW	PER ANNUM		PER ANNUM	
					\$		\$
				SEMI-MONTHLY		SEMI-MONTHLY	
					\$		\$

NAME.....
NEW ADDRESS.....
FORMER ADDRESS.....
DATE EFFECTIVE.....
RACE.....

REMARKS:.....
.....
.....
APPROVED:.....
..... 19.....

NOTE: This change ticket is to be promptly executed in duplicate by the Department of Public Welfare. The original forwarded to the Central Payroll Bureau, and the duplicate retained for record and file.

.....
(Director Department of Public Welfare)
.....
Central Payroll Bureau Verification
.....

47A

CHECK FOR ASSISTANCE TO THE BLIND CUT OFF TICKET.

Grant Authorization
Entry Ticket
Change Ticket
Outoff Ticket

Statistical Report. } Grant Authorization
Emergency
Entry Ticket
Change Ticket
Outoff Ticket

U.P.A. }
C.A.A. }
A to B }
A.D.C. }

Entry
Grant Authorization
Change
Emergency
Outoff Ticket

SERIAL # 1.1

SERIAL 2 -

Kovach-Scott
(Worker's full name)

1-31-39
(Date)

50[✓]
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland
Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)
Address of office of custody 331 St. Paul Place.
(Name of building, room number, street address)

1. Title (Assistance To The Blind - Cut Off Tickets)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities

or both)

2. Dates 1938--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Drawer not labeled
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Office copies of cut-off tickets kept as a record of separations from the Dept. of Public Welfare; record of their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by cut-off is transferred to individual statistical card record of client; cut-off ticket shows case worker number and name; Central Payroll Bureau number; Dept. of Public Welfare number; name and address of client; number in family; semi-monthly rate; amount of per annum allowance; race; date effective; remarks,
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued relating how separated; date approved and signature of Director of Dept. of Public Welfare, also date of Central Payroll Bureau verification.

7. Arrangement Alph. by names of clients.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on printed form.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel file drawer 6"x9"x18" Approx. 300 tickets
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1938 to date, 1 steel file drawer on south wall in statistical clerk's office.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records. Whether record is known to have been kept earlier than dates shown in item 2)

13. (For use in Florida.) Early imprints
(Author) (Publisher)
(Place of publication) (Date of publication)

Case Worker No. Name

DEPARTMENT OF PUBLIC WELFARE

ASSISTANCE TO THE BLIND
CUT-OFF TICKET

50

CENTRAL PAYROLL BUREAU: The assistance to the blind allowance for the person herein indicated has been discontinued in accordance with the records of this department.

C. P. B. No. NAME

D. P. W. No. ADDRESS

No. IN FAMILY

SEMI-MONTHLY RATE \$

PER ANNUM ALLOWANCE \$

RACE

DATE EFFECTIVE

REMARKS
HOW SEPARATED }

APPROVED:

19.....

(Director Department of Public Welfare)

Central Payroll Bureau Verification

NOTE: This cut-off ticket is to be promptly executed in duplicate by the Department of Public Welfare. The original forwarded to the Central Payroll Bureau, and the duplicate retained for record and file.

51A } A.D.C. 1936--
51B } " Clear Cases 1936--
52 } ✓

Kovaka-Scott
(Worker's full name)

1-5-39
(Date)

51-A
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)

Address of office of custody 331 St Paul Place
(Name of building, room number, street address)

1. Title (Statistical Record - Aid To Dependent Children)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
"A.D.C. Active Cases - 1936"
or both)

2. Dates 1936-1937
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 6 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling 3 Drawers labeled A.D.C. Active Cases - 1936 (Continue on line 12)
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Yearly statistical card record of active cases, monthly and yearly reports for state and city are prepared from this
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by record covering entire history of individual, the family group and the distribution of allowances, also referred to for comparison of prior relief received by the clients; cards show name and address of client; date and reason for closing; name of cooperative agency (if any); Dept. of Public Welfare number; Central Payroll Bureau number; number in family; number of persons 65 and over, 16 to 65 and

6. Contents—continued number under 16 years; category; date case opened; date closed; civil status; family status; color; length of residence; religion; minor (yes or no); illegitimacy (yes or no); name of worker; problems (major and secondary); on reverse side of card, amount of grant; classification of relief (in code); dates carried over. (cont. on line 12)
7. Arrangement Alph. by names of clients.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Typed and handwritten on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of steel file drawer 6" x 9" x 18" Average 1500 cards per drawer.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities 1936-1937, 6 file drawers on south side of statistical clerk's office.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 4 ~~~~~ 3 Drawers labeled A.D.C. Active A-J; A.D.C. Active K-V; A.D.C. Active W-2 (for 1937), continued from line 6 ~~~~~ dates of new grant, recurrent grant and date closed; supplementation grant; amounts of emergency grant from city and state; age of person in new case and sex.
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

524
51B ABC 1936 - - Active
52 " Class case 1936 - -

Kovaka-Scott
(Worker's full name)

1-30-39
(Date)

51-B
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ Baltimore City State Maryland

Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)

Address of office of custody 331 St. Paul Place
(Name of building, room number, street address)

1. Title (Statistical Record - Aid To Dependent Children - Active Cases)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1938 - -
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 4 steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Not labeled
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Yearly statistical card record of active cases; monthly and yearly reports for state and city are taken their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by from these cards, also referred to for comparison of prior relief allotments; cards show name and address of client; date and reason for closing; name of cooperative agency (if any); Dept. of Public Welfare number; Central Payroll Bureau number; number in family; number of persons 65 and over, 16 to 65 and number under 16 years; category; date case opened;
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record. Each should be given. Unless contents of these records are described by other Forms I2-I3HR, such forms should be filled out and attached)

6. Contents—continued date closed; civil status; family status; color; length of residence; religion; minor (yes or no); illegitimacy (yes or no); name of worker; problems (major and secondary);
on reverse side of card, amount of grant; classification of relief (in code); dates carried over; dates of new grant, (cont. on line 12)

7. Arrangement Alph. by names of clients
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on printed cards.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel file drawer 6" x 9" x 18" Average 1200 cards per drawer.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1938 to date, 4 steel file drawers on south wall in statistical clerk's office.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)

Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 6 recurrent grant and date closed; supplementation grant; amounts of emergency grant from city and from state; age of person in new case and sex.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

51 A) A DC 1936 --- Active
52 B) " 1936 --- Closed

Kovaka-Scott

(Worker's full name)

1-5-39

(Date)

52

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D.C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)

Address of office of custody 331 St. Paul Place.
(Name of building, room number, street address)

1. Title (Statistical Record - Aid To Dependent Children)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
"A.D.C. Closed Cases"

2. Dates 1936--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 6 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling 1936, 1 Drawer not labeled; 1937, 2 Drawers labeled (cont. on line 12)
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Yearly statistical card record of closed cases; monthly and yearly reports for state and city are prepared from this their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by record covering entire history of individual, the family group and each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached the distribution of allowance, also referred to for comparison of prior relief received by clients; cards show name and address of client; date and reason for closing; name of cooperative agency (if any); Dept. of Public Welfare number; Central Payroll Bureau number; number in family; number of persons 65 and over,

6. Contents—continued 16 to 65 and number under 16 years; category; date case opened; date closed; civil status; family status; color; length of residence; religion; minor (yes or no); illegitimacy (yes or no); name of worker; problems (major and secondary); on reverse side of card, amount of grant; classification of relief (in code); dates carried over; (cont. on line 12)
7. Arrangement Alph. by names of clients.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Typed and handwritten on printed form.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of steel file drawer 6"x9"x18" Average 1200 cards per drawer.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities 1936 to date, 6 steel file drawers on south wall in statistical clerk's office.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 6 ~~~~~ dates of new grant, recurrent grant and date closed; supplementation grant; amounts of emergency grant from city and state; age of person in new case and sex -
continued from line 4 ~~~~~ "A.D.C. Closed Cases; 1938 to date, 3 Drawers labeled "Closings"
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

SCOTT-KOVAKA

(Worker's full name)

1-25-39

(Date)

53

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

~~County~~ BALTIMORE CITY

State MARYLAND

Name of agency or office DEPARTMENT OF PUBLIC WELFARE

(Office of custody) (Office which made the record, if different)

Address of office of custody 331 ST. PAUL PLACE

(Name of building, room number, street address)

STATISTICAL DIVISION

1. Title (STATISTICAL RECORDS - AID TO THE BLIND - ACTIVE CASES)

(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities)

"A.T.B."

or both)

2. Dates 1936

(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 - STEEL FILE DRAWER

(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling DRAWER LABELED "A.T.B."

(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records NONE

(If record discontinued, give reason and state whether same information shown in another

record. Explain why records are missing, if possible)

6. Contents CONTAINING ACTIVE STATISTICAL RECORDS OF AID TO THE BLIND,

(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,

COVERING THE ENTIRE HISTORY OF THE CASE TO SERVE IN PREPARING

their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by

STATISTICAL REPORTS - CARDS SHOW NAME AND ADDRESS OF MAN OR

each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

WOMAN, DEPARTMENT OF PUBLIC WELFARE AND CENTRAL PURCHASING

BUREAU NUMBERS, WARD NUMBER, DATE CASE OPENED AND DATE CASE

CLOSED, NAME OF WORKER, PERSONS IN FAMILY - SHOWING NAMES - SEX - DATE,

CO-OPERATIVE AGENCY, DATE MADE, DATE CANCELLED, FAMILY STATUS - I. E. -

MARRIED COUPLE - UNMARRIED COUPLE - UNMARRIED MOTHER - WIDOW - WIDOWER -

6. Contents—continued MAN OR WOMAN - DESERTED - DIVORCED - SEPARATED - MARRIED
COUPLE APART - SINGLE MAN OR SINGLE WOMAN - GRAND-FATHER - GRAND-
MOTHER - BROTHER - SISTER - STEP-FATHER - STEP-MOTHER - STEP-BROTHER - STEP-
SISTER AND UN-ATTACHED, EMPLOYABLES, MALE OR FEMALE, PROBLEMS (MAJOR
OR SECONDARY); TYPE OF INDUSTRY AND OCCUPATION, COLOR, RELIGION, } CONT ON
LINE 12
7. Arrangement ALPHABETICALLY BY NAMES OF CLIENT
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing HANDWRITTEN AND TYPED ON PRINTED CARDS
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF STEEL FILE DRAWER 6"x9"x18" AVERAGE 388 CARDS.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities 1936 - 1 - STEEL FILE DRAWER, LOCATED
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
ON SOUTH WALL OF STATISTICIAN'S OFFICE.
12. Other information RECORDS AND EQUIPMENT ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
Whether record is known to have been kept earlier than dates shown in item 2)
CONTINUED FROM LINE 6: - YEAR TO CITY, BIRTHPLACE, NATURALIZATION,
MINOR, ORPHAN, MINOR AND ORPHAN, ILLEGITIMATE, CODE, AMOUNT OF GRANT,
NUMBER IN FAMILY WITH AGES RANGING FROM UNDER 16 YEARS TO OVER 65 YEARS,
EMERGENCIES FOR STATE AND CITY AND SUPPLEMENTATION, ALSO IF CASE
IS CARRIED OVER FROM PREVIOUS PERIOD. INTAKE REPORT (WHETHER - NEW-
OLD - RECURRENT); ASSISTED AND CASE CLOSED.
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)
(Place of publication) (Date of publication)

				Ward						E <input type="checkbox"/>	PE <input type="checkbox"/>	U <input type="checkbox"/>					
Surname _____			Man		DPW or CPB No.		Date Opened		Date Closed		R		WORKER				
<i>Blind</i>			ADC														
			ATB														
			GPA														
			OAP														
			Woman														
			Address														
<i>current</i>			PERSONS IN FAMILY														
			Name			Sex	Date		Name			Sex	Date				
													Cooper. Agency				
													Date made				
													Date can.				
FAMILY STATUS				Employables								PROBLEMS					
MW MW MW MW MC UC UM W WR DES DIV SEP MCA SM SW				Male								Major		Secondary			
GF GM B S SF SM SB SS U A				Female								M					
												W					
Industry				Color				Religion				Yr. to City					
												T					
				Birthplace				Naturaliz.				L					
												I					
Occupation				Minor		Orphan		Minor & Orphan		Illeg.		H					

54
35
7
1937 1938

Kovaka-Scott
(Worker's full name)

2-2-39
(Date)

54 ✓
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)

Address of office of custody 331 St. Paul Place
(Name of building, room number, street address)

1. Title (Statistical Record - Assistance To Blind - Active Cases) "A.T.B."
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1937
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Drawer labeled "A.T.B. 1937 A-2"
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Yearly statistical card record of active cases; monthly and yearly reports for state and city are prepared their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached
individual, the family group and the distribution of allowances, also referred to for comparison of prior relief received by clients; cards show name and address of client; date and reason for closing; name of cooperative agency (if any); Dept. of Public Welfare number; Central Payroll Bureau number;

6. Contents—continued number in family; number of persons 65 and over, 16 to 65 and number under 16 years; category; date case opened; date closed; civil status; family status; color; length of residence; religion; minor (yes or no); illegitimacy (yes or no); name of worker; problems (major and secondary); (continue on line 12)

7. Arrangement Alph. by names of clients
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by..

title and identification number)

9. Writing Typed and handwritten on printed forms
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel file drawer 6" x 9" x 18" (Approx. 400 cards
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1937, 1 steel file drawer on south wall in statistical clerk's office.
(Room, vault, wall—N/E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and equipment in excellent condition
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

continued from line 12 ~~~~~ on reverse side of card, amount of grant; classification of relief (in code); dates carried over; dates of new grant, recurrent grant and date closed; supplementation grant; amounts of emergency grant from city and state; age of person in new case and sex.

~~13. (Type in Block)~~ Early imprints
(Author) (Publisher)

(Place of publication)

(Date of publication)

Surname	Man's
Maiden Name	Woman's
Address	

NUMBER			
A.D.C.	D.P.W.	C.P.B.	No. In Family
A.T.B.			65 and Over
			16 to 65
O.A.P.			Under 16
Category	Date Opened	Date Closed	

Worker

51-A+B

52-A+B

(54)

REASON FOR CLOSING											
A.D.C.											
O.A.P.											
A.T.B.											
Cooper.	Agency	Date	Made Canc.								

CIVIL STATUS		
Native Born	Place	Color
Foreign Born	Place	Residence
Date and Place of Naturalization		
Religion		
FAMILY STATUS		
MC UC UM W Wr <input checked="" type="checkbox"/> Div Sep MCA SM SW		
Orph.	GF GM B S SF SM SB SS U A	Minor
		Illegitimacy <input type="checkbox"/>

PROBLEMS		
	Major	Secondary
M		
W		
T		
L	X	
I		
H		

55
54 1037-1938

7

Kovaka-Scott
(Worker's full name)

2-2-39
(Date)

55
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)

Address of office of custody 331 St. Paul Place
(Name of building, room number, street address)

1. Title (Statistical Record - Assistance To Blind-Active Cases)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1938--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 2 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Drawers not labeled
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Yearly statistical card record of active cases; monthly and yearly reports for state and city are prepared their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by from this record covering entire history of individual the family group and the distribution of allowances, also referred to for comparison of prior relief received by clients; cards show name and address of client; date and reason for closing; name of cooperative agency (if any); Dept. of Public Welfare number; Central Payroll Bureau
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record. each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued number; number in family; number of persons 65 and over, 16 to 65 and number under 16 years; category; date case opened; date closed; civil status; family status; color; length of residence; religion; minor (yes or no); illegitimacy (yes or no); name of worker; (cont. on line 12)

7. Arrangement Alph. by names of clients
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by

title and identification number)

9. Writing Typed and hand written on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.

Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel file drawer 6x9x18" Average 400 cards per drawer.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1938 to date, 2 steel file drawers on south wall in statistical clerk's office.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)

continued from line 6 ——— problems (major and secondary); on reverse side of card, amount of grant; classification of relief (in code); dates carried over; dates of new grant, recurrent grant and date closed; supplementation grant; amounts of emergency grant from city and state; age of person in new case and sex.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication)

(Date of publication)

56 1937-1938
39

7

SCOTT-KOVAKA
(Worker's full name)

1-25-39
(Date)

56
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County **BALTIMORE CITY** State **MARYLAND**
Name of agency or office **DEPARTMENT OF PUBLIC WELFARE**
(Office of custody) (Office which made the record, if different)
Address of office of custody **331 ST. PAUL PLACE**
(Name of building, room number, street address)
STATISTICAL DIVISION

- Title **(STATISTICAL RECORDS - AID TO THE BLIND)**
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities)
"1938 CLOSINGS" 1937. STATISTICAL RECORD - ASSISTANCE TO BLIND.
or both)
- Dates **1938--**
(Earliest and latest dates; missing dates. Show exact date of breaks)
- Quantity **1-STEEL FILE DRAWER**
(Number of volumes; file drawers; file boxes; bundles; other)
- Labeling **DRAWER LABELED - "1938 CLOSINGS"**
(Explain fully; years; numbers; letters; number of records so labeled)
- Discontinued and missing records **NONE**
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents **CONTAINING CLOSED STATISTICAL RECORDS OF AID TO THE BLIND, COVERING THE ENTIRE HISTORY OF THE CASE TO SERVE IN PREPARING STATISTICAL REPORTS, SHOWING NAME AND ADDRESS OF MAN OR WOMAN, DEPARTMENT OF PUBLIC WELFARE AND CENTRAL PURCHASING BUREAU NUMBERS, WARD NUMBER, DATE CASE OPENED AND DATE CASE CLOSED, NAME OF WORKER, PERSONS IN FAMILY - GIVING NAMES - SEX - DATE, CO-OPERATIVE AGENCY; DATE MARRIED, DATE CANCELLED, FAMILY STATUS - I.E. - MARRIED COUPLE - UNMARRIED COUPLE - UNMARRIED MOTHER - WIDOW - WIDOWER - MAN OR WOMAN - DESERTED - DIVORCED - SEPARATED - MARRIED COUPLE APART - SINGLE MAN OR SINGLE WOMAN - GRAND-FATHER - GRAND-MOTHER - BROTHER - SISTER -**
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued STEP-FATHER - STEP-MOTHER - STEP-BROTHER - STEP-SISTER AND UN-ATTACHED, EMPLOYABLES, MALE OR FEMALE, PROBLEMS (MAJOR OR SECONDARY), TYPE OF INDUSTRY AND OCCUPATION, COLOR, RELIGION, YEAR TO CITY, BIRTHPLACE, NATURALIZATION, MINOR, ORPHAN, MINOR AND ORPHAN, ILLEGITIMACY, CODE, AMOUNT OF GRANT, NUMBER IN FAMILY WITH AGES RANGING FROM UNDER 16 YEARS TO OVER } CONT LINE 12.
7. Arrangement ALPHABETICALLY BY NAMES OF CLIENTS.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing HANDWRITTEN AND TYPED ON PRINTED CARDS. SEE SERIAL 54 FWP COPY OF FORM.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form, Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF STEEL FILE DRAWER 6"x9"x18" AVERAGE 450 CARDS
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities 1938, - 1-STEEL FILE DRAWER, LOCATED ON SOUTH WALL OF STATISTICAL CLERK'S OFFICE.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information RECORDS AND EQUIPMENT ARE IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.)
Whether record is known to have been kept earlier than dates shown in item 2)
CONTINUED FROM LINE 6: = 65 YEARS, EMERGENCIES FOR STATE AND CITY AND SUPPLEMENTATION, ALSO IF CASE IS CARRIED OVER FROM PREVIOUS PERIOD, INTAKE REPORT (WHETHER - NEW - OLD - RECURRENT), ASSISTED AND CASE CLOSED.
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

58 below and machine
1937--
57

Kovaka-Scott (Worker's full name) 2-3-39 (Date) 57 (Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland
Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)
Address of office of custody 331 St. Paul Place.
(Name of building, room number, street address)
STATISTICAL DIVISION

- 1. Title (Statistical Cards - Old Age Assistance)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)
"O.A.A. - 1937 - Closed"
- 2. Dates 1937--
(Earliest and latest dates; missing dates. Show exact date of breaks)
- 3. Quantity 2 Steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)
- 4. Labeling 1 Drawer labeled "O.A.A. - 1937 - Closed" containing (cont'd. on line 12)
(Explain fully; years; numbers; letters; number of records so labeled)
- 5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents } STATISTICAL CARDS FOR OLD AGE ASSISTANCE
SHOW NAME AND ADDRESS OF CLIENT, DATE AND REASON FOR CLOSING,
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record,
NAME OF COOPERATIVE AGENCY, DEPARTMENT OF PUBLIC WELFARE NUMBER, CENTRAL
their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by
PAYROLL BUREAU NUMBER, NUMBER IN FAMILY, NUMBER OF PERSONS 65 AND OVER,
each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)
16 TO 65 AND NUMBER UNDER 16 YEARS, CATEGORY, DATE CASE OPENED, DATE CLOSED,
CIVIL STATUS, FAMILY STATUS, COLOR, LENGTH OF RESIDENCE, RELIGION, MINOR
(YES OR NO), ILLEGITIMACY (YES OR NO), NAME OF WORKER, PROBLEMS (MAJOR
AND SECONDARY), ON REVERSE SIDE OF CARD, AMOUNT OF GRANT, CLASSIFI-
CATION OF RELIEF (CODE), DATES CARRIED OVER, DATES OF NEW GRANT,

6. Contents—continued OLD GRANT, RECURRENT GRANT AND DATE CLOSED, SUPPLEMENTATION GRANT, AMOUNTS OF EMERGENCY GRANT FROM CITY AND FROM STATE, AGE OF PERSON IN NEW CASE, SEX.
7. Arrangement ALPHABETICALLY BY NAMES OF CLIENTS
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing NONE
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing TYPED AND HANDWRITTEN ON PRINTED CARDS.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size OF STEEL DRAWERS 6" x 9" x 18" AVERAGE 1500 CARDS PER DRAWER.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities 1937 -- 2 STEEL FILE DRAWERS, LOCATED ON SOUTH WALL OF STATISTICAL CLERK'S OFFICE.
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information RECORDS AND EQUIPMENT IN EXCELLENT CONDITION.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 4 ————— records for 1937 and 1938; 1939, 1 drawer not labeled.
- Note:—City and state reports (monthly and yearly) are made from these records, also referred to for comparison of prior relief allotments AND DISTRIBUTIONS.
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

57
38 Active + inactive
1937--

Kovach-Scott
(Worker's full name)

2-3-39
(Date)

58
(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)

Address of office of custody 331 St. Paul Place.
(Name of building, room number, street address)

1. Title (Statistical Record - Old Age Assistance - Active Cases)
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities or both)

2. Dates 1937--
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 4 steel file drawers
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Drawers not labeled. (2 drawers 1937; 2 drawers 1938-39.)
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Yearly statistical card record of active cases, monthly and yearly reports for state and city are prepared from this record covering entire history of individual, the family group and the distribution of allowances, also referred to for comparison of prior relief received by clients; cards show name and address of client; date and reason for closing; name of co-operative agency (if any); Dept. of Public Welfare number; Central Payroll Bureau number; number in family; number of persons 65 and
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued over, 16 to 65 and number under 16 years; category;
date case opened; date closed; civil status; family status; color;
length of residence; religion; minor (yes or no); illegitimacy (yes or
no); name of worker; problems (major and secondary); on reverse
side of card, amount of grant; classification of relief (in code);
(cont on line 12)

7. Arrangement Alph. by names of clients.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)

8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)

9. Writing Typed and handwritten on printed forms.
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)

10. Size of steel file drawer 6" x 9" x 18" (Average 3200 cards per drawer.)
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)

11. Location by dates and quantities 1937 to date, 2 steel file drawers on south
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
wall in statistical clerk's office.

12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.

Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 6 ~~~~~~~~~ dates carried over; dates of new
grant, recurrent grant and date closed; supplementation grant;
amounts of emergency grant from city and state; age
of person in new case and sex.

13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

59
56 19371938

7

59

Kovaka - Scott
(Worker's full name)

2-6-39
(Date)

(Form identification number)

WORKS PROGRESS ADMINISTRATION
DIVISION OF WOMEN'S AND PROFESSIONAL PROJECTS
THE HISTORICAL RECORDS SURVEY: 1937
1734 NEW YORK AVE. NW.
WASHINGTON, D. C.

VOLUMES AND UNBOUND RECORDS FORM

County Baltimore City State Maryland

Name of agency or office Department of Public Welfare
(Office of custody) (Office which made the record, if different)

Address of office of custody 331 St. Paul Place
(Name of building, room number, street address)

1. Title Statistical Record - Assistance To Blind -
Aid to the BLIND.
(Give present full title in quotes; assigned title, if any, in brackets. If record has had other titles, list them with dates or quantities
Closed Cases)
or both)

2. Dates 1937
(Earliest and latest dates; missing dates. Show exact date of breaks)

3. Quantity 1 Steel file drawer
(Number of volumes; file drawers; file boxes; bundles; other)

4. Labeling Not labeled
(Explain fully; years; numbers; letters; number of records so labeled)

5. Discontinued and missing records None
(If record discontinued, give reason and state whether same information shown in another record. Explain why records are missing, if possible)

6. Contents Yearly statistical card record of closed cases; monthly and yearly reports for state and city are prepared from this record covering entire history of individual, the family group and the distribution of allowances, also referred to for comparison of prior relief received by clients; cards show name and address of client; date and reason for closing; name of cooperative agency (if any); date case made, date cancelled; Dept. of
(Purpose and general nature of record. Principal items of information shown. Summary of forms used in making record, their headings, etc. If a very general or miscellaneous record, detailed information as to types of records contained and dates covered by each should be given. Unless contents of these records are described by other Forms 12-13HR, such forms should be filled out and attached)

6. Contents—continued Public Welfare number; Central Payroll Bureau number; number in family; number of persons 65 and over, 16 to 65 and number under 16 years; category; date case opened; date closed; civil status; family status; color; length of residence; religion; minor (yes or no); illegitimacy (yes or no); (cont. on line 12)
7. Arrangement Alph. by names of clients.
(Chronologically—by what? Numerically—by what? Alphabetically—by what?)
8. Indexing None
(Self-contained—describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Typed and hand-written on printed cards
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head.
Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of steel file drawer 6"x9"x18" Approx. 200 cards.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
11. Location by dates and quantities 1937; 1 steel file drawer on south wall in statistical clerk's office
(Room, vault, wall—N. E. S. W., section, bin, shelf, cabinet, on floor)
12. Other information Records and equipment in excellent condition.
(Condition of record if not good. Relation to other records. Information on prior, subsequent, or similar records.
Whether record is known to have been kept earlier than dates shown in item 2)
continued from line 6 ~~name of worker~~ name of worker; problems (major and secondary); on reverse side of card, amount of grant; classification of relief (in code); dates carried over; dates of new grant, recurrent grant and date closed; supplementation grant; amounts of emergency grant from city and from state; age of person in new case and sex.
13. (For use in Florida.) Early imprints _____
(Author) (Publisher)

(Place of publication) (Date of publication)

State Maryland
 City or town Baltimore.

WORKS PROGRESS ADMINISTRATION
 SURVEY OF FEDERAL ARCHIVES

Report No. 335
 Sheet 1
 of 1 sheets

REPORT ON SERIALS

1. Name of building Baltimore City Court House
 2. Address of building Calvert and Fayette Streets 3. Room No. 12.
 4. Agency of origin Department of Labor 5. Subdivision Immigra-
tion and Naturalization Service, Field Service Branch, District # 5
(Maryland)
 6. Agency of custody / Court of Common Pleas 7. Subdivision Clerk of Court

8. Title of serial Petitions and Applications for Naturalization.
(Give title of serial as entered on label or as indicated by custodian)
(Civil and Military).

9. Dates 1906 to present date.
(Give inclusive dates, and report any gaps that may exist in the serial)

10. Additional description Entered in books as application was received. Consists
(Examine records carefully, noting method of organization and noting particularly the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
of applications for Naturalization, Naturalization records of Minors, Records
on Declaration, and Declarations of Intentions. All records pertain to
applications for citizenship in the United States of America.

11. What use is made of them? Rarely

12. For what purpose? Occasional reference for information relative to immi-
gration and naturalization.

13. Indexes and inventories None
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained:

- (1) Bound volumes **46**
- (2) Folders
- (3) Envelopes
- (4) Pockets

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles or paper packages
- (8) Other forms **46 Bound Books**

15. Size 10"x16" and 9 1/2"x14"
(Give dimensions of above)

16. Volume 7 Feet, 6 Inches
(Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases 37 steel shelves.
- (2) Transfer cases _____
- (3) Folded document holders _____
- (4) Card cabinets _____
- (5) Shelves _____
(Give brief description)
- (6) Wooden boxes _____
(Give size also)
- (7) Paper or pasteboard boxes _____
(Give size also)
- (8) Other types Open Book rack.
(Give brief description)

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers
- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions Good

19. Persons contacted : Mr. Y. Claypole, Common Pleas Court Clerk.
(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information These records also contain rules and regulations governing the requirements for eligibility for citizenship. They also contain records of oaths made by applicants, renouncing allegiance to all Foreign Powers and Potentates, and swearing allegiance to the United States of America.

SIGNED BY Bernard J. Spresser
Field worker.

APPROVED BY A. H. Burnham
Project superintendent.

DATE 4/21/36

BJS.

Approved - Burnham

State Baltimore
 City or town Maryland.

WORKS PROGRESS ADMINISTRATION
 SURVEY OF FEDERAL ARCHIVES

Report No. 336
 Sheet 1
 of 1 sheets

REPORT ON SERIALS

1. Name of building Baltimore City Court House
 2. Address of building Calvert and Fayette Streets 3. Room No. Alcove of Room #12.
 4. Agency of origin Department of Labor 5. Subdivision Immigration
and Naturalization Service. Field Service Branch, District #5
(Maryland)
 6. Agency of custody Court of Common Pleas 7. Subdivision Clerk of
Court.

8. Title of serial Applications for Naturalization
 (Give title of serial as entered on label or as indicated by custodian)

9. Dates 1796 to 1906
 (Give inclusive dates, and report any gaps that may exist in the serial)

10. Additional description Entered in book as application was received. Records
 (Examine records carefully, noting method of organization and noting particularly the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
~~consist of~~ civil and military applications for Naturalization, records of
minors naturalization, ^{of} records of Declaration and Declarations of intention.
All applications refer to requests for citizenship of the United States of
America.

11. What use is made of them? Rarely

12. For what purpose? Used for reference. Rarely.

13. Indexes and inventories None
 (Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained:

- | | |
|--|--|
| (1) Bound volumes <input checked="" type="checkbox"/> 32 | (5) Covers <input type="checkbox"/> |
| (2) Folders <input type="checkbox"/> | (6) Loose-leaf books <input type="checkbox"/> |
| (3) Envelopes <input type="checkbox"/> | (7) Bundles or paper packages <input type="checkbox"/> |
| (4) Pockets <input type="checkbox"/> | (8) Other forms 32 Books |

15. Size 11 1/2" x 17, 9 1/2" x 14", 12" x 18", 10 1/2" x 16" 16. Volume 6 Feet, 0 Inches
(Give dimensions of above) (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- | | |
|---------------------------------------|--------------------------|
| (1) Filing cases _____ | (2) Transfer cases _____ |
| (3) Folded document holders _____ | (4) Card cabinets _____ |
| (5) Shelves <u>3, wooden, open</u> | (Give brief description) |
| (6) Wooden boxes _____ | (Give size also) |
| (7) Paper or pasteboard boxes _____ | (Give size also) |
| (8) Other types <u>1 open cabinet</u> | (Give brief description) |

18. Check in-squares evidences of the following conditions of the archives:

- | | |
|---|--|
| (1) Damaged by fire <input type="checkbox"/> | (8) Papers dirty or sooty <input type="checkbox"/> |
| (2) Damaged by water <input type="checkbox"/> | (9) Papers torn <input type="checkbox"/> |
| (3) Damaged by vermin <input type="checkbox"/> | (10) Papers scattered <input type="checkbox"/> |
| (4) Damaged by rodents <input type="checkbox"/> | (11) Bindings broken <input type="checkbox"/> |
| (5) Damaged by careless handling <input type="checkbox"/> | (12) Ink faded <input type="checkbox"/> |
| (6) Damaged by faulty containers <input type="checkbox"/> | (13) Other conditions <u>Good</u> |
| (7) Paper brittle <input type="checkbox"/> | |

19. Persons contacted Mr. Y. Claypoole Clerk Common Pleas Court.
(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information Applications for naturalization covering this period
of Room 12,
can be found in basement/ City Courthouse, Baltimore, Maryland. Applications
contain rules and regulations governing the requirements for becoming a
citizen, records of oaths made by applicants and names and signatures of
court attaches. See Report on Serials, Baltimore, Md., No. 337.

SIGNED BY W. W. Alvey APPROVED BY A. H. Burnham
Field worker. Project superintendent.

DATE 4/21/36

Approved - A. H. Burnham

(BJS.)

State	Maryland,
City or town	Baltimore.

WORKS PROGRESS ADMINISTRATION
SURVEY OF FEDERAL ARCHIVES

Report No.	337
Sheet	1
of	1 sheets

REPORT ON SERIALS

1. Name of building Baltimore City Court House
2. Address of building Calvert and Fayette Streets 3. Room No. Basement of Room #12.
4. Agency of origin Department of Labor 5. Subdivision Immigration
and Naturalization Service. Field Service Branch, District #5
(Maryland)
6. Agency of custody Court of Common Pleas 7. Subdivision Clerk of
Court.
8. Title of serial Applications for Naturalization.
(Give title of serial as entered on label or as indicated by custodian)
9. Dates 1796 to 1906
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Entered in Book as application was requested. Consists
(Examine records carefully, noting method of organization and noting particularly the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
of applications for Naturalization, Naturalization Record of Minors, Natur-
alization Records on Declaration, and Declarations of Intentions. All
applications refer to requests for citizenship of the United States of
America.
11. What use is made of them? Rarely
12. For what purpose? Kept as complete record of common Pleas Court.
13. Indexes and inventories None
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained:

- (1) Bound volumes **66**
- (2) Folders
- (3) Envelopes
- (4) Pockets

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles or paper packages
- (8) Other forms **66 Bound Books**

15. Size 10"x16"
(Give dimensions of above)

16. Volume 6 Feet, 6 Inches
(Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases 68 Steel Shelves
- (2) Transfer cases _____
- (3) Folded document holders _____
- (4) Card cabinets _____
- (5) Shelves _____
(Give brief description)
- (6) Wooden boxes _____
(Give size also)
- (7) Paper or pasteboard boxes _____
(Give size also)
- (8) Other types Open Book rack.
(Give brief description)

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers
- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions Good

19. Persons contacted Mr. Y. Claypoole, Common Pleas Court Clerk.
(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information Applications and Records contain rules and regulations governing the requirements for Eligibility for citizenship, records of oaths by applicants, renouncing allegiance to all foreign powers, and swearing allegiance to the United States of America; and names and signatures of court attaches. See Report on Serials, Baltimore, Md., No. 336.

SIGNED BY Bernard J. Spresser
Field worker.

APPROVED BY A. H. Burnham
Project superintendent.

DATE 4/21/36

Approved - T. A. Turner

(BJS)

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State <u>Maryland</u>
City or <u>Baltimore</u>
Town _____

Report No. <u>1988</u>
Sheet <u>1</u>
of <u>1</u> Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Streets 3. Room Number Alcove, Room 14
4. Agency of origin Department of Labor 5. Subdivision Immigration and Naturalization Service, Field Service Branch, District No. 5, District Director, Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision Clerk of the Court of Common Pleas.
8. Title of serial Payments for Petition for Naturalization
(Give title of serial as entered on label or as indicated by custodian)
9. Dates October, 1906 to September, 1917
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Filed chronologically. Record shows date, name of applicant, number and amount paid.
(Examine records carefully, noting method of organization and noting particularly the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
11. What use is made of them? Rarely
12. For what purpose? Official
13. Indexes and inventories None
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes
- (2) Folders
- (3) Envelopes
- (4) Pockets

X

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles or paper packages
- (8) Other forms

15. Size 10" X 16" 16. Volume 1/2 inch
(Give dimensions of above) (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____
- (2) Transfer cases _____
- (3) Folded document holders _____
- (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1, open, wood
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers

- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions

Good

19. Persons contacted J. C. Daily, Clerk

(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None

Signed by Leona McCullough Approved by C. M. Shepherd
FIELD WORKER PROJECT SUPERINTENDENT

Date November, 9, 1936 PHS

Approved - T. A. Turner

WORKS PROGRESS ADMINISTRATION

State	Maryland
City or Town	Baltimore

SURVEY OF FEDERAL ARCHIVES

Report on Serials

Report No.	1989
Sheet	1
of	1 Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Streets 3. Room Number Cellar
4. Agency of origin Department of Labor 5. Subdivision Immigration and Naturalization Service, Field Service, Branch, District #5, District Director, Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision Clerk of the Court of Common Pleas.
8. Title of serial Naturalization Docket
(Give title of serial as entered on label or as indicated by custodian)
9. Dates 1796 to 1849
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Filed chronologically. Record shows name and county of applicant for citizenship, name of witness, name of court, and date of declaration of intentions.
(Examine records carefully, noting method of organization and noting particularly the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
11. What use is made of them? Frequently.
12. For what purpose? Official.
13. Indexes and inventories None.
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

(1) Bound Volumes
 (2) Folders
 (3) Envelopes
 (4) Pockets

(5) Covers
 (6) Loose-leaf books
 (7) Bundles or paper packages
 (8) Other forms _____

15. Size 9" x 11" (Give dimensions of above)
 16. Volume 2 1/2 inches. (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

(1) Filing cases _____ (2) Transfer cases _____
 (3) Folded document holders _____ (4) Card Cabinets _____
 (5) Shelves (Give brief description) 1 steel, open.
 (6) Wooden boxes (Give size also) _____
 (7) Paper or pasteboard boxes (Give size also) _____
 (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

(1) Damaged by fire
 (2) Damaged by water
 (3) Damaged by vermin
 (4) Damaged by rodents
 (5) Damaged by careless handling
 (6) Damaged by faulty containers

(7) Paper brittle
 (8) Papers dirty or sooty
 (9) Papers torn
 (10) Papers scattered
 (11) Bindings broken
 (12) Ink faded
 (13) Other conditions _____

Good

19. Persons contacted J. C. Daily, Clerk

(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None.

Signed by Leona McCullough Approved by C. M. Shepherd
 FIELD WORKER PROJECT SUPERINTENDENT

Date November 9, 1936

Approved - T. G. Turner

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State <u>Maryland</u>
City or <u>Baltimore</u>
Town _____

Report No. <u>1990</u>
Sheet <u>1</u>
of _____ <u>1</u> Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Streets 3. Room Number 14
4. Agency of origin Department of Labor 5. Subdivision Immigration and Naturalization Service, Field Service Branch, District No. 5, District Director, Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision/ Clerk of the Court of Common Pleas.
8. Title of serial Record of Petition for Naturalization
(Give title of serial as entered on label or as indicated by custodian)
9. Dates 1905 to 1906
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Filed chronologically. Record shows petition for final papers in the Court of Common Pleas; also name, age, address, birth place of petitioner, record of members of his family, affidavits of witnesses and order of the Court.
(Examine records carefully, noting method of organization and noting particularly the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
11. What use is made of them? Seldom
12. For what purpose? Official
13. Indexes and inventories Alphabetical Index in front of volume; also complete index in bound volume 14 1/2" X 18" X 2 1/2"
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes

X
- (2) Folders

- (3) Envelopes

- (4) Pockets

- (5) Covers

- (6) Loose-leaf books

- (7) Bundles or paper packages

- (8) Other forms _____

15. Size 12 1/2" X 19 1/2" 16. Volume 3 inches
 (Give dimensions of above) (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:
- (1) Filing cases _____ (2) Transfer cases _____
 - (3) Folded document holders _____ (4) Card Cabinets _____
 - (5) Shelves (Give brief description) 1 steel, open
 - (6) Wooden boxes (Give size also) _____
 - (7) Paper or pasteboard boxes (Give size also) _____
 - (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire

- (2) Damaged by water

- (3) Damaged by vermin

- (4) Damaged by rodents

- (5) Damaged by careless handling

- (6) Damaged by faulty containers

- (7) Paper brittle

- (8) Papers dirty or sooty

- (9) Papers torn

- (10) Papers scattered

- (11) Bindings broken

- (12) Ink faded

- (13) Other conditions

Good

19. Persons contacted J. C. Daily, Clerk
 (List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information This is an earlier form of record 2204

Signed by Leona McCullough Approved by C. M. Shepherd
 FIELD WORKER PROJECT SUPERINTENDENT

Date November, 9, 1936 PHS *Approved - P. A. Turner*

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State	Maryland
City or	
Town	Baltimore

Report No.	1991
Sheet	1
of	1 Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Street 3. Room Number Cellar
4. Agency of origin Department of Labor 5. Subdivision Immigration
and Naturalization Service, Field Service Branch, District # 5, District Director,
Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision Office of the
Clerk of the Court of Common Pleas.
8. Title of serial Naturalization Record of Minors
 (Give title of serial as entered on label or as indicated by custodian)
9. Dates 1827 to 1906
 (Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Filed chronologically. Record shows minor's name, birthplace,
 (Examine records carefully, noting method of organization and noting particularly
 the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
date, where oath was taken, name of witness, signature of clerk and date of
naturalization.
11. What use is made of them? Frequently
12. For what purpose? Official
13. Indexes and inventories Alphabetical Index in front of book.
 (Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes

X
- (2) Folders

- (3) Envelopes

- (4) Pockets

- (5) Covers

- (6) Loose-leaf books

- (7) Bundles or paper packages

- (8) Other forms _____

15. Size 11" X 16" (Give dimensions of above) 16. Volume 3 feet 10 inches (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____
- (2) Transfer cases _____
- (3) Folded document holders _____
- (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1 steel, open
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire

- (2) Damaged by water

- (3) Damaged by vermin

- (4) Damaged by rodents

- (5) Damaged by careless handling

- (6) Damaged by faulty containers

- (7) Paper brittle

- (8) Papers dirty or sooty

- (9) Papers torn

- (10) Papers scattered

- (11) Bindings broken

- (12) Ink faded

- (13) Other conditions _____

_____ Good _____

19. Persons contacted J. C. Daily, Clerk
 (List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information One book, 1903 to 1905 is in room 14.

Signed by Katherine O'Connor Approved by C. M. Shepherd
 FIELD WORKER PROJECT SUPERINTENDENT

Date November, 9, 1936 PHS

Approved - T. G. Turner

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State	Maryland
City or	Baltimore
Town	

Report No.	1992
Sheet	1
of	1 Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Streets 3. Room Number 14, Alcove
4. Agency of origin Department of Labor 5. Subdivision Immigration and
Naturalization Service, Field Service Branch, District No. 5, District Director,
Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision Clerk of the
Court of Common Pleas.
8. Title of serial Numbers of Certificates of Naturalization
(Give title of serial as entered on label or as indicated by custodian)
9. Dates December, 1911 to December, 1922
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Filed chronologically. Records show: certificate number,
(Examine records carefully, noting method of organization and noting particularly
the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
name of the applicant, and month and year in which issued.
11. What use is made of them? Rarely
12. For what purpose? Official
13. Indexes and inventories None
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes

X
- (2) Folders

- (3) Envelopes

- (4) Pockets

- (5) Covers

- (6) Loose-leaf books

- (7) Bundles or paper packages

- (8) Other forms _____

15. Size 8 1/2" X 14" (Give dimensions of above) 16. Volume 1/2 inch (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____
- (2) Transfer cases _____
- (3) Folded document holders _____
- (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1, open, wood
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire

- (2) Damaged by water

- (3) Damaged by vermin

- (4) Damaged by rodents

- (5) Damaged by careless handling

- (6) Damaged by faulty containers

- (7) Paper brittle

- (8) Papers dirty or sooty

- (9) Papers torn

- (10) Papers scattered

- (11) Bindings broken

- (12) Ink faded

- (13) Other conditions _____

_____ Good _____

19. Persons contacted J. C. Dally, Clerk

(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None

Signed by Leona McCullough FIELD WORKER Approved by C. M. Shepherd PROJECT SUPERINTENDENT

Date November, 9, 1936 PHS *Approved - T.G. Turner*

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State	Maryland
City or	Baltimore
Town	

Report No.	1993
Sheet	1
of	1 Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Streets 3. Room Number Callar
4. Agency of origin Department of Labor 5. Subdivision Immigration and Naturalization Service, Field Service Branch, District No. 5, District Director, Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision Office of the Clerk of the Court of Common Pleas.
8. Title of serial Applications for Naturalization
(Give title of serial as entered on label or as indicated by custodian)
9. Dates 1852 to 1906
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Entered chronologically. Volume shows name and address of applicant, country of birth, name and address of witness, date of application, date naturalized, and signature of Court Clerk.
(Examine records carefully, noting method of organization and noting particularly the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
11. What use is made of them? Frequently
12. For what purpose? Official
13. Indexes and inventories Alphabetical index in front of ledger.
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes
- (2) Folders
- (3) Envelopes
- (4) Pockets

X

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles or paper packages
- (8) Other forms _____

15. Size 11 1/2" x 16 1/2" 16. Volume 1 foot 8 1/2 inches
(Give dimensions of above) (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____ (2) Transfer cases _____
- (3) Folded document holders _____ (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1 steel, open
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers

- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions _____

Good

19. Persons contacted J. C. Daily, Clerk
(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None

Signed by Leona McCullough Approved by C. M. Shepherd
FIELD WORKER PROJECT SUPERINTENDENT

Date November, 9, 1936 PHS

Approved - T. G. Turner

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State <u>Maryland</u>
City or <u>Baltimore</u>
Town _____

Report No. <u>1994</u>
Sheet <u>1</u>
of _____ <u>1</u> Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Street 3. Room Number 14
4. Agency of origin Department of Labor 5. Subdivision Immigration and Naturalization Service, Field Service Branch, District No. 5, District Director, Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision Office of the Court of Common Pleas.
8. Title of serial Petition and Record of Naturalization
(Give title of serial as entered on label or as indicated by custodian)
9. Dates 1906 to 1929
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Filed chronologically. Record (form 2204), contains original
(Examine records carefully, noting method of organization and noting particularly the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
petition for the naturalization, numbers 1201 to 4800, showing name, address, occupation, place and date of birth, time and place of arrival in the U. S., record of family, affidavits of petitioner and witnesses, oath of allegiance, order of court, and number and date of Certificate of Naturalization. A Declaration of Intention (form 2203), is filed with the petition.
11. What use is made of them? Seldom
12. For what purpose? Official
13. Indexes and inventories Alphabetical Index in front of volume. Also complete
(Describe all indexes, and copy all inventories, attaching copies to report)
index in bound volume 14½" X 2½"

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes
- (2) Folders
- (3) Envelopes
- (4) Pockets

X

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles or paper packages
- (8) Other forms _____

15. Size 12" X 18"
(Give dimensions of above)

16. Volume 8 feet 7 1/2 inches
(Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____
- (2) Transfer cases _____
- (3) Folded document holders _____
- (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1 steel, open
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers

- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions _____

Good

19. Persons contacted J. C. Daily, Clerk
(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None

Signed by Leona McCullough Approved by G. M. Shepherd
FIELD WORKER PROJECT SUPERINTENDENT

Date November, 9, 1936 PHS

approved - T.A. Turner

WORKS PROGRESS ADMINISTRATION

State <u>Maryland</u>
City or <u>Baltimore</u>
Town _____

SURVEY OF FEDERAL ARCHIVES

Report on Serials

Report No. <u>1995</u>
Sheet <u>1</u>
of <u>1</u> Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette St., 3. Room Number Cellar of room 12
4. Agency of origin Department of Labor 5. Subdivision Immigration and Naturalization Service, Field Service Branch, District # 5, District Director, Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision Office of the Clerk of the Court of Common Pleas.
8. Title of serial Naturalization Record
(Give title of serial as entered on label or as indicated by custodian)
9. Dates 1832 to 1846 and 1857 to 1884
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Entered chronologically. Record shows record of admission to citizenship, names of Judge, clerk and sheriff; name, address and birthplace of applicant, and length of residence. The earlier record is in open court, the later record in criminal court.
(Examine records carefully, noting method of organization and noting particularly the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
11. What use is made of them? Seldom
12. For what purpose? Official
13. Indexes and inventories Alphabetical Index in front of book.
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes

X
- (2) Folders

- (3) Envelopes

- (4) Pockets

--

- (5) Covers

- (6) Loose-leaf books

- (7) Bundles or paper packages

- (8) Other forms _____

15. Size 10 1/2" X 16" (Give dimensions of above) 16. Volume 5 inches (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____ (2) Transfer cases _____
- (3) Folded document holders _____ (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1 steel, open
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire

- (2) Damaged by water

- (3) Damaged by vermin

- (4) Damaged by rodents

- (5) Damaged by careless handling

- (6) Damaged by faulty containers

- (7) Paper brittle

- (8) Papers dirty or sooty

- (9) Papers torn

- (10) Papers scattered

- (11) Bindings broken

- (12) Ink faded

- (13) Other conditions _____

Good

19. Persons contacted J. C. Daily, Clerk
(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None

Signed by Leona McCullough Approved by C. M. Shepherd
FIELD WORKER PROJECT SUPERINTENDENT

Date November, 9, 1936 PHS

approved - T.G. Turner

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State <u>Maryland</u>
City or <u>Baltimore</u>
Town _____

Report No. <u>1996</u>
Sheet <u>1</u>
of _____ <u>1</u> Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Street 3. Room Number 12, Cellar
4. Agency of origin Department of Labor 5. Subdivision Immigration and Naturalization Service, Field Service Branch, District No. 5, District Director, Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision Office of the Clerk of the Court of Common Pleas.
8. Title of serial Docket Petition for Naturalization
(Give title of serial as entered on label or as indicated by custodian)
9. Dates 1900 to 1903
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Entered chronologically. Volume shows date of petition.
(Examine records carefully, noting method of organization and noting particularly the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
name of applicant, date and place of birth, names of wife and children, time and place of arrival in this country and residence since arrival, name and date of court where Declaration of Intention was issued, name of vessel and date of discharge from U. S. Army, Navy and Merchant service, name and residence of witness, news paper in which petition was advertised, where protest was filed, date petition and protest were heard, date of naturalization and signature of Clerk of the Superior Court of Baltimore City, Maryland
11. What use is made of them? Frequently
12. For what purpose? Official
13. Indexes and inventories Alphabetical index in front of volume
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes
- (2) Folders
- (3) Envelopes
- (4) Pockets

X

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles or paper packages
- (8) Other forms _____

15. Size 11" X 15" 16. Volume 3 1/2 inches
(Give dimensions of above) (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____
- (2) Transfer cases _____
- (3) Folded document holders _____
- (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1 steel, open
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers

- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions _____

Good

19. Persons contacted J. C. Daily, Clerk
(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None

Signed by Leona McCullough Approved by C. M. Shepherd
FIELD WORKER PROJECT SUPERINTENDENT

Date November, 10, 1936 PHS

Approved - T. G. Turner

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State	Maryland
City or	Baltimore
Town	

Report No.	1997
Sheet	1
of	1 Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Streets 3. Room Number 14, Alcove
4. Agency of origin Department of Labor 5. Subdivision Immigration and Naturalization Service, Field Service Branch, District No. 5, District Director, Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision Office of the Clerk of the Court of Common Pleas.
8. Title of serial Declaration of Intention of Petition for Naturalization Granted.
(Give title of serial as entered on label or as indicated by custodian)
9. Dates 1904 to 1906
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Filed chronologically. Certificate shows date.
(Examine records carefully, noting method of organization and noting particularly the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
name, birthplace and present residence of applicant and signature of clerk of the Court of Common Pleas.
11. What use is made of them? Seldom
12. For what purpose? Official
13. Indexes and inventories None
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes
- (2) Folders
- (3) Envelopes
- (4) Pockets

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles or paper packages
- (8) Other forms _____

X

15. Size 9" X 10" (Give dimensions of above) 16. Volume 8 inches (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____
- (2) Transfer cases _____
- (3) Folded document holders _____
- (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1, open, wood
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers

- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions _____

Good

19. Persons contacted J. C. Daily, Clerk
(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None

Signed by Leona McCullough Approved by C. M. Shepherd
FIELD WORKER PROJECT SUPERINTENDENT

Date November, 9, 1936 PHS

Approved - T. G. Turner

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State	Maryland
City or	Baltimore
Town	

Report No.	1998
Sheet	1
of	1 Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Streets 3. Room Number Cellar of Room 12
4. Agency of origin Department of Labor 5. Subdivision Immigration and Naturalization Service, Field Service Branch, District # 5, District Director, Inspector in Charge
6. Agency of custody City of Baltimore 7. Subdivision Office of the Clerk of the Court of Common Pleas.
8. Title of serial Index to Naturalization on Declaration (Volumes 9 and 10)
(Give title of serial as entered on label or as indicated by custodian)
9. Dates 1845 to 1851
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Filed alphabetically. Record shows name, birthplace, date
(Examine records carefully, noting method of organization and noting particularly the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
and folio number.
11. What use is made of them? Seldom
12. For what purpose? Official
13. Indexes and inventories None
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes
- (2) Folders
- (3) Envelopes
- (4) Pockets

X

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles or paper packages
- (8) Other forms _____

15. Size 8 1/2" X 13" 16. Volume 2 inches
(Give dimensions of above) (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____ (2) Transfer cases _____
- (3) Folded document holders _____ (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1 steel, open
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers

- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions _____

X

Good

19. Persons contacted J. C. Daily, Clerk
(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None

Signed by Katherine O'Connor Approved by C. M. Shepherd
FIELD WORKER PROJECT SUPERINTENDENT

Date November, 9, 1936 PHS

Approved - T. A. Turner

WORKS PROGRESS ADMINISTRATION

State	Maryland
City or Town	Baltimore

SURVEY OF FEDERAL ARCHIVES

Report on Serials

Report No.	1999
Sheet	1
of	1 Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Streets 3. Room Number Cellar of room 12
4. Agency of origin Department of Labor 5. Subdivision Immigration and Naturalization Service, Field Service Branch, District # 5, District Director, Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision Office of the Clerk of the Court of Common Pleas.
8. Title of serial Declarations of Intentions
(Give title of serial as entered on label or as indicated by custodian)
9. Dates 1851 to 1858 ; 1867 to 1906
(Give inclusive dates, and report any gaps that may exist in the serial)
(For gap see Criminal Court Declaration Record of Intention 1858 - 1903)
10. Additional description Filed chronologically. Shows a declaration to become a citizen of the United States. Record shows name, date, fatherland, place now residing; also signatures of applicant, witness and clerk of the Court of Common Pleas.
(Examine records carefully, noting method of organization and noting particularly the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
11. What use is made of them? Frequently
12. For what purpose? Official
13. Indexes and inventories Alphabetical index in 8 1/2" X 14" # 1/4" bound volume
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes
- (2) Folders
- (3) Envelopes
- (4) Pockets

X

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles or paper packages
- (8) Other forms _____

15. Size 12 1/2" X 17 1/2" 16. Volume 2 feet 9 inches
 (Give dimensions of above) (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____ (2) Transfer cases _____
- (3) Folded document holders _____ (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1 steel, open
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers

- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions _____

_____ Good _____

19. Persons contacted J. C. Daily, Clerk
 (List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information Records from 1851 to 1858 are stored in alcove on first floor.

Signed by Katherine O'Connor Approved by C. M. Shepherd
 FIELD WORKER PROJECT SUPERINTENDENT

Date November, 9, 1936

PHS *Approved - T.A. Turner*

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State	Maryland
City or	Baltimore
Town	

Report No.	2000
Sheet	1
of	1 Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Streets 3. Room Number 14, alcove
4. Agency of origin Department of Labor 5. Subdivision Immigration
and Naturalization Service, Field Service Branch, District No. 5, District Director,
Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision Office of the
Clerk of the Court of Common Pleas.
8. Title of serial Record of Declaration of Intentions
 (Give title of serial as entered on label or as indicated by custodian)
9. Dates 1906 to 1914
 (Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Filed chronologically. Bound volume (form 2202 B), shows
 (Examine records carefully, noting method of organization and noting particularly
 the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
declaration of Intentions in Court of Common Pleas, giving name, age, occupation
and description of applicant, place of birth, former and present residence, date
and place of arrival, signature of declarant and clerk and date of declaration.
11. What use is made of them? Seldom
12. For what purpose? Official
13. Indexes and inventories Alphabetical index in front of book.
 (Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes
- (2) Folders
- (3) Envelopes
- (4) Pockets

X

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles or paper packages
- (8) Other forms _____

15. Size 9 1/2" X 14" 16. Volume 1 foot 3 inches
(Give dimensions of above) (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____
- (2) Transfer cases _____
- (3) Folded document holders _____
- (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1 wood, open
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers

- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions _____

Good

19. Persons contacted J. C. Dailey, Clerk
(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None

Signed by Katherine O'Connor Approved by C. M. Shepherd
FIELD WORKER PROJECT SUPERINTENDENT

Date November, 9, 1936

PHS

approved - T. A. Turner

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State	Maryland
City or	Baltimore
Town	

Report No.	2001
Sheet	1
of	1 Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Sts. 3. Room Number 14
4. Agency of origin Department of Labor 5. Subdivision Immigration
and Naturalization Service, Field Service Branch, District No. 5, District Director,
Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision Office of the
Clerk of the Court of Common Pleas.
8. Title of serial Records of Declarations of Intentions
 (Give title of serial as entered on label or as indicated by custodian)
9. Dates 1915 to 1931
 (Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Filed chronologically. Round volume (form 2202B), shows
 (Examine records carefully, noting method of organization and noting particularly
 the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
declaration of intentions in Court of Common Pleas, giving name, age, occupation and
description of applicant, place of birth, former and present residence, date and place
of arrival, signature of declarant and clerk and date of declaration.
11. What use is made of them? Seldom
12. For what purpose? Official
13. Indexes and inventories Alphabetical index in front of book
 (Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes
- (2) Folders
- (3) Envelopes
- (4) Pockets

X

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles or paper packages
- (8) Other forms _____

X

15. Size 9 1/2" X 11 1/2" 16. Volume 3 feet
(Give dimensions of above) (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____
- (2) Transfer cases _____
- (3) Folded document holders _____
- (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1 steel, open
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers

- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions _____

Good

19. Persons contacted J. C. Daily, Clerk
(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None

Signed by Katherine O'Connor Approved by C. M. Shepherd
FIELD WORKER PROJECT SUPERINTENDENT

Date November, 9, 1936

PHS

Approved - T. A. Turner

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State	Maryland
City or	Baltimore
Town	

Report No.	2002
Sheet	1
of	1 Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Streets 3. Room Number Cellar
4. Agency of origin Department of Labor 5. Subdivision Immigration
and Naturalization Service, Field Service Branch, District # 5, District Director,
Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision Office of the
Clerk of the Court of Common Pleas.
8. Title of serial Declaration Record of Intentions (Criminal Court)
(Give title of serial as entered on label or as indicated by custodian)
9. Dates 1858 to 1903
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Filed chronologically. Record shows name, date, birthplace,
(Examine records carefully, noting method of organization and noting particularly
the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
place now residing and signature of clerk.
11. What use is made of them? Seldom
12. For what purpose? Official
13. Indexes and inventories Alphabetical index in front of book
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes
- (2) Folders
- (3) Envelopes
- (4) Pockets

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles or paper packages
- (8) Other forms _____

15. Size 11" X 16" (Give dimensions of above) 16. Volume 3 inches (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____ (2) Transfer cases _____
- (3) Folded document holders _____ (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1 steel, open
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers

- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions _____

_____ Good _____

19. Persons contacted J. C. Daily, Clerk

(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None

Signed by Katherine O'Connor Approved by C. M. Shepherd
FIELD WORKER PROJECT SUPERINTENDENT

Date November, 9, 1936 PHS

approved - T.A. Turner

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State	Maryland
City or Town	Baltimore

Report No.	2003
Sheet	1
of	1 Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette 3. Room Number 14, Alcove
4. Agency of origin Department of Labor 5. Subdivision Immigration and Naturalization Service, Field Service Branch, District # 5, District Director, Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision Office of the Clerk of the Court of Common Pleas.

8. Title of serial Declaration of Intentions Numbers.
(Give title of serial as entered on label or as indicated by custodian)

9. Dates 1911 to 1921
(Give inclusive dates, and report any gaps that may exist in the serial)

10. Additional description Filed numerically. Record shows declaration number, name of applicant and month in which issued.
(Examine records carefully, noting method of organization and noting particularly the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)

11. What use is made of them? Seldom.

12. For what purpose? Official.

13. Indexes and inventories None.
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes
- (2) Folders
- (3) Envelopes
- (4) Pockets

V 1

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles or paper packages
- (8) Other forms _____

15. Size 8 3/4" x 14" 16. Volume 1/2 inch.
(Give dimensions of above) (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____ (2) Transfer cases _____
- (3) Folded document holders _____ (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1 wood, open.
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers

- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions Good.

19. Persons contacted J. C. Daily, Clerk.
(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None.

Signed by K. O'Connor Approved by C. M. Shepherd
FIELD WORKER PROJECT SUPERINTENDENT

Date 11/9/36

Approved - T. G. Turner

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State	Maryland
City or Town	Baltimore
Town	

Report No.	2004
Sheet	1
of	1 Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Streets 3. Room Number Cellar of Room 12
4. Agency of origin Department of Labor 5. Subdivision Immigration and Naturalization Service, Field Service Branch, District # 5, District Director, Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision Office of the Clerk of the Court of Common Pleas.
8. Title of serial Naturalization Record of Declarations
(Give title of serial as entered on label or as indicated by custodian)
9. Dates 1845 to 1904
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Filed chronologically. Record shows official certificate admitting applicant to citizenship, date, name of judge, name of applicant and date of declaration of intentions.
(Examine records carefully, noting method of organization and noting particularly the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
11. What use is made of them? Frequently
12. For what purpose? Official
13. Indexes and inventories Alphabetical index in front of book.
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes
- (2) Folders
- (3) Envelopes
- (4) Pockets

X

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles or paper packages
- (8) Other forms _____

15. Size 12 1/2" X 17" X 3" 16. Volume 4 feet 8 inches
(Give dimensions of above) (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____ (2) Transfer cases _____
- (3) Folded document holders _____ (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1 steel, open
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers

- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions _____

Good

19. Persons contacted J. C. Daily, Clerk
(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None

Signed by Katherine O'Connor Approved by C. M. Shepherd
FIELD WORKER PROJECT SUPERINTENDENT

Date November, 9, 1936

PHS

Approved - T. G. Turner

WORKS PROGRESS ADMINISTRATION

State	Maryland
City or Town	Baltimore

SURVEY OF FEDERAL ARCHIVES

Report on Serials

Report No.	2005
Sheet	1
of	1 Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Streets 3. Room Number 14, Aloove
4. Agency of origin Department of Labor 5. Subdivision Immigration and Naturalization Service, Field Service Branch, District # 5, District Director, Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision Office of the Clerk of the Court of Common Pleas.
8. Title of serial Payments for Certificates of Naturalization.
(Give title of serial as entered on label or as indicated by custodian)
9. Dates 1907 to 1917
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Filed chronologically. Record shows date of payment, name of applicant, number and amount paid.
(Examine records carefully, noting method of organization and noting particularly the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
11. What use is made of them? Seldom
12. For what purpose? Official
13. Indexes and inventories None
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes
- (2) Folders
- (3) Envelopes
- (4) Pockets

X

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles or paper packages
- (8) Other forms _____

15. Size 10" X 16" 16. Volume 1/2 inch
(Give dimensions of above) (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____ (2) Transfer cases _____
- (3) Folded document holders _____ (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1 wood, open
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers

- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions _____

Good

19. Persons contacted J. C. Daily, Clerk

(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None

Signed by Katherine O'Connor Approved by Clarence M. Shepherd

FIELD WORKER

PROJECT SUPERINTENDENT

Date November, 9, 1936

PHS

Approved - T.A. Turner

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State	Maryland
City or	Baltimore
Town	

Report No.	2006
Sheet	1
of	1 Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Streets 3. Room Number 14, Alcove
4. Agency of origin Department of Labor 5. Subdivision Immigration and
Naturalization Service, Field Service Branch, District # 5, District Director,
Inspector in Charge
6. Agency of custody City of Baltimore 7. Subdivision Office of the Clerk
of the Court of Common Pleas.
8. Title of serial Petitions for Naturalization
(Give title of serial as entered on label or as indicated by custodian)
9. Dates 1904 to 1906
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Filed chronologically. Petition shows name, place of birth,
(Examine records carefully, noting method of organization and noting particularly
the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
date, present residence, name and residence of applicant's children, date, affidavits
of witnesses and signature of clerk of the Court of Common Pleas of Baltimore City,
Maryland.
11. What use is made of them? Seldom
12. For what purpose? Official
13. Indexes and inventories None
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes
- (2) Folders
- (3) Envelopes
- (4) Pockets

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles ~~or loose packages~~
- (8) Other forms

X

15. Size 10" x 13 1/2" 16. Volume 1 foot 8 inches
 (Give dimensions of above) (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____ (2) Transfer cases _____
- (3) Folded document holders _____ (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1 wood, open
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers

- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions _____

Good

19. Persons contacted J. C. Daily, Clerk

(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None

Signed by Katherine O'Connor

FIELD WORKER

Approved by C. M. Shepherd

PROJECT SUPERINTENDENT

Date November, 9, 1936

PHS

Approved - T. A. Turner

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State <u>Maryland</u>
City or <u>Baltimore</u>
Town _____

Report No. <u>2007</u>
Sheet <u>1</u>
of <u>1</u> Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Streets 3. Room Number Alcove
4. Agency of origin Department of Labor 5. Subdivision Immigration and
Naturalization Service, Field Service Branch, District # 5, District Director,
Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision Office of the Clerk
of the Court of Common Pleas.
8. Title of serial Petitions for Naturalization Numbers
(Give title of serial as entered on label or as indicated by custodian)
9. Dates 1911 to 1922
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Filed numerically. Record shows petition number and name
(Examine records carefully, noting method of organization and noting particularly
the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
of applicant; also month in which issued.
11. What use is made of them? Seldom
12. For what purpose? Official
13. Indexes and inventories None
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes
- (2) Folders
- (3) Envelopes
- (4) Pockets

X

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles or paper packages
- (8) Other forms _____

15. Size 8 1/2" X 14" (Give dimensions of above) 16. Volume 1/2 inch (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____
- (2) Transfer cases _____
- (3) Folded document holders _____
- (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1 wood, open
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers

- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions _____

Good

19. Persons contacted J. C. Daily, Clerk
 (List individuals, with their title, who have supplied information or who could supply information about the archives)

20. Additional information None

Signed by Katherine O'Connor Approved by C. M. Shepherd
 FIELD WORKER PROJECT SUPERINTENDENT.

Date November, 9, 1936 PHS *Approved - T.A. Turner*

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State	Maryland
City or	Baltimore
Town	

Report No.	2008
Sheet	1
of	1 Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Streets 3. Room Number 14, Alovee
4. Agency of origin Department of Labor 5. Subdivision Immigration and Naturalization Service, Field Service Branch, District # 5, District Director, Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision Office of the Clerk of the Court of Common Pleas.
8. Title of serial Applications for Naturalization
(Give title of serial as entered on label or as indicated by custodian)
9. Dates 1898 to 1906
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Filed numerically. Application shows name, place of birth, present residence, and signature of applicant; also name and address of witnesses and date of application.
(Examine records carefully, noting method of organization and noting particularly the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
11. What use is made of them? Seldom
12. For what purpose? Official
13. Indexes and inventories None
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes
- (2) Folders
- (3) Envelopes
- (4) Pockets

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles ~~of paper packages~~ **XXXXXXXXXXXX**
- (8) Other forms

X

15. Size 10" X 12" X 4 1/2" 16. Volume 10 inches
(Give dimensions of above) (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____
- (2) Transfer cases _____
- (3) Folded document holders _____
- (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1 wood, open
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers

- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions _____

Good

19. Persons contacted J. C. Daily, Clerk

(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None

Signed by Katherine O'Connor Approved by C. M. Shepherd
FIELD WORKER PROJECT SUPERINTENDENT

Date November, 9, 1936

PHS

Approved - T. G. Turner

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State	Maryland
City or	Baltimore
Town	

Report No.	2009
Sheet	1
of	1 Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Streets 3. Room Number 14
4. Agency of origin Department of Labor 5. Subdivision Immigration and Naturalization Service, Field Service Branch, District # 5, District Director, Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision Office of the Clerk of the Court of Common Pleas.
8. Title of serial Index to Declaration of Intentions and Petitions for Naturalization.
(Give title of serial as entered on label or as indicated by custodian)
9. Dates 1906 to 1932
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Filed alphabetically. Record (form 2223), showing, name of applicant, volume and page of declaration, volume and page of petition.
(Examine records carefully, noting method of organization and noting particularly the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
11. What use is made of them? Daily
12. For what purpose? Official
13. Indexes and inventories None
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes
- (2) Folders
- (3) Envelopes
- (4) Pockets

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles or paper packages
- (8) Other forms

X

15. Size 14 1/2" X 18" 16. Volume 2 1/2"
 (Give dimensions of above) (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____ (2) Transfer cases _____
- (3) Folded document holders _____ (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1 wood, open
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers

- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions

Good

19. Persons contacted J. C. Daily, Clerk

(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None

Signed by Katherine O'Connor Approved by C. M. Shepherd
 FIELD WORKER PROJECT SUPERINTENDENT

Date November, 9, 1936

PHS

approved - T.A. Turner

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State <u>Maryland</u>
City or <u>Baltimore</u>
Town _____

Report No. <u>2010</u>
Sheet <u>1</u>
of _____ <u>1</u> Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Streets 3. Room Number 14, Above
4. Agency of origin Department of Labor 5. Subdivision Immigration and Naturalization Service, Field Service Branch, District # 5, District Director, Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision Office of the Clerk of the Court of Common Pleas.
8. Title of serial Correspondence File
(Give title of serial as entered on label or as indicated by custodian)
9. Dates 1915 to 1921
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Filed alphabetically by name of petitioner. Contains official correspondence regarding applications, letters of recommendations, information from the Commissioner of Naturalization and requisitions for supplies.
(Examine records carefully, noting method of organization and noting particularly the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
11. What use is made of them? Seldom
12. For what purpose? Official
13. Indexes and inventories None
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes
- (2) Folders
- (3) Envelopes
- (4) Pockets

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles or paper packages
- (8) Other forms

Letter files - 6

15. Size 11" X 12" X 3" 16. Volume 3 feet
(Give dimensions of above) (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____ (2) Transfer cases _____
- (3) Folded document holders _____ (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1 wood, open
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers

- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions _____

Good

19. Persons contacted J. C. Daily, Clerk

(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None

Signed by Katherine O'Connor Approved by C. M. Shepherd
FIELD WORKER PROJECT SUPERINTENDENT

Date November, 9, 1936

PHS

Approved - T. A. Turner

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State	Maryland
City or Town	Baltimore
Town	

Report No.	2011
Sheet	1
of	1 Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Street 3. Room Number 14, Alcove
4. Agency of origin Department of Labor 5. Subdivision Immigration and Naturalization Service, Field Service Branch, District # 5, District Director, Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision Office of the Clerk of the Court of Common Pleas.
8. Title of serial Preliminary forms for Declaration of Intentions
(Give title of serial as entered on label or as indicated by custodian)
9. Dates 1922
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Filed numerically from 10,016 to 11,100. Form (2213), shows
(Examine records carefully, noting method of organization and noting particularly the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
name, occupation, description, place of birth, present residence, place and date of arrival in the United States, names of relatives and additional facts.
11. What use is made of them? Seldom
12. For what purpose? Official
13. Indexes and inventories None
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes
- (2) Folders
- (3) Envelopes
- (4) Pockets

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles or ~~paper packages~~
- (8) Other forms _____

15. Size 9" X 13" X 4" (Give dimensions of above) 16. Volume 8 inches (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____
- (2) Transfer cases _____
- (3) Folded document holders _____
- (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1 wood, open
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers

- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions _____

Good

19. Persons contacted J. C. Daily, Clerk
 (List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None

Signed by Katherine O'Connor Approved by G. M. Shepherd
 FIELD WORKER PROJECT SUPERINTENDENT

Date November, 9, 1936 FHS *Approved - T.G. Turner*

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State	Maryland
City or	Baltimore
Town	

Report No.	2012
Sheet	1
of	1 Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Streets 3. Room Number Cellar of # 12
4. Agency of origin Department of Labor 5. Subdivision Immigration and Naturalization Service, Field Service Branch, District # 5, District Director, Inspector in Charge
6. Agency of custody City of Baltimore 7. Subdivision Office of the Clerk of the Court of Common Pleas.
8. Title of serial Alphabetical List of Declaration of Intentions.
(Give title of serial as entered on label or as indicated by custodian)
9. Dates January, 1st, 1840 to December, 1844 (Inclusive)
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Filed alphabetically. Record gives a list of persons who have declared their intentions to become a citizen of the United States and shows name of applicant, and date of application.
(Examine records carefully, noting method of organization and noting particularly the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
11. What use is made of them? Seldom
12. For what purpose? Official
13. Indexes and inventories None
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes
- (2) Folders
- (3) Envelopes
- (4) Pockets

X

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles or paper packages
- (8) Other forms

15. Size 8" X 13" 16. Volume 1/4 inch
(Give dimensions of above) (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____ (2) Transfer cases _____
- (3) Folded document holders _____ (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1 steel, open
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers

- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions

X

Good

19. Persons contacted J. C. Daily, Clerk
(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None

Signed by Katherine O'Connor Approved by C. M. Shepherd
FIELD WORKER PROJECT SUPERINTENDENT

Date November, 9, 1936

PHS

Approved - T. G. Turner

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State	Maryland
City or	Baltimore
Town	

Report No.	2013
Sheet	1
of	1 Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Streets 3. Room Number Cellar of Room 12
4. Agency of origin Department of Labor 5. Subdivision Immigration and
Naturalization Service, Field Service Branch, District # 5, District Director,
Inspector in Charge.
6. Agency of custody City of Baltimore 7. Subdivision Office of the Clerk
of the Court of Common Pleas.
8. Title of serial General Index of Naturalization Records of Baltimore City
(Give title of serial as entered on label or as indicated by custodian)
Court.
9. Dates 1867 to 1903
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Filed alphabetically by name. Record shows date, alien's
(Examine records carefully, noting method of organization and noting particularly
the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
name, birthplace, name of witness, book and folio numbers.
11. What use is made of them? Frequently
12. For what purpose? Official
13. Indexes and inventories None
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes

X
- (2) Folders
- (3) Envelopes
- (4) Pockets

- (5) Covers

- (6) Loose-leaf books
- (7) Bundles or paper packages
- (8) Other forms _____

15. Size 15" X 16 1/2" 16. Volume 2 1/2 inches
 (Give dimensions of above) (Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____ (2) Transfer cases _____
- (3) Folded document holders _____ (4) Card Cabinets _____
- (5) Shelves (Give brief description) _____
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) On desk

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire

- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers

- (7) Paper brittle

- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions _____

_____ Good _____

19. Persons contacted J. C. Daily, Clerk
 (List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None

Signed by Katherine O'Connor Approved by C. M. Shepherd
 FIELD WORKER PROJECT SUPERINTENDENT

Date November, 9, 1936 PHS

approved - T.A. Turner

WORKS PROGRESS ADMINISTRATION

SURVEY OF FEDERAL ARCHIVES

Report on Serials

State	Maryland
City or Town	Baltimore
Town	

Report No.	2014
Sheet	1
of	1 Sheets

1. Name of building Court House
2. Address of building Calvert and Fayette Streets 3. Room Number 14, Above
4. Agency of origin Department of Labor 5. Subdivision Immigration and Naturalization Service, Field Service Branch, District # 5, District Director, Inspector in Charge
6. Agency of custody City of Baltimore 7. Subdivision Office of the Clerk of the Court of Common Pleas.
8. Title of serial Military Petitions for Naturalization
(Give title of serial as entered on label or as indicated by custodian)
9. Dates 1918 to 1924
(Give inclusive dates, and report any gaps that may exist in the serial)
10. Additional description Filed chronologically. Shows petition of naturalization for men in the military service including affidavits of petitioner and witnesses, oath of allegiance, order of court admitting petitioner, names of substitute witnesses and numbers of certificate.
(Examine records carefully, noting method of organization and noting particularly the type, that is, whether correspondence, reports, tabulations, charts, maps, etc.)
11. What use is made of them? Seldom
12. For what purpose? Official
13. Indexes and inventories None
(Describe all indexes, and copy all inventories, attaching copies to report)

14. Check in squares the form in which archives are maintained: _____

- (1) Bound Volumes
- (2) Folders
- (3) Envelopes
- (4) Pockets

V

- (5) Covers
- (6) Loose-leaf books
- (7) Bundles or paper packages
- (8) Other forms _____

15. Size 12 1/2" X 18 1/2"
(Give dimensions of above)

16. Volume 1 foot 8 inches
(Give total linear feet of archives)

17. Indicate the number and type of containers in the following blanks:

- (1) Filing cases _____
- (2) Transfer cases _____
- (3) Folded document holders _____
- (4) Card Cabinets _____
- (5) Shelves (Give brief description) 1 wood, open
- (6) Wooden boxes (Give size also) _____
- (7) Paper or pasteboard boxes (Give size also) _____
- (8) Other types (Give brief description) _____

18. Check in squares evidences of the following conditions of the archives:

- (1) Damaged by fire
- (2) Damaged by water
- (3) Damaged by vermin
- (4) Damaged by rodents
- (5) Damaged by careless handling
- (6) Damaged by faulty containers

- (7) Paper brittle
- (8) Papers dirty or sooty
- (9) Papers torn
- (10) Papers scattered
- (11) Bindings broken
- (12) Ink faded
- (13) Other conditions _____

Good

19. Persons contacted J. C. Daily, Clerk

(List individuals, with their titles, who have supplied information or who could supply information about the archives)

20. Additional information None

Signed by Katherine O'Connor Approved by C. M. Shepherd

FIELD WORKER

PROJECT SUPERINTENDENT

Date November, 9, 1936

PHS

Approved - T. A. Turner

BRIEF HISTORY OF THE CONDUIT SYSTEM

Constructed and Owned by the
CITY OF BALTIMORE.

=o=o=o=

The congestion of the overhead wires, especially in the business section of the City, becoming so great as to become a menace to public safety, and greatly hampering the Fire Department in its work, besides being an unsightly nuisance, there was introduced into the State Legislature, a bill, afterwards known as Act of Assembly Chapter 200, approved March 30th, 1892, authorizing the Mayor and City Council of Baltimore to provide conduits and require all telegraph, telephone, electric light and other wires to be removed from the streets, lanes and alleys of said City, and placed in said conduits, and prescribe rentals for the use thereof, and to authorize the appointment of an Electrical Commission of said City.

On April 4th, 1896 there was passed by the State Legislature, a bill, afterwards known as Act of Assembly, Chapter 350, authorizing the Mayor and City Council of Baltimore to issue stock of the City to an amount not exceeding one-million dollars, for providing a series of conduits for telephone, telegraph, electric light and other wires, under the streets, lanes and alleys of the City of Baltimore, ~~such issue of stock~~, such issue ^{of stock} to be approved by a majority of votes of the legal voters of the said ^{City}, as required by Section 7, Article II of the Constitution of the State of Maryland. The law having been ratified by the people, ordinances were introduced into the City Council requiring all telephone, telegraph, electric light, feeder and other (except trolley)

wires to be placed underground, appointing an Electrical Commission and empowering the same to construct a general system of conduits and to supervise and direct the manner in which the work should be done; and providing for the furnishing to the Electrical Commission of data by the different companies maintaining poles and overhead wires in the City of Baltimore. Considerable opposition developed on the part of the Companies, owning and operating said poles and overhead wires, but after a strenuous fight, the Ordinances, known as "Ordinances of the Mayor and City Council of Baltimore, Nos. 106, 107 and 108, approved August 25th, 1898, were finally passed; and on September 28th, 1898, the Electrical Commission, consisting of the Mayor (ex-officio) City Register (ex-officio) and President of the Board of Fire Commissioners (ex-officio) met and appointed to the position of Chief Engineer, Mr. Chas. E. Phelps Jr. Offices were at once secured, and an Assistant Engineer, Draughtsmen and office assistants appointed, and preliminary work of laying out plans and gathering data begun. Contracts for materials were let in January 1899, and the actual work of construction began in March 1899. The first conduit laid in the City was a short spur across Girard Avenue, connecting the plants of the Crown Cork and Seal Company, the ordinances prescribing that no individuals, firms or corporations should have the right to construct conduits in the bed of the streets except the Chesapeake & Potomac Telephone Company, a lessee of the Bell Telephone Company, a corporation which had secured legislation prior to that of the City, permitting it to construct a conduit system for the carrying of its cables.

There were operating at this time three separate electric light companies - the Edison, the Brush and the Northern Electric Company; two Railway systems, the Consolidated Railways, ^{and} City Passenger Railway Company; the Postal Telegraph-Cable Company, the Western Union Telegraph Company, the Home ~~Telegraph~~ Telephone Company (an independent Company).

The Electric Light Companies, soon after the work of constructing the conduits was commenced, were merged into a company known as the United Electric Light and Power Company - thereupon followed the merging of the two Railway interests - the Consolidated Railways and the City Passenger Railways Company, being formed into the United Railways and Electric Company. This meant a complete revision of the plans and data submitted by these interests, and naturally caused a delay in carrying out the work of placing wires underground. ~~The machinery contained in the plants of both the electric light and the railways companies was of rather antiquated pattern.~~ The plans of the Railways company contemplated a central power station, from which power would be sent to four or more transformer stations, located at different points, in or near the City, through cables carrying 13,000 volts, to be then transformed down to 550 volts, and transmitted through feeders to the cars. This same system was followed by the United Electric Light and Power Company, resulting in the construction of a transformer station located in about the central portion of the City, and the construction of a new power station designed to do away entirely with the stations of the old companies, current being transmitted from the central station to the transformer stations at 6600 volts, and transformed there into commercial service and and arc light current.

The Home Telephone Company, the first company to apply for duct space and occupy the conduits in the City's general system, about the year 1900 was sold by the Receivers and taken in by the Maryland Telephone & Telegraph Company. A considerable delay, from causes above enumerated, ~~and~~ the natural opposition to the then new innovation of carrying wires of all companies in the same conduits, the great expenditures on the part of the Companies in perfecting their plans, as above outlined, resulted - the opposition gradually died away, and the companies began to co-operate

with the City, burying their wires and removing the unsightly poles.

The system as designed by the Chief Engineer of the Electrical Commission contemplated the construction of trunk lines, extending to points outside the "congested" or business district, which district it was contemplated first to rid of all wires and poles. These Main or trunk conduits carry all through wires. Then began the construction of the subsidiary or "distributing" conduits, from which radiated connections into houses, serving each house in the "congested" district from a connection from a service box located, as a rule, in the pavements.

The first requisite of the work was to establish a basis upon which the working plans for construction were to be made, and obviously the apparent procedure was to collect and plot data as to the structures under the surface of the streets, and to determine in advance the possible amount of obstruction to be overcome. Such data as could be obtained ~~was~~ was plotted on street plats to the scale of 20 feet to the inch. This not being ~~satisfactory~~ sufficiently accurate, it was supplemented by actual measurements taken in test holes at intervals of 50 feet in the street and at street intersections, and corrections made as determined.

At the same time that the laying-down of the working plans was being prosecuted, information was sought of the various companies who were to occupy conduits when completed, as to their plans and prospective needs, and with the information thus obtained, the present system was designed.

Having determined, as well as could be done, the capacity of the several lines, and after considering all reasons advanced for and against the construction of a separate system for each class of cables, cost, etc., it was decided to construct a ^{single} simple conduit system for all classes of electric conductors, and a system as constructed under these plans consists ~~of~~ of: - "Main Conduits," ^{for the} carrying of trunk or through wires; "Subsidiary Conduits" from which radiate the connections into houses in the sections contemplated to be served entirely underground, no overhead wires or poles being permitted on the streets whatsoever.

Main Conduits.

These conduits are built in the streets with a minimum cover of 4 feet, lines varying from 12 to 81 ducts, laid ^{on} vitrified tile conduit in multiples of 4, 6 and 9 ducts. Manholes are constructed at street intersections permitting outlets to be run through side streets without a duplication of holes, and permitting of changes in grade which usually

occur at street intersections. The essential features of the manhole are size, cover ^{for} ~~from~~ street opening and the distribution of cables along ~~the~~ the walls to facilitate splicing and repairs; the depth is a variable factor, and beyond the necessary head room, is governed entirely by depth to which the entering conduits are built, the size being governed largely by the number of cables which are run through manholes, lay-out of the conduits and size of the lateral lines, if any. But above any other consideration is that of providing sufficient clear space in which work of whatever character that may have to be performed in it may not be hampered by a crowded manhole. The manholes are constructed sufficiently roomy to admit ^{of the proper laying up} ~~the~~ cables, and of sufficient space for efficient splicing of new and repairs to old cables, the design completely reserving the upper part ~~for electric light and power~~ of the manhole for electric light and power cables, the lower part for telephone, telegraph and other low tension cables, thus high power cables laying in the upper chambers following the same scheme are brought down the wall and ^{into} the top ducts of the branch conduit. In the same manner, telephone, telegraph and other low tension cables, being below the branch outlet, the cables enter the branch conduit from below, taking the lower conduit. Splices and connections on light and power cables being much simpler and more quickly made than on telephone cables, which being composed of from one to four hundred, as the case may be, separate and distinct conductors, require more time and greater care. It was for this reason that this latter class of cables was assigned to the lower ducts, allowing the whole manhole floor on which to handle them in splicing and repairing.

Subsidiary or Distributing Conduits.

^{Research} This is divided into two distinct but inter-connected parts. First, a system providing means wherefrom connections may be made to house wires. This could not be done successfully from the main conduits themselves, as

the many connections which are required would so impair the efficiency by reason of the ~~strains~~ frequent street openings which would have to be made in the main conduits. A distributing system was therefore necessitated which would admit of house-connections being made as often as necessary without affecting the main conduits or the cables in them. The distributing system was built chiefly in the sidewalks, consisting of ten terra cotta ducts and two fibres, with distribution boxes at intervals of 50 feet, conduits having a cover of about 18 inches. From the distributing boxes radiate the connections into houses, consisting of four fibre ducts.

Up to January 1, 1907, there has been constructed 4,291,130 feet of main or trunk conduits, and 1,524,076 feet of distributing conduits, the latter including duct feet in connections to houses. There has also been constructed 143,740 feet of lateral conduits, radiating from trunk lines outside of the territory contemplated to be rid entirely of poles and overhead wires. In such territory it is contemplated to distribute service in each block from poles located in alleys in the rear of buildings, cables ~~branch~~ branching from the main conduits through lateral connections to distributing poles. There have been constructed 3951 house connections, fed from the conduit system, 40 trolley-pole connections and 250 arc light connections. Arc light cables are carried usually through a fibre conduit laid on top of the terra cotta line, the fibre permitting connection to be readily cut in, and a ^{quarter} ~~required~~ bend inserted, cable run to and up the pole, down and continue on through the line. There are now occupied by the cables in the City 1,536,164.86 duct feet of which 45,684 feet are owned by the City, consisting of fire-alarm telegraph, police telegraph, electric light and power and other municipal wires. The work of extension of the system is proceeding daily, and the work of installing new cables in new territory, and removing poles and overhead wires is ^{progressing} ~~proceeding~~ as rapidly as conditions will permit, the company

ies seeming to co-operate with the City in the work.

Out of the two appropriations of one-million dollars each, there ~~have~~ were expended up to January 1, 1907, \$1,565,817.52. The rentals received for use of the conduits by the different companies amounted during the year 1906 to \$64,389, and increase over 1905 of about \$17,000. As the work, of pulling in more cable is constantly proceeding, it is reasonable to expect a continuous increase in the revenues. The total operating and maintenance expense during the year 1907 was \$8,640.98.

The territory covered by the "house to house" distributing system covers a territory of

Bureau Mechanical Electrical Service

LIGHTING DIVISION

Official Lighting Schedule for Gas and Electric Lamps Operated by Hand, Clocks and Relays

Nights of	All Lamps to be Lighted by	All Lamps to be extinguished by	Total Burning Hours
Jan. 1 to 14	5.15	6.45	414.15
" 15 " 31	5.30	6.45	
Feb. 1 to 14	5.45	6.45	357.00
" 15 " 28	6.00	6.30	
Mar. 1 to 14	6.15	6.00	351.30
" 15 " 31	6.45	5.45	
Apr. 1 to 14	7.00	5.15	291.30
" 15 " 30	7.30	4.45	
May 1 to 14	7.30	4.30	270.30
" 15 " 31	7.45	4.15	
June 1 to 14	7.45	4.00	243.30
" 15 " 30	8.00	4.00	
July 1 to 14	8.00	4.15	264.15
" 15 " 31	7.45	4.30	
Aug. 1 to 14	7.30	4.30	287.30
" 15 " 31	7.15	4.45	
Sept. 1 to 14	6.45	5.15	323.00
" 15 " 30	6.30	5.30	
Oct. 1 to 14	6.00	5.30	369.15
" 15 " 31	5.30	5.45	
Nov. 1 to 14	5.30	6.15	390.30
" 15 " 30	5.15	6.30	
Dec. 1 to 14	5.00	6.45	426.15
" 15 " 31	5.00	6.45	
			3989.00 Total Hours

By order of

Walter C. Tome
Illuminating Engineer

MDB-1272

W. Rayner Straus,
Mechanical Electrical Engineer.

And it is hereby covenanted and agreed by and between the Lessor, and its successors in office, for and on behalf of the Mayor and City Council of Baltimore, and the Lessee, its successors and assigns, as follows:

1. That the Lessee may from time to time hereafter make such other applications to the Lessor for duct space in said Municipal Conduit Works as the Lessee may deem expedient, and that such applications, when signed by the Lessee and granted by the Lessor and attached hereto, shall, upon the payment in advance by the Lessee unto the Lessor of the proper pro rata rental for the additional duct space so applied for, for the unexpired period of the current term of six months, and the execution and delivery of the bond hereinafter provided for, become parts hereof.

2. That the use of all duct space hereby leases or agreed to be, shall conform to the Rules and Regulations of the Lessor attached hereto and hereby made parts hereof, and to such reasonable additions thereto, amendments thereof or alterations therein as the Lessor may from time to time in its discretion adopt.

3. That the Lessee will promptly pay unto the Lessor semi-annually, accounting from the date of these presents, for the use of the duct space hereby leased or agreed to be, rentals as fixed by the following schedule:

Up to and including 5,000 duct feet 7¢ per duct foot per annum.

For 5,001 to 25,000 duct feet inclusive 6½¢ per duct foot per annum.

For 25,001 to 50,000 duct feet inclusive 6¢ per duct foot per annum.

For 50,001 to 100,000 duct feet inclusive 5½¢ per duct foot per annum.

For 100,001 duct feet and over 5¢ per duct foot per annum.

It is understood and agreed that the semi-annual rentals above mentioned are to be calculated according to the total number of duct feet in use by the Lessee at the time that said rentals become due and payable.

It is also understood and agreed, however, that the Lessee shall not, by accepting this lease, be debarred from the privilege of testing judicially the reasonableness of said schedule rates of rentals and of recovering back from the Mayor and City Council of Baltimore any excess of rentals paid by it to the Mayor and City Council of Baltimore over and above such rentals as may be so judicially determined to be reasonable; provided, however, that the proper legal proceedings to test the reasonableness of said schedule rates of rentals shall be instituted by the Lessee within the space of one year from the date of these presents, (which time is hereby declared to be of the essence of this lease); and provided further (1) that the Lessee shall, at the time of the execution of these presents, pay all rentals then in arrears at the schedule rates hereinbefore prescribed, and shall, pending said legal proceedings, continue to pay all such rentals at said schedule rates as they shall become due and payable under the terms hereof; and (2) that the assent of the Lessor to this clause of reservation shall not be taken as in any manner involving an admission by the Lessor that said schedule rates of rentals are in any respect unreasonable.

4. That if the use of the duct space hereby leased, or agreed to be, or of any part or parts thereof, shall be voluntarily abandoned by the Lessee, the rentals therefor shall be paid by the Lessee unto the Lessor for the full period of the six months, within which such abandonment takes place, and the

rent shall continue to be paid by the Lessee after the termination of the said period of six months until the duct space so abandoned is put by the Lessee in proper condition for use again if the said duct space when so abandoned is out of proper condition for use by reason of the fault of the Lessee.

5. That if the use of the duct space hereby leased, or agreed to be, or of any part or parts thereof, shall be terminated by the Lessor, as hereinafter provided, or shall be terminated by the Mayor and City Council of Baltimore, or the General Assembly of Maryland, in the exercise of their respective police or other governmental or legislative powers, as hereinafter provided, then the Lessee shall forthwith, upon being notified thereof, remove such cable or cables, wire or wires, as are affected by such termination, and that if the Lessee should refuse, fail or neglect to effect such removal within a reasonable time after receiving such notification, the Lessor shall be duly empowered to effect such removal with such force as may be necessary for the purpose, and the bond hereinafter provided for shall be liable for such removal or removals and arrearages of rent.

6. That notice shall be sent the Lessee by the Lessor at least ten days in advance of the time rentals are due for duct space leased, and the Lessor shall be empowered to collect said rentals within ten days from the time the same are due, and that in the event of the failure of the Lessee to pay said rentals within the ten days specified, the Lessor shall remove all the cables or wires in said Municipal Conduit Works belonging to the Lessee, without notice, at the Lessee's expense, and require the payment of rentals in arrear by the Lessee before its cables or wires may be replaced; provided it is deemed expedient by the Lessor to re-issue a permit to the Lessee, and the bond

hereinafter provided for shall be liable for the expense of such removal and arrearages of rent.

7. That the Lessee shall place in the duct space, hereby leased, or agreed to be, its cables and wires within six months from the respective times applications for such duct space are granted, and that in the event of failure by the Lessee to place its cables and wires in the ducts within the time as above, the Lessor may in its discretion lease such duct space to any other person or corporation making application therefor, and entitled by law to become a tenant thereof.

8. That the Lessee, before making use of any duct space hereby leased, or agreed to be, shall execute a bond with good and satisfactory surety in amount equal to \$100 per mile of duct rented.

9. That this lease may be terminated as to the whole of the duct space hereby leased, or agreed to be, or any part, or parts thereof, by the Lessee, by giving six months notice in writing to the Lessor; and this lease is made by the Lessor, and accepted by the Lessee, upon the condition that the Lessee in the construction, maintenance and operation of its cables, wires, works and appliances, in the Municipal Conduit Works hereinbefore in this lease mentioned, and in the use by said Lessee of the duct space covered by this Lease and of said conduits, will use and employ all the care, skill, means and appliances required of it by law under all the circumstances, and do all things required of it by law, to avoid the causing by it of injury or detriment to the ducts in the said conduits, or to the said conduit works, or to the cables, wires or works of other lessees having cables or wires in said conduits, and to prevent the use by said Lessee of said duct space and said

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conduits being dangerous or unsafe to other property, or to persons; and this lease is made by said Lessor and accepted by said Lessee, upon the further condition that neither the making of said Lease, nor any of its provisions, shall in any way operate to deprive the Lessor or the Mayor and City Council of Baltimore, of any right, or rights, which under the laws of the State of Maryland or the ordinances of the Mayor and City Council of Baltimore or their respective police, governmental or legislative powers, may be lawfully exercised in connection with said lease, or to terminate the same upon reasonable notice given in writing by the Lessor to the Lessee, as to any portion, or all, of the duct space covered by said lease, or as to any portion or all of the cables, wires, works or appliances of the Lessee therein, upon, or because of, the happening of any event or contingency, or the existence of any conditions relative to or in connection with the said duct space in said conduits, or said cables, wires, works or appliances, whether brought about either by the failure of the said Lessee to use all the care, skill, means and appliances hereinbefore in this section mentioned and for the purposes therein mentioned, or howsoever the said events, contingencies or conditions may arise or be brought about; all of which rights are hereby expressly reserved, it being expressly understood too, that nothing in this lease shall be taken as an admission by the Lessor that the Lessee is not bound absolutely and at all events to so use its electric current and the duct space covered by this lease and every part thereof, as not to produce any injury or detriment to the ducts in said conduits or to said conduit works, or to the cables, wires or works of other lessees having cables or wires in said conduits, and as to prevent the use by said Lessee of said duct

space and said conduits being dangerous or unsafe to other property or to persons.

And it is understood and agreed that nothing herein contained shall be taken as conferring any irrevocable contract or other irrevocable rights upon the Lessee, or as in any manner abridging or impairing the respective police or other governmental or legislative powers of the Mayor and City Council of Baltimore or the General Assembly of Maryland, or as depriving the Lessor or the Mayor and City Council of Baltimore of any right or remedy in the premises conferred upon them, or either of them, by law or ordinance in addition to such as are herein expressed.

10. That if at any time or times hereafter, the Lessor shall, without the assent of the Lessee, require the Lessee to shift its cables and wires, or any part or parts thereof, from one set of ducts to another in said municipal conduit works, one half of the expense thereof shall be borne and be paid by the Mayor and City Council of Baltimore.

AS WITNESS the signature of the Lessor by its Chairman, for and in behalf of the Mayor and City Council of Baltimore, and the signature of the Lessee by its President, and its corporate seal duly attested by its Secretary all hereunto affixed the day and year first above written.

THE ELECTRICAL COMMISSION
FOR THE CITY OF BALTIMORE,

BY.....
Chairman.

THE COMPANY,

BY.....
President.

Draft of lease
bet. Cons. Gas, E.
L. & Power Co.,
Balto. & Ohio R.R. Co.,
United Railway Co.

Amirif. Hamilton

No. 20.

RESOLUTION REQUESTING THE MUNICIPAL LIGHTING COMMISSION TO MAKE THEIR FINAL REPORT TO THE MAYOR AND CITY COUNCIL OF BALTIMORE AS TO THE ADVISABILITY OF ESTABLISHING A MUNICIPAL LIGHTING PLANT AND APPROPRIATING FIVE HUNDRED DOLLARS (\$500.00) FOR THE EXPENSES OF SAID COMMISSION.

WHEREAS, under authority of Resolution No. 11, approved January 4, 1900, by Thomas G. Hayes, Mayor, a municipal Lighting commission was appointed to investigate the feasibility, practicability and expediency of establishing a municipal lighting plant for the City of Baltimore

AND WHEREAS, by their preliminary report made to the Mayor and City Council they recommended the procuring of an enabling act from the State Legislature authorizing the City to submit the question of borrowing the money for said purpose to the legal voters of the City of Baltimore

AND WHEREAS, pursuant to such recommendation said enabling act was so procured, being Chapter 152 of the Acts of 1900, approved ^{April} ~~April~~ 5th, 1900.

AND WHEREAS, their said preliminary report, while giving important data and information as to rates, it expressly reserved for further consideration and report the main question as to the advisability of establishing a municipal plant.

THEREFORE, be it resolved by the Mayor and City Council of Baltimore, That said commission be and they are hereby requested to complete their investigations and make their final report as to the advisability of establishing said plant.

And be it further resolved that the sum of five hundred dollars (\$500.00) be and the same is hereby appropriated to pay the expenses of said commission, said sum to be provided for in the levy of 1906.

Approved February 23rd, 1905.

E. Clay Timenus,
Mayor.

A TRUE COPY,

.....FEB. 25 1905.....190
Henry H. Harker
.....Register.

Resolution requesting the
Munic. Lighting Comm.,
to make their final
report to the "Mayor
and City Council."

ELECTRICAL COMMISSION.

=====

The Acts of Assembly authorizing the construction of conduits and the issue of City stock with which to pay for them are the Acts of 1892, Chapter 138, 1892 Chapter 200, 1896 Chapter 350, and 1902 Chapter 246, By these Acts, the control of the underground wires is left to the Mayor and City Council.

The ordinances applicable to the question are as follows:

Ordinance No. 100, approved October 7, 1892, authorizing the issue of stock for the construction of conduits. The stock issue here contemplated was authorized by the Act of 1892, Chapter 138.

Ordinance No. 106, approved May 1, 1893, authorizing the Superintendent of the Police and Fire Alarm Telegraph and the Board of Fire Commissioners, to construct conduits for the Police and Fire Alarm System. This ordinance was repealed by Ordinance No. 214, approved October 14, 1893.

Ordinance No. 49, approved April 16, 1894, appointed the Mayor, the City Register and the President of the Board of Fire Commissioners a Board to construct the underground system for the Police and Fire Alarm wires.

Ordinance No. 34, approved April 16, 1895, directed the Electrical Commission to continue the work of placing the wires of the Police and Fire Alarm System underground.

Ordinance No. 107, approved June 12, 1895, created the Mayor, City Register and President of the Board of Fire Commissioners as Electrical Commission, to determine upon a plan for a system of conduits for telegraph, telephone, electric light and other (except trolley) wires. This Commission was not authorized to construct such a system, but only to determine upon a plan. The System referred to, moreover, is the General Conduit System, which is distinct from the Police and Fire Alarm System.

Ordinance No. 96, approved May 16, 1896, authorized the Electrical Commission to continue the work of placing the Police and Fire Alarm System underground.

Ordinance No. 110, approved July 1, 1896, granted permission to the Home Telephone and Telegraph Company to use such of the conduits of the Police and Fire Alarm System as were not needed by the City, at a certain annual rental. This ordinance also authorized the Mayor to rent such portions of said conduits as were not needed by the City. This ordinance, however, does not effect the control of the Police and Fire Alarm System itself.

Ordinance No. 120, approved July 25, 1896, authorized the issue of stock for conduits; the stock contemplated being the loan authorized by the Act of 1896, Chapter 350.

Ordinance No. 106, approved August 25, 1898, required all overhead wires to be placed underground when ordered by the Electrical Commission.

Ordinance No. 107, approved August 25, 1898, appointed the Mayor, the City Register and the President of the Board of Fire Commissioners a Commission to construct a system of conduits "for the reception of the wires now strung over said streets", except trolley wires. This Commission was authorized to determine the amount of rentals, subject to the approval of the Mayor and City Council, and to rent conduit space. This is the authority under which the present General Conduit System is constructed.

Ordinance No. 108, approved August 25, 1898, requires the owners of the various overhead wires to furnish certain information to the Electrical Commission.

Ordinance No. 81, approved December 10, 1900, refers to the rental of duct space in the General Conduit System.

Ordinance No. 101, approved January 15, 1901, prohibited interference with the Police and Fire Alarm Conduit System.

Ordinance No. 87, approved October 15, 1902, provided for the issue of stock for the extension of the General Conduit System, as authorized by the Act of 1902, Chapter 246.

From the above ordinances, it appears that originally the Mayor, City Register and President of the Board of Fire Commissioners were appointed a Commission to construct the conduits for the Police and Fire Alarm System, and that subsequently this work was taken out of their hands and placed in the hands of the Electrical Commission. The authority of the Electrical

Commission, however, was simply to "continue the work of placing the wires of the Police and Fire Alarm Telegraph and Police Patrol System underground", and the Commission was only given such authority (for example, the making of contracts, purchases, &c.) as was necessary to this end.

The conduit system contemplated by Ordinance No. 107, approved June 12, 1895, and authorized by Ordinance No. 107, approved August 25th, 1898, is a General System for overhead wires, but is distinct from the Police and Fire Alarm System, which latter system, as already seen, is provided for by separate ordinance. Therefore, the control vested in the Electrical Commission of the General Conduit System does not include the control of the Police and Fire Alarm System. As to this system, the only authority of the Electrical Commission is to construct it. I have found no ordinance which deals with the control of the Police and Fire Alarm Conduit System after its construction.

Code 1893, Article 20, Section 36, however, provides that the Board of Fire Commissioners shall have the appointment of and entire control over all the employes and property of the Police and Fire Alarm Telegraph. See, also, succeeding sections; also Ordinance No. 15, approved February 23, 1892, and Ordinance No. 29, approved December 29, 1899, providing for the appointment by the Fire Board of a Superintendent of Police and Fire Alarm.

ACT OF ASSEMBLY

CHAPTER 200.

AN ACT to authorize the Mayor and City Council of Baltimore to provide conduits, and to require all telegraph, telephone, electric light or other wires to be removed from the streets, lanes and alleys of said City, and placed in said conduits, and prescribe rentals for the use thereof, and to authorize the appointment of an Electrical Commission of said City.

S e c. 1: Be it enacted by the General Assembly of Maryland, provided however, that nothing contained in this Act shall be deemed or taken to modify or change in any manner the provisions of Ordinance number (41) forty-one, of the Mayor and City Council of Baltimore, approved May 9th, 1889, or the rights and privileges granted thereby to the Companies therein named, or either of them. That the Mayor and City Council of Baltimore be, and they are hereby authorized to provide a series of conduits under the streets, lanes and alleys of said City, or any part or parts thereof, for the use of telephone, telegraph, electric light and other wires, either by constructing said conduits themselves, or by authorizing their construction by any person or corporation, upon such terms as may be agreed upon, and to provide for the appointment of an Electrical Commission with such powers and duties as the said Mayor and City Council may deem necessary or appropriate for carrying out the purposes of this Act; and to require all such wires, or any part or parts thereof, and the poles carrying the same, to be removed from the service of the streets, lanes and alleys of said City, or any part or parts thereof, and to require such wires to be placed in such conduits, all under such penalty as they may prescribe; and to prescribe and establish reasonable rentals to be paid by any Company or person using any of said conduits, by whomsoever the same may be constructed, for the use thereof, and to provide for the collection of such rentals in addition to the ordinary processes by such summary methods as they may deem appropriate.

S e c. 2: And be it further enacted, That this Act shall take effect from the date of its passage.

Approved March 30, 1892.

FRANK BROWN, Governor.

ELECTRICAL COMMISSION.

RULES AND REGULATIONS.

IN GENERAL.

1. Before entering upon the occupancy of duct space, the applicant must enter into a contract and execute a penal bond in the sum of one hundred dollars (\$100) per mile of duct applied for in accordance with Ordinance No. 107, approved August 25, 1898.

Applications for duct space must be made on blanks furnished by the Electrical Commission.

No limit will be placed upon the voltage of conductors to be used in this duct space.

All work upon the conduits, either repairs or additions, will be done by the Electrical Commission.

All appliances proposed to be used by the lessee for installing, handling and connecting cables, must be approved by the Electrical Commission before being used.

Any person or persons tampering with or opening, or in any way interfering with manholes or conduits, or any of the cables in the conduits, without first securing a permit from the Electrical Commission, as herein provided, will be prosecuted in accordance with Ordinance No. 101, approved January 15, 1901.

PERMITS.

2. Lessees desiring access to manholes will be issued a permit upon written application to the Electrical Commission, and entrance otherwise than by such permit is prohibited. Applications for permits must be made on blanks furnished by the Electrical Commission.

The said permit shall state the names of employees of the lessee who shall be permitted in any manhole at the same time and the particular work for which the permit is granted. The access to all manholes shall be in the presence of an inspector of the Electrical Commission. Any or all permits are revocable at the option of the Electrical Commission.

Except in emergency cases, applications for entrance into manholes must be made before 3 o'clock P. M., of the day before the permit is to be used.

REPAIRS.

3. Repairs to the cables in the city conduits are to be made by the lessee when ordered to do so by the Electrical Commission upon the condition of any cable having been found such as to be unsatisfactory for the purpose for which it is intended. In each instance a time limit will be set within which time limit the repairs must be satisfactorily made, otherwise the use of the cable will be ordered discontinued.

CABLES.

4. The lessee shall secure to each of its cables in every manhole a suitable tag or name plate giving, in clear and permanent marking, the name of the owner with a description of the cable relative to its operating voltage and load, character of current, and number and size of conductors.

A dead end of any lead covered cable shall never be left with the bare end of its conductor exposed in a manhole. All such ends must be hermetically sealed with solder or a proper terminal.

The location of cables on racks in the manholes shall conform to the system as established by the Electrical Commission, and no deviation will be allowed except by special permission.

All cables, for whatever service intended, shall be equipped, at the points where they enter and leave the conduits, with proper protective devices.

TESTS.

5. The Electrical Commission, through its proper and accredited representative, shall at all times have the right of entrance into the power station or any other point of distribution belonging to the lessee for the sole purpose of testing.

PRECAUTIONS.

6. Before allowing any of its employees to enter a manhole, the lessee shall first make sure that there is no danger due to the presence of gas in the manhole. In the event of gas being present the lessee must protect its employees by keeping up a good circulation of air in the manhole by means of an adequate number of hand blowers during the entire time the work is in progress. Should there be danger of driving gas into other manholes in which work is not being done such manholes shall be opened and protected as below provided if considered necessary by the Electrical Commission.

All manholes opened by the lessee shall be protected by a guard at least 36 inches high surrounding the opening.

The lessee must provide a watchman on the surface at each manhole opening to protect the traffic of the street. He shall be provided with a red signal flag, and shall take all proper precautions to warn pedestrians and teams.

No lights requiring flames will be allowed in manholes. Solder used for wiping joints of the lead covers of cables and paraffine shall never be lowered into manholes when overheated.

Smoking, or the use of intoxicating liquors by employees of the lessee, while in or about manhole openings, is prohibited.

While the employees of any lessee are at work in a manhole they shall be careful not to touch or disturb any cables except those belonging to the lessee, to whom the permit is issued. Should it become necessary, for any reason, to touch or disturb any other cables the lessee shall first notify the Electrical Commission, and no such cables shall be touched or disturbed until the necessary authority in writing shall have been obtained from the company owning same by the said Commission.

PENALTY.

7. Any employee who shall show a disposition to disregard these rules shall be, in the discretion of the Electrical Commission, prohibited access into any manhole or upon any part of the city conduits.

AMENDMENTS.

8. These Rules and Regulations may be amended by the Electrical Commission from time to time, as it may deem necessary, for the efficient use of the conduits and the protection of the cables therein.

By the term "Electrical Commission" is meant a duly accredited representative, acting by authority of said Commission.

Adopted by the Electrical Commission October 4, 1900.

Revised January 7, 1914.

LEASE.

This Lease, made this.....day of.....A. D., 191 ,
WITNESSETH: 1. The Electrical Commission, for and in behalf of the Mayor and City Council of
Baltimore, in consideration of the rentals to be paid as hereinafter prescribed, hereby lets and leases to
....., a corporation existing
under the laws of the State of....., certain duct space in the Municipal
Conduit System constructed and owned by the City of Baltimore, for six months from the date hereof,
all as shown and described in greater detail on the attached applications made from time to time, and
duly signed by the said.....and granted by
the said Electrical Commission as attested by the signature of its Chairman, which applications are
made a part hereof to the same effect as though re-written into the body of this lease.

2. This Lease shall remain in full force and effect for each consecutive period of six months from
the date hereof, during the use of the duct space as provided for herein by the said.....
.....and until terminated as hereinafter provided.

3. Application may be made from time to time for additional duct space in the Municipal Conduit
System, and when duly signed by the lessee and granted by the Electrical Commission, said application
will become a part of this lease as provided in (1), upon the prepayment of the pro rata rental up to
the next succeeding period of six months from the date hereof, and the execution and delivery of the
bond as hereinafter provided.

4. The lessee agrees that the use of the duct space provided for in this lease shall conform to the Rules and Regulations of the Electrical Commission, which are attached hereto, and made a part of this Lease, with such additions or amendments as it may deem necessary or expedient to make from time to time, and that the conditions set forth therein are necessary and proper in order to protect the cables of individuals and corporations in these conduits.

5. This lease may be terminated, in part or whole, by the lessee upon six months' notice, or at any time by the Electrical Commission, if in its judgment, after investigation, the further use of the ducts hereby leased or any of them, is such as to be detrimental to the cables of other lessees in these conduits, or unsafe to other persons or other property.

When any part, or the whole, of such duct space is abandoned by the lessee, the rental shall be paid therefor for the full period of six months within which such abandonment takes place, said abandonment to reckon from the time the duct or ducts are put into proper condition for use.

Should the whole or any part of this lease be terminated by the Electrical Commission, for any good and sufficient cause, the lessee shall forthwith remove such cable or cables as have caused the termination within a reasonable time thereafter. Should the lessee fail to effect such removal promptly after receiving notice to do so, the Electrical Commission shall remove them, and the bond hereinafter provided shall be liable for the expense of such removal.

6. The lessee agrees to pay to the Mayor and City Council, through the Electrical Commission, for the use of such duct space, covered by this lease, semi-annual rentals according to the following schedule

Up to an including 5,000 duct feet,	7c. per duct foot per annum,				
For 5,001 to 25,000 duct feet inclusive,	6½c.	“	“	“	“
“ 25,001 to 50,000 “ “ “	6c.	“	“	“	“
“ 50,001 to 100,000 “ “ “	5½c.	“	“	“	“
“ 100,001 duct feet and over,	5c.	“	“	“	“

or according to any other schedule or schedules of rentals that may be hereafter prescribed by the Mayor and City Council of Baltimore.

The semi-annual rentals as above are to apply to the total number of duct feet in use by the lessee at the time rentals are due and payable.

7. Rentals as prescribed in (6) shall be paid semi-annually, and notice shall be sent the lessee by the Electrical Commission at least ten days in advance of the time rentals are due for duct space leased, and said rentals shall be paid within ten days of the periods covered by this lease, commencing with the date hereof.

In the event of failure by the lessee to pay the rentals within the ten days specified, the Electrical Commission shall remove all the cables and wires in the conduits belonging to said lessee, without notice, at the lessee's expense, and require the payment of rentals in arrears by said lessee before its cables and wires may be replaced; provided it is deemed expedient by the Electrical Commission to re-issue a permit to said lessee, and the bond as provided in (9) shall be liable for the expense of such removal and arrearages of rent.

8. The lessee shall place in the duct space covered by this lease its cables within six months from the time application for such duct space is granted. In the event of failure by said lessee to place its cables in the ducts within the time as above, the Electrical Commission may, in its discretion, lease such duct space to any other person or corporation making application.

9. The lessee, before making use of any duct space herein provided for, shall execute a bond, with approved surety, in a sum equal to \$100 per mile of duct applied for and granted, and each succeeding application must be accompanied by a like bond at the same rate as above, before a permit to use such duct space will be granted.

10. And it is understood and agreed, that nothing herein contained shall be taken as conferring any irrevocable contract or other rights upon the lessee, or as in any manner abridging or impairing the respective police or other governmental or legislative powers of the Mayor and City Council of Baltimore, or the General Assembly of Maryland, or as depriving the lessor or the Mayor and City Council of Baltimore of any right or remedy in the premises conferred upon them, or either of them, by law or ordinance in addition to such as are herein expressed.

Witness the hands and seal of the duly authorized officers of the said.....
.....lessee under this lease, the day and year first
above written.

Attest:

.....

Approved by the Electrical Commission, for and in behalf of the Mayor and City Council of
Baltimore.

.....
Chairman.

Approved as to form and legal sufficiency:

.....
City Solicitor.

ELECTRICAL COMMISSION.

RULES AND REGULATIONS.

IN GENERAL.

1. Before entering upon the occupancy of duct space, the applicant must enter into a contract and execute a penal bond in the sum of one hundred dollars (\$100) per mile of duct applied for in accordance with Ordinance No. 107, approved August 25, 1898.

Applications for duct space must be made on blanks furnished by the Electrical Commission.

No limit will be placed upon the voltage of conductors to be used in this duct space.

All work upon the conduits, either repairs or additions, will be done by the Electrical Commission.

All appliances proposed to be used by the lessee for installing, handling and connecting cables, must be approved by the Electrical Commission before being used.

Any person or persons tampering with or opening, or in any way interfering with manholes or conduits, or any of the cables in the conduits, without first securing a permit from the Electrical Commission, as herein provided, will be prosecuted in accordance with Ordinance No. 101, approved January 15, 1901.

PERMITS.

2. Lessees desiring access to manholes will be issued a permit upon written application to the Electrical Commission, and entrance otherwise than by such permit is prohibited. Applications for permits must be made on blanks furnished by the Electrical Commission.

The said permit shall state the names of employees of the lessee who shall be permitted in any manhole at the same time and the particular work for which the permit is granted. The access to all manholes shall be in the presence of an inspector of the Electrical Commission. Any or all permits are revocable at the option of the Electrical Commission.

Except in emergency cases, applications for entrance into manholes must be made before 3 o'clock P. M., of the day before the permit is to be used.

REPAIRS.

3. Repairs to the cables in the city conduits are to be made by the lessee when ordered to do so by the Electrical Commission upon the condition of any cable having been found such as to be unsatisfactory for the purpose for which it is intended. In each instance a time limit will be set within which time limit the repairs must be satisfactorily made, otherwise the use of the cable will be ordered discontinued.

CABLES.

4. The lessee shall secure to each of its cables in every manhole a suitable tag or name plate giving, in clear and permanent marking, the name of the owner with a description of the cable relative to its operating voltage and load, character of current, and number and size of conductors.

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All manholes opened by the lessee shall be protected by a guard at least 36 inches high surrounding the opening.

The lessee must provide a watchman on the surface at each manhole opening to protect the traffic of the street. He shall be provided with a red signal flag, and shall take all proper precautions to warn pedestrians and teams.

No lights requiring flames will be allowed in manholes. Solder used for wiping joints of the lead covers of cables and paraffine shall never be lowered into manholes when overheated.

Smoking, or the use of intoxicating liquors by employees of the lessee, while in or about manhole openings, is prohibited.

While the employees of any lessee are at work in a manhole they shall be careful not to touch or disturb any cables except those belonging to the lessee, to whom the permit is issued. Should it become necessary, for any reason, to touch or disturb any other cables the lessee shall first notify the Electrical Commission, and no such cables shall be touched or disturbed until the necessary authority in writing shall have been obtained from the company owning same by the said Commission.

PENALTY.

7. Any employee who shall show a disposition to disregard these rules shall be, in the discretion of the Electrical Commission, prohibited access into any manhole or upon any part of the city conduits.

AMENDMENTS.

8. These Rules and Regulations may be amended by the Electrical Commission from time to time, as it may deem necessary, for the efficient use of the conduits and the protection of the cables therein.

By the term "Electrical Commission" is meant a duly accredited representative, acting by authority of said Commission.

Adopted by the Electrical Commission October 4, 1900.

Revised January 7, 1914.

**BUREAU OF MECHANICAL-
ELECTRICAL SERVICE**

W. RAYNER STRAUS

MECHANICAL-ELECTRICAL ENGINEER

71

The reports of the various divisions that follow show in detail the operations of the Bureau of Mechanical-Electrical Service for the year ending December 31, 1938.

The functions of the Department embrace the design, construction and maintenance of all conduit lines in the City, together with the operation of the Incinerator Plants, Repair Shop and Street Lighting.

Expenditures for the year are shown in detail in the body of this report.

Construction Division activities during the year were limited in building new conduit lines because of limited appropriations for this class of work. In connection with the Public Works Administration projects on Howard Street from Read Street to Mt. Royal Avenue Underpass and the Broening Highway extension to Colgate Creek Bridge, some conduits were installed.

An increase was made in the number of new lights and street signs, as shown in detail later.

The activities of the Incinerator and Mechanical divisions were normal for the year.

CONDUIT CONSTRUCTION DIVISION

SAMUEL LIEUTAUD

Supervisor of Conduits

The Construction Division, during the year, installed some new conduit lines, changed existing lines to conform to new street grades and other improvements and built transformer and standard manholes. It also enlarged some existing manholes, made traffic signal, house, arc light, beacon light, police, fire alarm and trolley pole connections, etc.

Transformer manholes were built at the following locations:

Howard and Saratoga Streets
 Guilford Avenue and Pleasant Street
 Centre Street and Washington Place
 Gay and Aisquith Streets
 Entaw and Baltimore Streets

Standard manholes were built at the following locations:

Mt. Royal Avenue and Lanvale Street
 Anchentoroly Terrace and Woodbrook Avenue
 110 S. Gay Street
 Alley S. of Monument Street W. of Patterson Park Avenue
 Lanvale and Rutter Streets
 Wolfe Street S. of Fayette Street

White-Way Lights were placed on:

White Avenue from Harford to Belair Road

Hilton Street Bridge—

29th Street from Hampden Avenue to Oak Street
 Fayette Street from Lakewood Avenue to Broadway
 Patapsco Avenue from Hanover Street to Pennington Ave.
 Gorsuch Avenue from Greenmonnt Avenue to Harford Ave.
 Oak Street and North Avenue
 Harford Avenue and Hargest Lane
 Harford Road bet. North Avenue and Curtain Avenue
 Chase Street bet. Morton Street and Maryland Avenue
 Broening Highway at Colgate Creek Bridge
 Park Heights Avenue from Oakley Avenue to Hayward Ave.

Arc Light connections were made in:

Territory bounded by Caroline Street, Patterson Park Avenue, Eastern Avenue to Water Front.

Fire Alarm connections were made in:

Alley S. of Edmondson Avenue and Allendale Street
North Avenue and St. Paul Street
Gittings and Henry Streets
Lancaster and President Streets "Pier No. 7"
Baltimore and Charles Street
Baltimore and Liberty Streets
Hilton Street S. of North Avenue
Reisterstown Road W. of Garrison Boulevard
Reisterstown Road and Auchentoroly Terrace
McCulloh and Gold Streets
Eierman and Cottman Avenues
Clifford Street W. of Callander Alley
Eastern Avenue and Anglesea Street

In connection with the paving program of the State Roads and the Bureau of Highway projects, under the Public Works Administration, on streets within the City, it was necessary, due to changing of street grades, to make changes in conduit lines, manholes, light and other connections in advance of paving, and also to install new underground work for future expansion of the system.

The most important projects were:

Howard Street from Read Street to Mt. Royal Avenue
Colgate Creek Bridge—Extension of Broening Highway



HOWARD STREET EXTENSION PROJECT. MAKING LATERAL CONNECTIONS (P.W.A.)



KIRK AVENUE AND 29TH STREET. BUILDING TRUNK LINE



PATTERSON PARK AVENUE AND MONUMENT STREET
BUILDING BRICK MANHOLE



PATTERSON PARK AVENUE AND MONUMENT STREET
POURING ROOF OF MANHOLE

UNDERGROUND INSPECTION DIVISION

V. S. HENNESSEY, *Superintendent*

The Underground Inspection Division is responsible for the safe operation and proper maintenance and the enforcement of all rules and regulations governing the use of the Municipal Conduit System, as well as the rental for all ducts occupied with cables, and credits for the space that is abandoned by the cable lessees.

This Division issued 3,475 permits to the cable companies desiring to install and remove cables, and do other miscellaneous work around the conduit system, and all work was done in accordance with the rules and regulations and to the satisfaction of the inspector assigned.

Underground cables were installed and vacated in the Municipal Conduit System in all sections of the City and after checking and posting all locations as shown on cable inspectors' reports, these reports contained many thousands of items. Charges and credits were issued monthly to the lessees affected.

Duct Space Occupied During 1938:

Main Conduits	132,364.62
Distributing Conduits	106,808.99
Total.....	239,173.61

Duct Space Vacated During 1938:

Main Conduits	49,068.97
Distributing Conduits	48,106.97
Total.....	97,175.94

Transformer Manholes Occupied..... 8

Permission was granted in 14 cases to lease wires from the Chesapeake and Potomac Telephone Company for other than telephone purposes at points where the companies had no wire facilities of their own, and in each case this privilege was granted subject to a duct rental or permission charge.

Poles and overhead wires were ordered removed during the year on

Hamilton Street between Charles Street and St. Paul Street
Gorsuch Avenue from Greenmount Avenue to Harford Ave.
Kirk Avenue from Gorsuch Avenue to Abbotston Street
Abbottston Street from Kirk Avenue to Harford Road

Considerable progress was also made by the Cable Companies in the district bounded on the north by Eastern Avenue
on the south by Water Front
on the east by Patterson Park Avenue
on the west by Caroline Street
and we expect that this work will be completed and all poles and overhead wires removed by June, 1939.

We continue the policy of assigning an inspector to cover all streets where conduit lines were located during paving operation, and as the result there was no serious damage done either to conduit lines or cables, while paving work was in progress.

The Maintenance Crews cleaned and pumped approximately 16000 manholes and also inspected all distributing holes containing house connections and properly sealed all fibres in order to prevent any gas or water from entering cellars of buildings. They also replaced 69 manhole and hand box covers, and reported to the office 79 water leaks, 9 gas leaks, 1 steam leak and 1 sewer leak, and also investigated 36 companies after regular working hours.

The Cable Inspectors were also called 175 times after regular working hours due to cable trouble in the conduit system and due to the detailed reports submitted in each case of trouble. The Bureau was thus in a position to recover damages done to conduit lines and cables as the result of mechanical injury caused by outside parties.

This Division has made every effort to prevent the driving of pipes in footways where conduit lines are located, in order to prevent damage to conduits and cables and possible injury to those engaged in such operations. In spite of all information that was available, we had four cases where lines were damaged by the driving of water supplies.

There were 298 orders issued to the Construction Division to repair conduit lines, pole connections, adjust castings and hand boxes and replace defective cement blocks over the conduit lines.

The Consolidated Gas Electric Light and Power Company continued, in the downtown section of the City, to change from D. C. to A. C. current and as the result it was necessary for them to occupy six transformer manholes and to use considerable duct space for additional cables. Outside of a number of D. C. house services there has been no decrease in the number of D. C. feeders in the conduit system.

The Baltimore Transit Company's increase in duct space was due to removal notices served on them by the Bureau to take down overhead wires.

The most serious cable failure in the Municipal Conduit System during the year occurred on Park Avenue between Fayette and

Lexington Streets on the D. C. feeders of the Gas and Electric Company. It was necessary to open up the duct line for a distance of about 40 feet in order to remove copper, lead and terra cotta duct that had fused together, due to the excessive heat caused by the blowout of cables.

There was no evidence available after the line was uncovered to determine the cause of this cable failure.

The Koester Bakery Company obtained an ordinance to use a portion of the conduit system in order to supply current to their building during the year.

Duct footage of conduits occupied and vacated by the following lessees during the year 1938:

Lessee	Occupied	Vacated	Increase or Decrease
Main Conduits—			
Baltimore & Ohio Railroad.....	508.00	275.00	233.00
Baltimore Transit Co.	34,397.00	11,615.00	22,781.30
Cons. Gas Elec. Lt. & Power Co.....	84,816.22	29,243.52	55,572.70
Postal Telegraph-Cable Co.....	44.10	2,810.80	2,766.70
Western Union Telegraph Co.....	770.00	1,468.30	698.30
Board of Fire Commissioners.....	7,384.90	2,681.15	4,703.75
Police Department of Baltimore.....	3,432.70	974.50	2,458.20
Bureau of Water Supply.....	1,011.70	.....	1,011.70
Sub-Total.....	132,364.62	49,068.97	83,295.65
Distributing Conduits—			
Baltimore Transit Co.....	121.28	123.27	1.99
Cons. Gas Elec. Lt. & Power Co.....	1,537.45	36,764.65	54,772.80
Koester's Bakery	56.60	.....	56.60
Pennsylvania Railroad Co.	371.49	37.17	334.32
Postal-Telegraph Cable Co.	6,584.49	7,402.84	818.35
Western Union Telegraph Co.....	1,662.59	2,265.94	603.35
Board of Fire Commissioners.....	2,318.32	560.40	1,757.92
Police Department of Baltimore.....	4,156.77	952.70	3,204.07
Sub-Total.....	106,808.99	48,106.97	58,702.02
Grand Total.....	239,173.61	97,175.94	141,997.67

STATEMENT OF CONDUIT REVENUE FOR THE YEAR 1938

Lessee	Duct Feet Occupied December 31, 1938			Revenue Total
	Main	Distribution	Total	
American District Tel. Co. (Special Services).....				\$947.50
Baltimore Lumber Co. (Special Services).....				5.00
Baltimore and Ohio Railroad Co.....	39,160.68	1,541.09	40,701.77	2,467.14
Baltimore Transit Co.	1,276,489.73	22,678.23	1,299,167.96	78,557.73
Chesapeake and Potomac Telephone Co.....		14.28	14.28	1.00
Cons. Gas Elec. Light and Power Co.....	4,276,297.98	2,245,496.42	6,521,794.40	404,109.01
Dow, Jones & Co. (Special Services).....				265.00
Federal Land Bank of Baltimore.....		181.13	181.13	12.68
E. H. Koester Bakery Co.....		56.60	56.60	1.98
Maryland Realty Investment, Inc.....		1,468.80	1,468.80	50.00
Mercy Hospital		257.68	257.68	18.04
Pennsylvania Railroad Co.....	22,745.38	4,394.46	27,139.84	1,635.43
Postal Telegraph Cable Co.....	75,576.35	93,514.82	169,091.17	10,647.40
Standard Oil Co. of New Jersey.....		2,737.14	2,737.14	191.60
Western Union Telegraph Co.....	78,896.23	132,172.74	211,068.97	12,942.62
U. S. Department of Agriculture.....		1,454.46	1,454.46	
U. S. Hydrographic Office.....	777.90	318.05	1,095.95	
Bureau of Buildings.....	991.75	7,435.94	8,427.69	
Bureau of Harbors.....		610.16	610.16	
Bureau of Highways.....		760.41	760.41	
Bureau of Mech.-Elec. Service.....	1,870.60	76,998.26	78,868.86	
Bureau of Sewers.....		1,382.33	1,382.33	
Board of Park Commissioners.....		221.40	221.40	
Board of School Commissioners.....		313.95	313.95	
Fire Alarm Telegraph Department.....	479,581.04	171,054.80	650,635.84	
Police Telegraph Department.....	443,873.24	233,833.57	677,706.81	
Municipal Telephone Exchange.....	641.80	605.95	1,247.75	
Bureau of Water Supply.....	1,011.70		1,011.70	
Total.....	6,697,914.38	2,999,502.67	9,697,417.05	\$511,852.13

MECHANICAL DIVISION

W. J. CHRISTOPHER, *Mechanical-Engineer**Superintendent*

During 1938 the Mechanical Division handled jobs covered by shop orders and the cost of the work billed to customer Bureaus and Departments was as follows:

Department or Bureau	No. of Invoices	Cost
Department of Public Welfare (Baltimore City Hospitals)	56	\$4,283.53
Board of Park Commissioners	1	40.43
Board of School Commissioners	32	403.92
Bureau of Buildings	30	1,597.56
Bureau of Harbors	21	545.32
Bureau of Highways	114	6,394.85
Bureau of Mechanical-Electrical Service	491	21,789.55
Bureau of Plans and Surveys	2	69.25
Bureau of Receipts	10	2,526.93
Bureau of Sewers	146	6,200.90
Bureau of Standards	2	1,862.78
Bureau of Street Cleaning	617	41,577.00
Bureau of Transportation	329	9,857.89
Bureau of Water Supply	1,041	42,932.36
Chief Engineer	2	45.62
Commissioner of Health	1	20.60
Comptroller—Markets	1	25.20
Free Public Bath Commission	12	259.00
Mayor and City Council	1	28.00
Society for Prevention of Cruelty to Animals	3	66.88
Sydenham Hospital	5	357.89
Total	2,917	\$140,885.46

The revenue received from work done was \$5,600.00 more for 1938 than for the previous year.

Of the 2917 completed jobs, 632 were completed by the truck shop, 830 by the small car shop and 1455 by the main shop group consisting of the machine, welding, carpentry, electrical, paint and blacksmith units. The most important of these jobs were:

1. *Machine Shop.* Building up and facing off check valve cages and rebushing valve flaps out of suction line and repairs to main-engines at the Sewage Pumping Station.

Cutting pinion gears and moving ring gear sections on Colgate Creek Bridge. Assembling core boring equipment on trailer for the Bureau of Highways. Constructing sight gauge water level indicator for Pikesville Reservoir. Making venturi meter controls for Pikesville, Ashburton and Guilford Pumping Stations.

Rebuilding 5 flushers and 3 concrete mixers.

2. *Welding Shop.* Making and installing supports for 16 inch water main on Airport Bridge.

Installing basket pans on 55 rubbish trucks and making alterations and additions to rubbish bodies for Bureau of Street Cleaning.

Repairs to 25 lighting poles damaged in shipment.

Removing old stack and constructing new stack at Incinerator at the Baltimore City Hospitals.

Mounting sludge tank and pump on trailers for use at Loch Raven.

Removing suspension bridge over lower dam of Loch Raven.

Installing steel plates and tool boxes in 15 new trucks for Bureau of Water Supply.

Furnishing and erecting steel beams and chain fall in ice plant at Baltimore City Hospitals.

Furnishing and erecting wire fence around tennis court at Baltimore City Hospitals.

Constructing body and installing winch on truck chassis for hauling dead horses, for Bureau of Street Cleaning.

Constructing telescope hoist on motorcycle trailer for transferring rubbish from trailer to truck.

Furnishing and installing steel bodies on garbage trailers.

Furnishing and installing steam boiler for Department of Public Welfare.

Mounting and equipping air compressor for Conduit Division.

Repairing ash chute and blow-down pipes at the Sewage Pumping Station.

Furnishing material and constructing window grating for Montebello Gate House.

3. *Carpentry Shop.* Constructing benches and cupboards for Meter Room, Mount Royal.

Making doors and transom for Roland Park standpipe.

General carpentry work at Loch Raven.

Constructing and installing doors for Ashburton Gate House.

Making forms for brickwork for Incinerator and for concrete work for Bureau of Water Supply.

Repairing roofs at Arlington Standpipe and renewing roof at Curtis Bay Pumping Station.

General carpentry work at Melvin Avenue Pumping Station, Catonsville.

4. *Electrical Shop.* Installing lighting system in comfort station and wiring sheds at Mr. Butcher's at Loch Raven. Installing lights and heater units at various garages where Water Department trucks are stored.

5. - *Paint Shop.* Painting buildings and fence at Gay Street Yard.

Painting and lettering 29 trucks and 35 foreman's shacks and tool carts for various Bureaus.

Several engineering assignments were handled by the Mechanical Engineer in addition to the regular duties as Shop Superintendent, the most important being the preparation of data for specifications for the purchase of two pressure flusher units for the Bureau of Street Cleaning. Specifications will be completed and bids asked early in 1939.

Specifications were prepared and bids asked for two air compressors one for this Bureau and the other for the Bureau of Sewers. The low bid was \$2,550.00 and the successful bidder the Stuart M. Christhill Company.

At the request of the Chief Engineer a survey was made of the heating plants in all municipal buildings, including schools, fire houses, libraries, etc., to determine the feasibility of installing automatic stokers. To date no action has been taken in this direction.

INCINERATOR DIVISION

HUGH MCCOY, *Superintendent*

This division has charge of the disposition of the rubbish and garbage hauled by the Bureau of Street Cleaning to its two Incinerator plants, No. 2 located on the Philadelphia Road near Herring Run handling trash only, and No. 3, located on Reedbird Avenue near Hanover Street handling both trash and garbage.

A Jeffrey Grinder, located on Sewer Road near North Point Road in the vicinity of No. 2 plant is also operated by this division, when its service is required. This apparatus grinds garbage and delivers it direct into the outfall sewer of the disposal plant. It was not used during 1938.

The No. 2 plant is operated by the forces of this Bureau and the No. 3 plant is operated under contract with the E. T. Foreman Company.

The No. 2 plant handled, during the year 47,533 tons of trash delivered by the Bureau of Street Cleaning and 1269 tons from private sources, making a total of 48,802 tons. From this material 7,470 tons of salvage were obtained, netting the City a revenue of \$34,626.83, the sale of which is in charge of the Bureau of Stores, the details of items sold being shown later.

During 18 days of the last month of the year, only one furnace was operated at the No. 2 plant, while the flue of the other unit was being torn out and replaced, this work being done by our own labor forces.

The No. 3 plant handled 96,402 tons of rubbish from City trucks and 879 tons from private sources, or a total of 97,281 tons; also 80,220 tons of garbage from City trucks and 2045 tons from private sources or a total of 82,265 tons. From the rubbish 6353 tons of material were salvaged by the Foreman Company.

During the year, due at times to the wet condition of the trash at the No. 2 plant, and also during the periods when the plant was undergoing repairs, a total of 1860 tons were diverted to the scows.

SUMMARY OF TOTAL SALVAGE FOR THE YEAR

Paper.	3,293,920 lbs.	\$3,052.10
Card Board	2,722,950 lbs.	4,200.37
Rags.	111,640 lbs.	1,569.09
Curtains.	22,350 lbs.	217.41
Burlap.	31,250 lbs.	193.99
Carpet.	13,430 lbs.	70.95
Rubber.	5,510 lbs.	79.06
Scrap Iron	194,220 lbs.	566.51
Scrap Metals	20,005 lbs.	1,267.51
Bottles.	348,104 lbs.	4,268.74
Broken Glass	1,445,645 lbs.	819.02
Baled Heavy Tin	1,807,180 lbs.	4,354.71
Baled Tin Cans	4,924,220 lbs.	13,967.37
Total.	14,940,424 lbs.	\$34,626.83

The No. 3 plant successfully completed six years of operation. Repairs to furnaces and scale were of a general nature and a new metal building was erected for storage purposes.

TOTALS FOR YEAR INCINERATED

Garbage.	82,264.905 tons
Rubbish.	90,928.145 tons
Total.	173,193.050 tons

NON-INCINERATED MATERIAL

Glass.	2,078.89 tons
Metal.	4,273.62 tons
Total.	6,352.51 tons

Coal used to aid combustion.	None
Total furnace hours.	25,933
Average burning rate for year.	6.660 tons per hour
Capacity rating for year.	106.176%

COST OF OPERATING INCINERATOR PLANT No. 1 FOR THE YEAR 1938

Operating Expenses	\$0.50
Maintenance Expenses	52.85
Operating Management Expenses. . . . .	.72
Administrative Overhead . . . . .	.08
Total Cost.	\$54.15

COST OF OPERATING INCINERATOR PLANT No. 2 FOR THE YEAR 1938

Operating Expenses	\$94,713.36
Maintenance Expenses	8,798.74
Operating Management Expenses.	14,199.13
Administrative Overhead	1,665.82
Total Cost.	\$119,377.05
Less Revenue from Salvage.	34,626.83
Net Cost.	<u>\$84,750.22</u>

TONNAGE REPORT OF GARBAGE DISPOSAL FOR THE YEAR 1938
INCINERATOR PLANT No. 3

Month	Collected by City Forces	Delivered to Plant by Private Parties	Total Incinerated
January.....	4,875.400	96.890	4,972.290
February.....	4,697.855	86.780	4,784.635
March.....	5,397.600	133.075	5,530.675
April.....	5,624.020	187.960	5,811.980
May.....	6,285.425	188.685	6,474.110
June.....	6,817.870	197.120	7,014.990
July.....	8,363.250	206.690	8,569.940
August.....	11,280.090	220.775	11,500.865
September.....	8,258.305	189.135	8,447.440
October.....	6,881.590	200.715	7,082.305
November.....	6,173.965	189.320	6,363.285
December.....	5,564.255	148.135	5,712.390
Total.....	80,219.625	2,045.280	82,264.905

COST OF DISPOSAL OF GARBAGE AND RUBBISH FOR THE YEAR 1938

	Quantity Tons	Unit Cost Per Ton	Cost
Incinerator Plant No. 2			
Rubbish.....	41,331.683	\$84,750.22	\$2.05
Incinerator Plant No. 3			
Rubbish (Contract).....	90,928.145	72,742.52	.80
Operating and Unloading Expenses..	.....	1,884.92	.02
Total Cost.....	.....	\$74,627.44	\$0.82
Garbage (Contract).....	82,264.905	\$152,190.06	\$1.85
Operating and Unloading Expenses..	.....	1,705.40	.02
Total Cost.....	.....	\$153,895.46	\$1.87
Total.....	214,524.733	\$313,273.12	.....

RECAPITULATION

Rubbish.....	132,259.828	\$159,377.66	\$1.21
Garbage.....	82,264.905	153,895.46	1.87
Total.....	214,524.733	\$313,273.12	.....

Conduits for Future Lighting

Provisions were made for future ornamental electric lamps by installing cross-over conduits on the following streets ahead of new paving:

Lamps

- 50—Caton Avenue from Strickland Street to Stafford Street.
- 15—Broening Highway from Colgate Creek Bridge to Airport.
- 106—Park Heights Avenue from Avondale Avenue to City Line.
- 15—Belvedere Avenue from York Road to Bellona Avenue.
- 17—Wilkens Avenue from Dukeland Street to Caton Avenue.
- 33—Northern Parkway from Hillen Road to Sherwood Avenue.

New Types of Street Lighting

A new type of street lighting was installed in 1938 on the two bridges over the Gwynns Falls Valley at the Hilton Parkway. These units consist of 200 watt luminaires set flush in the balustrades of these bridges about 20 inches above the sidewalk and throw the light in a horizontal beam spread of approximately 120 degrees, with a maximum candle power of 1980. The luminaire is known as G. E. Type A. L.-50, and consists of a prismatic spread-light door lens, plus an internal Alzak aluminum parabolic reflector. A series of horizontal louvres eliminate objectionable glare above the horizontal through the lamp filament.

A total of 74-600 C. P. lamps of a new type installed on Howard Street from Read Street to North Avenue, including the new bridge over the Jones Falls Valley. These lamps are known as General Electric Type S1 D and are mounted on 4 foot mast arms attached to trackless trolley poles and the mounting height is 25 feet. The lamps are in parallel at an approximate spacing of 100 feet. A feature of these lamps is that all the illumination is thrown downward on the bed of the street and between the curbs. There has been much favorable comment from the public regarding this lighting system, and it is hoped that with funds permitting, the same type lamps will be used on the new Philadelphia Road from Orleans Street to the City Line.

New Illuminated Street Signs

For the past several years there has been a tendency on the part of the public to complain of an inability to read the porcelain enamelled street signs that are attached to the lighting standards while riding in automobiles after dark due to insufficient illumination from the lamps.

In order to overcome this condition, the Lighting Division experimented over a period of several months with a type of glass or composition sign that would be visible after dark and could be

TONNAGE REPORT OF RUBBISH DISPOSAL FOR THE YEAR 1938

Month	Incinerator Plant No. 2				Incinerator Plant No. 3				Total Salvaged	Total Incinerated	Scows	Total Disposal
	City Collection	Private	Less Salvaged	Amount Incinerated	City Collection	Private	Less Salvage	Amount Incinerated				
January	3,133.420	108.580	626.696	2,615.304	7,105.560	41.085	377.455	6,769.190	1,004.151	9,384.494	.....	9,384.494
February	2,277.225	88.445	441.801	1,923.869	7,145.625	26.580	185.470	6,986.735	627.271	8,910.604	.....	8,910.604
March	3,697.165	98.780	613.194	3,182.751	8,168.065	42.195	292.460	7,917.800	905.654	11,100.551	.....	11,100.551
April	4,526.420	92.320	726.977	3,891.763	8,227.010	51.145	332.945	7,945.210	1,059.922	11,836.973	332.865	12,169.838
May	4,955.045	138.455	697.284	4,396.216	9,071.090	55.145	237.420	8,888.815	934.704	13,285.031	192.350	13,477.381
June	4,876.930	116.480	720.539	4,272.871	8,641.220	81.120	319.515	8,402.825	1,040.054	12,675.696	.....	12,675.696
July	4,548.175	125.750	606.244	4,067.681	8,201.795	91.225	337.160	7,955.860	943.404	12,023.541	265.450	12,288.991
August	4,304.900	129.415	592.294	3,842.021	8,167.335	124.370	398.805	7,892.900	991.099	11,734.921	117.710	11,852.631
September	4,127.655	87.950	535.075	3,680.530	7,953.885	128.390	436.625	7,645.650	971.700	11,326.180	473.220	11,799.400
October	3,996.150	93.565	651.375	3,438.340	8,213.185	85.565	493.630	7,805.120	1,145.005	11,243.460	.....	11,243.460
November	3,652.570	96.340	590.087	3,158.823	7,568.570	73.325	1,055.435	6,586.460	1,645.522	9,745.283	.....	9,745.283
December	3,437.275	92.885	668.646	2,861.514	7,938.495	78.675	1,885.590	6,131.580	2,554.236	8,993.094	478.065	9,471.159
Total	47,532.930	1,268.965	7,470.212	41,331.683	96,401.835	878.820	6,352.510	90,928.145	13,822.722	132,259.828	1,859.660	134,119.488

LIGHTING DIVISION

WALTER C. TOMIE

Illuminating Engineer

There was a large increase in home building in 1938 on newly opened thoroughfares in all sections of the City, and with Federal aid, a number of old streets were repaved, all of which necessitated the installation of a large number of modern street lamps.

An opportunity was also provided to replace a number of gas lamps with new ornamental electric lamps on certain thoroughfares in the older sections of the City, such as Fayette Street, Eutaw Place, Gorsuch Avenue, etc., that were included in the 1938 paving program.

The Lighting Division installed a total of 782 new electric lamps during 1938, while there was a net decrease of 195 gas lamps.

A few of the thoroughfares that were equipped with new ornamental electric lamps during the year are listed below:

- | | | |
|--------|-------------------------|--|
| 34—100 | C. P. Ornamental Lamps— | 29th Street from Oak Street to 29th Street |
| | | Bridge over Jones Falls. |
| 62—250 | “ “ “ | —Fayette Street from Broadway to Lake-wood Avenue. |
| 19—600 | “ “ “ | —36th Street from Chestnut Ave. to Falls Rd. |
| 4—100 | “ “ “ | —Gibbons Ave. from Walther Blvd. to Cross-wood Avenue. |
| 6—100 | “ “ “ | —Purlington Way from Taplow Road to Biffin Lane. |
| 26—600 | “ “ “ | —Park Heights Ave. from Oakley Ave. to Hayward Avenue. |
| 6—100 | “ “ “ | —Sheldon Ave. from Mannasota Ave. to Findley Ave. |
| 72—250 | “ “ “ | —Eutaw Place from Dolphin St. to North Avenue. |
| 51—250 | “ “ “ | —Patapsco Ave. from Hanover St. to Pennington Avenue. |
| 46—100 | “ “ “ | —White Ave. from Harford Rd. to Belair Rd. |
| 22—100 | “ “ “ | —Calvert St. from Read St. to Mt. Royal Ave. |
| 47—100 | “ “ “ | —Gorsuch Ave. from Old York Rd. to Kirk Avenue. |
| 74—600 | “ “ “ | —Howard St. from Richmond Market to North Avenue. |
| 28—250 | “ “ “ | —Oak Street from North Ave. to 25th Street. |
| 8—200 | Watt Balustrade Lamps | in Howard Street Underpass. |
| 23—100 | C. P. Ornamental Lamps— | Gorsuch Ave. from Kirk Ave. to Harford Rd. |
| 29—200 | Watt Ballustrade Lamps | on two bridges over Gwynns Falls Valley at Hilton Parkway. |
| 37—100 | C. P. Ornamental Lamps— | Hilton Parkway from Edmondson Avenue North Avenue. |

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A new type of street lighting was installed in 1938 on the two bridges over the Gwynns Falls Valley at the Hilton Parkway. These units consist of 200 watt luminaires set flush in the balustrades of these bridges about 20 inches above the sidewalk and throw the light in a horizontal beam spread of approximately 120 degrees, with a maximum candle power of 1980. The luminaire is known as G. E. Type A. L.-50, and consists of a prismatic spread-light door lens, plus an internal Alzak aluminum parabolic reflector. A series of horizontal louvres eliminate objectionable glare above the horizontal through the lamp filament.

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For the past several years there has been a tendency on the part of the public to complain of an inability to read the porcelain enamelled street signs that are attached to the lighting standards while riding in automobiles after dark due to insufficient illumination from the lamps.

In order to overcome this condition, the Lighting Division experimented over a period of several months with a type of glass or composition sign that would be visible after dark and could be

readily seen from an automobile travelling at a speed of twenty-five miles per hour. We finally adopted a sign that consists of four cast aluminum frames, into which are inserted glass or composition transparent street signs, that are mounted on a galvanized bracket which is attached to the standard just below the lamp fixture.

On street signs located at street intersections, we have arranged to place two glass block number signs on the top of the street name sign. These two signs show the block number of each of the two streets that make up the intersection.

The first installation of these new illuminated signs was on Garrison Boulevard from Walbrook Junction to Liberty Heights Avenue. The public reaction was both prompt and very favorable, in fact inquiries were received from a number of out of state cities who were very much interested in this new type sign. Many favorable comments were received from out of state autoists and interstate truck operators.

During the balance of the year we installed these new signs on Fayette Street from Fallsway to Philadelphia Avenue; White Avenue from Harford Road to Belair Road; Patapsco Avenue from Hanover Street to Pennington Avenue; Eutaw Place from Dolphin Street to North Avenue; 36th Street from Chestnut Avenue to Falls Road; Calvert Street from Read Street to Mt. Royal Avenue and on Oak Street from North Avenue to 25th Street.

With funds permitting it is our intention to continue the use of this type of sign on any streets where new ornamental street lighting systems are installed.

We also hope to replace the old type enamel signs on main arteries leading out of the City, with this new sign as soon as funds are available.

The total lamps in service of all types as of December 31, 1938, is 39,707 lamps, of which 22,748 are electric lamps and 16,959 are gas lamps, a net increase of 587 lamps over the total for 1937.

NEW CONTRACTS

A five year contract with the Consolidated Gas Electric Light & Power Company that expired May 1, 1938, for gas in large quantities, was not renewed for the reason that based on the consumption of gas at the four institutions covered by this contract, a savings of approximately \$1,000 per year could be effected by making use of the Consolidated Gas Electric Light & Power Company's published "Schedule K" Contract. This contract is renewable in yearly periods and covers all gas used at the City Hospitals, Municipal Office Building and the Enoch Pratt Library.

SUMMARY OF LAMP CHANGES IN 1938

	In Service Jan. 1, 1938	Lamps Installed	Lamps Dis- continued	In Service Dec. 31, 1938
Electric Lamp, all types...	21,966	1,280	498	22,748
Gas Lamps, all types.....	17,154	307	502	16,959
Totals.....	39,120	1,587	1,000	39,707

SUMMARY OF LAMPS IN SERVICE DECEMBER 31, 1938

Incandescent Electric Lamps

Consolidated Gas Electric Light & Power Company owns poles, fixtures and cable

Type of Fixture	Candle- power	Type of Service	Remarks	Number of Lamps	Price Per Lamp Per Year
Radial Reflector.....	60	Overhead	.....	7,056	\$25.75
Radial Reflector.....	100	Overhead	.....	0	27.50
Novalux	250	Overhead	.....	2,685	40.50
Novalux	400	Overhead	With or without bowl or dome refractor....	211	51.75
Novalux	600	Overhead	"	30	61.75
Novalux	1000	Overhead	"	0	77.00
Radial Reflector.....	60	Underground	.....	720	44.88
Radial Reflector.....	100	Underground	.....	0	46.63
Novalux	250	Underground	.....	1,012	62.88
Balustrade	250	Underground	.....	29	34.00
Novalux	400	Underground	With or without bowl or dome refractor....	918	74.38
Novalux	600	Underground	"	30	84.38
Novalux	1000	Underground	With or without bowl or dome refractor....	0	99.63
Radial Reflector.....	62	Combination	.....	2,688	35.93
Novalux	320	Combination	With goose neck or mast arm..	100	50.18
Novalux	490	Combination	With goose neck or mast arm..	4	60.18

Ornamental Incandescent Lamps

City owns poles. Consolidated Gas Electric Light & Power Company owns fixtures and cable (except North Avenue fixtures and Eager Street Bridge fixtures)

Type of Fixture	Candle-power	Type of Service	Remarks	Number of Lamps	Price Per Lamp Per Year
Novalux.....	100	Cable in Conduit		426	\$42.13*
Novalux.....	100	Cable in Ground		1875	29.75*
Novalux.....	250	Cable in Conduit		1252	51.88*
Novalux.....	250	Cable in Ground		399	39.50*
Novalux.....	400	Cable in Conduit		1729	59.88*
Novalux.....	400	Cable in Ground		16	47.50*
Novalux.....	600	Cable in Conduit		245	69.88*
Novalux.....	600	Cable in Ground		2	57.50*
Novalux.....	600	Cable in Conduit	Two lamps to each trolley pole (Light Street).....	18	67.19
Novalux.....	1000	Cable in Conduit	Two lamps to each trolley pole (Light Street).....	0	83.19
Novalux.....	1000	Cable in Conduit		1	86.38
Novalux.....	1500	Cable in Conduit		0	107.38
Pylon.....	490	Combination	(City owns equipment) ..	2	56.13
Novalux.....	100	Cable buried in improved sidewalks.....		35	35.00*
Novalux.....	250	Cable buried in improved sidewalks.....		48	44.75*
Novalux.....	400	Cable buried in improved sidewalks.....		0	52.75*
Novalux.....	600	Cable buried in improved sidewalks.....		19	62.75*
Total electric lamps.....				21,550	

Service connections, including post wires and cutouts, where such service does not replace a gas service and/or lamp:

These prices are based on the present prices charged by the City for duct rental, and in the event of any change therein, there will be a change at the rate of \$2.13 per lamp per year for each one cent change in duct rental per foot. This figure has been checked by the City.

ELECTRIC STREET LAMPS OPERATED BY AMERICAN STREET LIGHTING COMPANY

City owns Poles, Fixtures, Cable, etc., and Furnishes Current. American Street Lighting Co., Furnishes Operation and Maintenance.

* A connection charge of Fifteen Dollars (\$15.00) is to be paid by the City for each lamp unless replacing gas connections; and, in addition, the price per lamp per year specified.

Type of Service	Candle-power	Underground	Number of Lamps	Rate Per Lamp Per Year		
				Current	Maintenance	Total Cost
Multiple	60 Watt	In conduit	10	\$3.00	\$5.30	\$8.30
Multiple	100 Watt	In conduit	8	5.75	5.50	11.25
		(Amber Lamps)				
Multiple	100 Watt	In conduit	264	5.75	11.00	16.75
Multiple	200 Watt	In conduit	12	13.15	12.15	25.30
Multiple	300 Watt	In conduit	55	14.25	13.30	27.55
Series	100 C. P.	In conduit	681	5.75	11.70	17.45
Series	100 C. P.	Cable in ground. (Amortized)	61	3.08	25.41	34.24
Series	250 C. P.	In conduit	21	13.15	12.10	25.25
Series	400 C. P.	In conduit	3	21.60	12.50	34.10
Series	600 C. P.	In conduit	83	25.61	13.30	38.91
Total Lamps.....			1,198			

GAS LAMPS

City owns Poles and Furnishes Gas and Service Connections. American Street Lighting Company Furnishes Fixtures and Maintenance.

Type of Lamp	Candle-power	Service	Number of Lamps	Rate Per Lamp Per Year		
				Gas	Maintenance	Total Cost
Ornamental ..	35	Automatic Clock	294	\$11.57	\$14.68	\$26.25
Boulevard ...	55	Automatic Clock	13,558	9.97	14.68	24.65
One Burner Novalux..	55	Automatic Clock	776	11.57	14.68	26.25
Two Burner Boulevard..	110	Automatic Clock	374	18.77	16.28	35.05
Two Burner Novalux..	110	Automatic Clock (Continuous Pilot)	1,425	18.77	16.28	35.05
Two Burner Novalux..	110	Automatic Clock (Intermittent Pilot)	532	18.77	16.28	35.05
Total.....			16,959			
			1938	1937	1936	
Total cost of Street Lighting.....			\$1,360,040.00	\$1,336,000.00	\$1,322,300.00	
Average Cost of Street Lighting Per Lamp			34.25	33.87	34.38	
Average Per Capita Cost of Street Lighting			1.57	1.55	1.51	
			(Population—December 31, 1938....865,524)			

RATES PAID FOR GAS, ELECTRICITY AND STEAM

Electric Current

The electric current used by the City in the various Public Buildings including Schools, Fire and Public Buildings, City Hall, Court House, etc., is purchased under two separate contracts:

No. 1.—Where current is furnished through a meter to one premises and the consumption does not exceed 120,000 K.W.H. per year, the rate is \$.0365 per K.W.H. This is known as "Municipal Flat Rate."

No. 2—"A"—Where low tension current is furnished through a meter to one or more buildings and the consumption exceeds 120,000 K.W.H. per year with a demand of not less than 25 kilowatts in any one premises, the fixed cost is \$24.00 per year per kilowatt of demand, with a running cost of \$.0115 per K.W.H. for all current up to 100,000 K.W.H. per month and a secondary cost of \$.009 per K.W.H. for all excess kilowatt hours. This is known as Municipal Power Schedule, Low Tension Service.

"B"—Where high tension alternating current to an extent of not less than 200 kilowatts in any one premises and operating at approximately 4,000 volts is used, a charge of \$18.00 per year per kilowatt of demand is made with a running cost of \$.0087 per K.W.H. for all current furnished up to 1,000,000 K.W.H. per month and a secondary rate of \$.007 per K.W.H. for all excess kilowatt hours. This is known as the "Municipal Power 4,000 Volt Schedule."

"C"—For high tension alternating current to an extent of not less than 200 kilowatts at any one premises and operating at 13,200 volts or over, if such current is available a fixed cost of \$16.20 per year per kilowatt of demand is charged, with running cost as follows:

	Per K.W.H.
Up to and including 1,000,000 K.W.H.....	\$.0077
From 1,000,000 K.W.H. to 1,500,000 K.W.H.....	.006
From 1,500,000 K.W.H. to 4,000,000 K.W.H.....	.005
From 4,000,000 K.W.H. and over.....	.004

This is known as the "Municipal Power—13,200 Volt Schedule." The above low and high tension schedules are subject to a fuel rate adjustment each month by increase or decrease according to the average cost of coal as delivered to the coal bunkers of the local power company generating plants and is based on changes in the cost of generating electricity by steam due to changes in the cost of coal from a base price of \$4.10 per short ton and shall be taken at the rate of 1/100 cents per kilowatt hour for each 12 cents per short ton change in the cost of coal. The price of coal is filed monthly with the Public Service Commission by the contractor.

*Supply of Gas***For Street Lighting:**

For all gas for street and outdoor lamps located along the company's mains, seven dollars and thirty-six and two-third cents (\$7.36 2-3), per lamp per year, for not exceeding two and one-quarter ($2\frac{1}{4}$) cubic feet of gas per hour per lamp, payable at sixty-one and one-half ($61\frac{1}{2}$ c) per month per lamp for all gas consumed in excess of an average of $2\frac{1}{4}$ cubic feet per hour per lamp, sixty cents (60c) net per thousand cubic feet for such excess.

For Public Buildings of the City:

For gas supplied to the City along the Company's mains, for lighting the public buildings of the City, a Primary Rate of eighty cent (\$.80) net per thousand cubic feet and a Secondary Rate of (\$.60) net per thousand cubic feet, the Secondary Rate applying to all gas used per month at each separate premises in excess of the amount hereinafter specified as the Primary Rating and only to such excess. The Primary Rating is the number of cubic feet per month which must be used at the Primary Rate before the Secondary Rate applies.

The Primary Rating will be placed at the number of thousands of cubic feet corresponding most nearly to the one hundred (100) times the demand of such premises, the Demand being defined as the maximum hourly rate of consumption in cubic feet. This is equivalent to one hundred (100) hours' use of Demand per month, figured to the nearest number of even thousands of cubic feet. The Primary shall remain fixed and a fixed element in billing, so long as the conditions of maximum rate of use at the respective premises do not increase, but shall in no event be taken at less than 4,000 cubic feet per month—three dollars and twenty cents (\$3.20) net.

The Demand is the maximum rate of use by the Customer and is defined as the greatest number of cubic feet used in any one hour. It may be specified in the contract and estimated by the Company from the burner rating or otherwise, and may be redetermined from time to time according to the Customer's normal use of gas. For rapidly fluctuating uses, the demand shall be taken at not less than 75 per cent of the amount of gas which continuous use for one hour would require. The demand after having been established by measurement, including any increases as shown by later measurements shall be the basis for billing from the time of such measurement and shall not be decreased during the term of the contract. Upon extraordinary occasions for a certain limited period the Company may at its option give permission to exceed the determined maximum rate of use by a stated amount without increasing the estimated demand upon which the Primary Rate is based.

For Service Connections for Gas Street Lamps:

For service connections from main to street or outdoor gas lamps, in accordance with the Specifications, eighteen dollars (\$18.00) each for material and labor, it being understood in accordance with the Specifications, that the City will pay for the improved pavement charges:

Or, for such services from main to curb only, thirteen dollars (\$13.00) each

Or, for the completion of such services from curb to lamp, or for such services from sidewalk main available on same side of street to lamp, eight dollars (\$8.00) each.

For discontinuance of lamps in accordance with Section 13 of the Specifications, the City will pay the actual cost incident to the work.

For Water Heating, Laundries Cooking, Etc., in the Public Buildings of Baltimore

Schedule "K" Contract

Fixed or Demand Costs:

A price of \$240.00 per year payable in equal monthly installments of \$20.00 will be charged for the first 1,000 cubic feet of demand or fraction thereof.

A price of \$18.00 per year per 100 cubic feet of demand, payable in equal monthly installments of \$1.50, will be charged for that part of the demand exceeding 1,000 cubic feet of gas and up to and including 15,000 cubic feet.

A price of \$6.00 per year per 100 cubic feet of demand, payable in equal monthly installments of 50 cents will be charged for that part of the demand exceeding 15,000 cubic feet of gas and up to and including 15,000 cubic feet.

The above prices do not include the supply of gas, the latter being covered by the following Running Costs:

Running Costs:

A price of 65 cents gross per 1,000 cubic feet of gas, will be charged for all gas supplied under this Schedule, up to and including 100,000 cubic feet per month.

A price of 55 cents gross per 1,000 cubic feet of gas, will be charged for all gas supplied under this Schedule exceeding 100,000 cubic feet and up to and including 1,000,000 cubic feet per month.

A price of 45 cents gross per 1,000 cubic feet of gas, will be charged for all gas supplied under this Schedule exceeding 1,000,000 cubic feet and up to and including 4,000,000 cubic feet per month.

A price of 40 cents gross per 1,000 cubic feet of gas, will be charged for all gas supplied under this Schedule, exceeding 4,000,000 cubic feet per month.

A discount of 10 cents per thousand cubic feet from the gross price of gas is allowed provided the bill is paid at an office of the Contractor on or before the last discount day, ten (10) days from the date of reading the meters.

Oil Rate Adjustment:

Should the price for oil delivered to the Company's gas manufacturing plant exceed 90 cents per barrel (42 gallons), the net price for each one thousand cubic feet of gas in excess of 4,000,000 cubic feet per month shall be subject each month to an increase or decrease of five-tenth cent (.5c) per thousand cubic feet for each full six and one-quarter cent (6.25c) change in the price for oil per barrel above the said 90 cent base price.

(Note: Changes in the price of oil as affecting the Oil Rate Adjustment charge to the customers will be filed with the Public Service Commission of Maryland, but only when there is a change in the charge or credit).

Summer Gas Service:

Gas service during the non-heating season, in substitution for district or private steam used during the heating season, or for strictly summer service, where there is no use for gas in the calendar months of December, January, February and March, will be supplied under this Schedule "K", except that the Fixed or Demand Costs will be waived, but there will be a minimum charge of twenty-five dollars (\$25.00) per month during the meter reading months of July, August and September. Any service supplied at any time during the period beginning December 1st and ending March 1st, shall be in accordance with this Schedule "K," and Fixed Costs will thereupon be charged for a full contract year and thereafter.

Supply of Steam

The City purchases steam for heating various municipal properties by contract from the Consolidated Gas Electric Light & Power Company at the following rates:

Rate per Month

First	100,000 pounds per month—	\$1.65 per 1,000 pounds
Next	100,000 pounds per month—	1.35 per 1,000 pounds
Next	300,000 pounds per month—	1.00 per 1,000 pounds
Next	500,000 pounds per month—	.85 per 1,000 pounds
Next	1,000,000 pounds per month—	.75 per 1,000 pounds
All over	2,000,000 pounds per month—	.65 per 1,000 pounds

Collective Application:

The consumption in pounds of steam per month for all the premises shall be added together and the Running Costs, including Fuel Rate Adjustment, as scheduled shall be applied to the aggregate amount.

Prompt Payment Discount:

A discount of five per cent (5%) will be allowed on the net amount of the bill based on the above rates when paid on or before the due date which is ten (10) days after rendition of bill.

Fuel Rate Adjustment:

The net price for each one thousand (1000) pounds of steam supplied under this schedule shall be subject each month to adjustment by increase or decrease according to the average cost of coal as delivered to the coal bunkers of the Company's steam boiler plant or plants. This adjustment is based upon changes in the cost of generating steam, due to change in the cost of coal from a base price of five dollars (\$5.00) per short ton, and shall be taken at the rate of seventh-tenth cent (7/10c) per one thousand (1000) pounds of steam for each ten cents (10c) per short ton change in the cost of coal. This adjustment shall be made to the nearest one hundredth of a cent (1/100c) per thousand (1000) pounds of steam.

Readiness-to-Serve Charge:

In addition to the above meter rates, there will be an annual readiness-to-serve charge at the rate of five cents (5c) per square foot of connected radiation as computed by the Company, payable ten (10) days after rendition of October bill, and applying from October 1st.

Should the radiation of the Customer's equipment, connected directly or indirectly with the heating system of the Company, be greater than or increased over the number of square feet specified in the contract or recorded by the Company as a basis of billing, the amount of the above charge will be correspondingly increased, and such increased charge shall thereupon become due and payable.

On new connections made subsequent to October first, the original readiness-to-serve charge will be reduced to accord with the reduced season, based on a seven (7) month heating season beginning October first, and such charge shall be payable as aforesaid.

Readiness-to-Serve Prompt Payment Discount:

A discount of five per cent (5%) will be allowed on the readiness-to-serve charge when charge is paid in full on or before the due date.

CONTRACTS

The City of Baltimore has eight contracts with the several public utilities companies listed in the following paragraphs, covering the use of electricity, gas, steam and street lighting maintenance. These contracts are prepared and supervised by the Lighting Division.

Under the terms of several of these documents, the various City Bureaus and Departments purchase one or more of these services and all bills therefor are rendered to this Division for verification as to quantity and prices. After checking and approval, they are forwarded to the proper department for final payment.

No. 1. The operation and maintenance of the electric street lighting system is furnished by Consolidated Gas Electric Light & Power Company under the terms of a three year contract that expires November 1, 1940.

No. 2. The supply of high and low tension electric current for all Public Buildings and other places is furnished by the Consolidated Gas Electric Light & Power Company under the terms of a contract dated January 27, 1927, running for five years and at the expiration thereof, renewable from year to year. This contract is subject to cancellation at the end of annual periods by either party giving notice in writing at least sixty days prior to the expiration of any annual period.

No. 3. The supply of current for all other Public Buildings, etc., under the "Municipal Flat Rate Schedule" is furnished by the Consolidated Gas Electric Light & Power Company under the terms of a three year contract that expires November 1, 1940.

No. 4. The supply of illuminating gas for all street lamps and for use in all Public Buildings is furnished by the Consolidated Gas Electric Light & Power Company under the terms of a three year contract that expires November 1, 1940.

No. 5. Certain electric street lamps in various thoroughfares in the City and in the public parks and squares, together with lamps on a number of bridges throughout the City that are owned by the City, are operated and maintained by the American Street Lighting Company under the terms of a five year contract that expires December 1, 1940. To these lamps the City furnishes the electric current under contracts listed above, specified as No. 2 and No. 3.

No. 6. All the street gas lamps are operated and maintained by the American Street Lighting Company under the terms of a five year contract that expires November 30, 1941. The City furnishes the gas for these lamps under contract listed above and specified as No. 4.

No. 7. The supply of steam for heating various municipal buildings is purchased from the Consolidated Gas Electric Light & Power Company under the terms of a three year contract, dated October 1, 1930, which contract is renewable from year to year, but subject to cancellation at the end of annual periods by either party giving notice in writing at least sixty days prior to the expiration of any annual period.

No. 8. The supply of illuminating gas for water heating, laundries, cooking and other purposes in certain public buildings, where gas is used in larger quantities than is used under the terms of contract No. 4, listed above, is furnished by the Consolidated Gas Electric Light & Power Company under the terms of a one year contract dated March 8, 1938, and starting May 1, 1938. This contract is subject to renewal from year to year at its expiration, May 1, 1939, but may be cancelled at the end of any annual period by either party giving notice in writing at least thirty days (30) prior to the expiration of any such annual period.

GAS, ELECTRIC AND STEAM METER READINGS

An ordinance of the Mayor and City Council requires that all gas, electric and steam meters used in all City buildings and public places owned by the City are to be read by the representatives of this Division each month in company with the representative of the Consolidated Gas Electric Light & Power Company. During the past year approximately 11,000 individual meter readings were recorded. These readings are used as a check on the monthly bills of the contractor to the various City Departments for the quantity of gas, electricity and steam consumed.

A close touch is kept on all buildings wherein the consumption of gas and electricity may increase to such an extent that demand tests may be made with the view of placing the buildings on one of the lower rate schedules listed above in the several contracts.

DAMAGED LAMPS

During the year 1938, there was a total of 759 street lamps damaged by vehicles on streets in all parts of the City. Of this total 304 were completely demolished lamps and posts while the balance, 455, were fixture equipment only. The Police Department cooperated to the fullest extent in investigating most of these accidents and during the year furnished the Lighting Division with a total of 566 detailed reports. The total of 759 damaged lamps consisted of 408 electric lamps and 351 gas lamps. Of the total of 304 completely wrecked lamps, 57 were electric lamps and 247 were gas lamps.

MISCELLANEOUS MAINTENANCE WORK

The following is a tabulation of work of all sorts performed by our shop and labor forces during the year, thereby keeping the street lighting and street sign systems up to a high standard of efficiency:

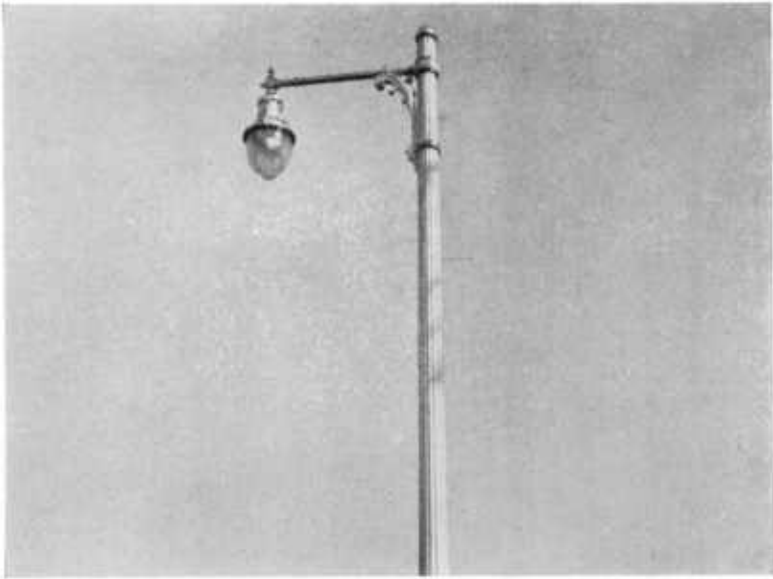
2,788 lamp posts painted
450 posts delivered
1,722 street signs straightened
474 street signs removed
15 posts erected for street signs
17 sign posts removed from street
750 lamp posts straightened
49 sign posts straightened
69 jobs of cement paving
1,191 electric lamp post doors repaired
510 bases hauled
1,172 enamel signs erected
1,425 glass signs erected
123 lamp posts removed

LAMPS TRANSFERRED

The Lighting Division transferred a total of 189 street lamps to new locations during the past year. These transfers were occasioned by the installation of larger radius curb circles at numerous street intersections by the Bureau of Highways. A few lamps were relocated at the request of private property owners to clear proposed driveways; the expense of all such work however, was borne by such private owners.

SERVICES RENDERED TO BUREAU OF SMOKE CONTROL

During the past year the clerical force of the Lighting Division performed certain duties for the Bureau of Smoke Control, which work included the issuance of 4,017 permits; 55 certificates, and 4,017 record cards, covering the installation of various types of combustion equipment. All stenographic work, filing of records, tabulations, reports and similar duties were performed by our clerical force.



TYPE 81D LUMENAIRE—600 C. P. (HOWARD STREET VIADUCT)



NEW ILLUMINATED STREET SIGN AND BLOCK NUMBER



G. E. TYPE 81D LUMENAIRES ON THE HOWARD STREET VIADUCT



HOWARD STREET VIADUCT LOOKING NORTH (NIGHT VIEW)

THE DIVISION OF SMOKE CONTROL

LUKE ELLIS

Smoke Abatement Engineer

Smoke abatement in Baltimore has continued to progress during the year and it is now evident that the policy adopted by the Bureau in the beginning "to educate where needed and regulate when necessary" is bringing about the decrease in the volume of prohibited smoke and a general compliance with the tolerances prescribed by the smoke control ordinance.

In following this policy we have found that each furnace is a problem in itself and the factors which affect one are very seldom applicable to the next smoke problem.

No cure-all has ever been discovered for the smoke nuisance, but it is possible to prevent excessive smoke from coming out of a stack by stopping it at the source and this is being accomplished by careful firing of suitable fuel and providing adequate combustion space to consume the smoke in the furnace.

The problems which have confronted the Bureau since it was established can be best described by a brief review of its operations. The first steps toward actual smoke control were taken in February, 1932 when the Bureau was organized. Since then our work has covered a wide range of smoke problems which we have endeavored to solve without imposing undue hardship on the public.

Rules and regulations for controlling smoke were adopted by the Advisory and Appeal Board after public hearings and became effective in 1933. These rules define the smoke tolerance and govern the installation of the various types and sizes of combustion equipment.

Applications giving complete information regarding each piece of equipment must be filed and approved by the Bureau before a permit is issued. Drawings and specifications must accompany the applications for larger equipment. The supervisory control that is exercised under the regulations has prevented the installation of inadequate or obsolete equipment that would be future sources of smoke. It is this control that has proved to be the most important factor in Smoke Prevention.

The work has proceeded along instructive lines and in keeping with the desire to first reduce the smoke from public buildings before applying regulation to others, the Bureau concentrated its efforts on public buildings and succeeded in reducing the number of offenders in this class to a few isolated cases which have since been corrected.

When our activities were extended to include all smoke offenders it soon became apparent that the general public was not familiar with the terms of the smoke control ordinance or the rules and regulations adopted thereunder. The public, therefore, had to be informed concerning fuel, firing methods, prohibited smoke, prescribed tolerances, etc., before definite progress could be expected in the reduction of smoke. During the first two years every effort was made to acquaint the public with the purpose of the ordinance and to obtain the cooperation of owners and operators of the larger boiler plants in adopting proper methods of firing and the use of suitable fuel to prevent the emission of prohibited smoke.

In addition to the educational work that was necessary during the first years, a survey was made to locate and determine the number of smoking stacks in the city. This survey required daily observations of all offending stacks for several months to provide the information needed on which to base the future operations for controlling the smoke. Many of the stacks had been smoking continuously for years without any effort on the part of the owners or operators to try to improve the conditions that caused the excessive smoke. The worst offenders were given first attention, frequent observations and inspections of each plant were necessary until decided changes were made in the method of firing or handling the equipment to assure a reduction in the smoke to the prescribed degree.

The advantage of smoke indicating devices has been demonstrated in many boiler rooms and the firemen in tall buildings especially, have less difficulty in keeping the smoke under control where these visual or warning devices are installed. Without indicators of some type to assist the firemen, it is impossible for them to know when dense smoke is being discharged from a stack which is not visible from the boiler room. The regulations require such devices in new plants, but we have insisted upon their use in all old plants where it is difficult for the firemen to observe the stacks.

Mechanical firing equipment has generally replaced hand firing in eliminating many bad offenders, but there are a few instances where hand firing has replaced mechanical equipment and stopped the discharge of excessive smoke. This unusual method of decreasing the smoke was adopted by a prominent hotel which discarded pulverizer firing equipment and returned to hand firing, thereby saving on fuel and abating one of the worst smoke nuisances in the city.

Habitual offenders are no longer tolerated and whenever any are found immediate action is taken to compel compliance with the law. With this class of offenders practically eliminated, it has been possible for many of the larger buildings to have their exterior surfaces cleaned for the first time since they were erected.

The practice of taking samples of coal for analysis by the City Bureau of Standards was adopted as a means of informing hundreds of occasional offenders with the fact that there is other coal available with a lower volatile content than the coal they have been accustomed to using. When the analysis shows that the coal is unsuitable for use in the equipment, a notice is sent to the offender to change the coal and use a kind that can be burned with less smoke. The decrease in smoke that has resulted from this practice has justified its continuation.

Smoke prevention has continued to be a large and important part of our work and includes among other requirements, the approval of all applications for permission to install equipment and the examination of all building plans with reference to provisions for controlling and limiting the discharge of smoke from heating and power plants. When the building plans and specifications fail to comply with the smoke regulations, the builders or owners are notified to revise the plans and in every case to file applications for permits before installing the combustion equipment.

The number of applications that have been filed and permits issued since this regulation became effective now total more than 25,000 which establishes an unprecedented rate of adopting new combustion equipment in a comparatively short time. Most of this equipment is oil burners which can be easily regulated to prevent the emission of dense smoke.

It should be noted that the Bureau of Smoke Control since its inception has been functioning similar to a Division in the Bureau of Mechanical-Electrical Service because the latter Bureau is in a position when needed, to assist in handling smoke control problems. In order to coordinate and provide for the continuance of the smoke control work as a part of the Mechanical-Electrical Bureau, an amendment to the Smoke Control Ordinance was approved March 14, 1938, providing for a Division of Smoke Control in the Bureau of Mechanical-Electrical Service, instead of a separate Bureau as provided for in the original ordinance. The amendment further ordained that wherever the term "Commissioner of Smoke Control" occurs in the original ordinance, the term "Smoke Abatement Engineer" shall be substituted and the Mechanical-Electrical Engineer shall appoint the Smoke Abatement Engineer.

The duties and powers conferred upon the Bureau and the Advisory and Appeal Board by the original ordinance were not changed by the amendment which ordains that the Division of Smoke Abatement Engineer shall continue the work that was being done by the Bureau of Smoke Control.

The recent installation of modern firing equipment in large industrial plants has improved smoke conditions in their vicinity. In some places however, this same equipment which reduces the smoke, is now causing complaints against the emission of fly ash and solids from the stacks. It has been possible in the past to correct a few cases where the fly ash or cinders were emitted with prohibited smoke, but the control of fly ash emissions where there is no prohibited smoke is a matter which was not provided for in the present ordinance.

The need for legislation to effectively control fly ash has been recognized by the Smoke Control Division and the Advisory and Appeal Board and their approval has been given to an Amendment to the Smoke Control Ordinance now pending in the City Council which is intended to regulate such emissions.

The progress that is being made in decreasing the smoke is largely due to the diligence of the inspectors who are daily observing the stacks throughout the city and are constantly on the alert to see that the smoke from any stack does not exceed the prescribed limits. In this as in other regulatory work it should be remembered that the human element is a factor that must be reckoned with in smoke control problems. After corrections have been made and the smoke is brought under control, there is often the tendency to carelessness in handling the equipment or substituting unsuitable and cheaper fuel for the kind that we had recommended which was being used for the purpose of reducing the smoke. Inspections are made periodically to detect such practices which are being stopped by citations to the police courts.

The Division of Smoke Control is operating with the same personnel that was assigned to the Bureau at the beginning of the smoke control work. Observation records of all stacks which now extend over a period of several years, provide useful and reliable information regarding the smoke emissions from each stack. By comparing the recent records with the records of previous years, it is possible to determine to what extent the smoke emissions have been reduced from the stacks which were formerly among the offenders. These comparisons show the actual reduction of prohibited smoke from the stacks in all parts of the city.

Permits issued for new combustion equipment during the year show that oil burners continue to be installed in dwellings in large numbers and this has been a help in preventing the dwellings from causing a smoke problem which would be difficult to handle if there was no choice of fuels such as we are privileged to have in Baltimore.

The extent of the smoke control activities during this and preceding years is summarized in the tables which follow as part of this report.

CHANGES MADE TO ABATE SMOKE

	Total	
	1938	1933-1938
Stokers installed	82	361
Stokers adjusted	11	323
Stokers, careful firing	102	189
Stokers lowered	4	6
Stokers repaired	5	19
Oil Burners, careful firing	61	298
Defective oil burners removed	2	7
Boilers, careful firing	234	870
Boilers, changed method of firing .....	..	292
Boilers repaired .....	..	10
Incinerators, careful firing	33	108
Incinerators repaired	3	11
Incinerator screens repaired	10	25
Incinerators renewed	12	12
Incinerators, use prohibited	2	2
Fuel changed to lower volatile	90	399
Fuel changed to anthracite	23	76
Fuel changed to gas	2	6
Fuel changed to coke	3	8
Defective furnaces repaired	7	17
Refinery furnaces, careful firing	1	4
Pulverizers repaired and adjusted .....	..	10
Pulverizers abandoned .....	..	5
Pulverizers, careful firing	6	15
Combustion control installed	1	2
Bake Ovens, careful firing	7	11
Locomotives, careful firing	17	51
Steamboats, careful firing	3	18
Steam Shovels, careful firing	2	6
Gas Mfg., careful firing	2	2
Foundries, careful firing	1	7
Chimneys raised	21	133
Chimneys repaired and cleaned	12	69
Smoke Indicators Installed	7	26
Smoke Indicators adjusted	1	3
Steam Jets installed	6	24
Grates lowered .....	..	5
Dump fires extinguished	4	23
Stopped burning trash in boilers	2	12
Stopped burning trash outside	7	23
Stopped burning junk	1	16
Total	787	3,504

COMPLAINTS RECEIVED AND INVESTIGATED

Apartments	62	327
Asphalt Plants	3	6
Automobile Sales and Service	2	9
Bakeries	31	179
Bank Buildings	1	4
Blacksmith Shops .....	..	3
Bottling Works	1	6
Bowling Alleys	1	2
Breweries	3	18
Brick Yards	2	5
Butchers .....	..	11
Canneries	1	38

	1938	Total 1933-1938
Car Barns .....	..	4
Cemeteries.	1	3
Churches.	2	16
Cleaners and Dyers.	7	50
Clubs. ....	..	3
Coffee Roasters.	1	1
Colleges.	1	6
Comfort Stations .....	..	2
Community Heat	1	9
Cooperages. ....	..	6
Dairies.	9	33
Distilleries	1	8
Dumps. ..	3	19
Dwellings.	63	404
Factories.	55	313
Florists.	1	4
Foundries. ....	..	7
Fraternity Houses	2	2
Garages.	5	59
Gas Works	2	2
Gasoline Service Stations.	2	8
Halls.	1	3
Hospitals.	4	68
Hotels.	16	79
Ice Cream Manufacturing Plants.	4	23
Institutions.	1	7
Junk Yards .....	..	14
Laundries.	19	180
Lodge Buildings	1	4
Lumber Mills	2	5
Marble Yards .....	..	2
Markets.	2	22
Market Stores	8	11
Office Buildings	3	86
Post Offices	1	3
Pet Hospitals .....	..	2
Power Houses .....	..	11
Public Baths .....	..	3
Pumping Stations	1	3
Railroads	22	64
Railroad Shops	1	24
Railroad Tunnel Stacks.	1	4
Restaurants.	2	17
Saloons.	5	27
Schools.	9	63
Shops.	8	21
Steamboats.	3	18
Stores.	13	59
Synagogues. ....	..	4
Tabernacles.	1	1
Telephone Exchanges .....	..	2
Warehouses.	1	14
Total.....	391	2,411

SMOKE OBSERVATIONS

	1938	Total 1933-1938
Stacks observed during year.....	6,489	15,910

COAL ANALYSIS

	1938	Total 1933-1938
Samples analyzed by Bureau of Standards.....	48	670

SMOKE OFFENDERS

Notices served on smoke offenders.....	194	966
Police summons issued.....	12	64
Court orders issued.....	..	1

SMOKE PREVENTION

Building plans examined during year.....	..	5,848
Builders notified to file application for permits....	611	2,358

APPLICATIONS FILED AND PERMITS ISSUED FOR
NEW COMBUSTION EQUIPMENT

Oil Burner installations (domestic).....	3,025	21,509
Oil Burner installations (commercial).....	347	1,893
Boiler installations (domestic).....	1,185	2,239
Boiler installations (commercial).....	186	596
Oil Fired Boiler Unit installations (domestic).....	19	144
Oil Fired Boiler Unit installations (commercial)....	3	48
Furnace installations (domestic).....	44	138
Furnace installations (commercial).....	4	13
Oil Fired Furnace installations (domestic).....	29	131
Oil Fired Furnace installations (commercial).....	1	3
Incinerator installations (domestic).....	1	8
Incinerator installations (commercial).....	9	35
Stoker installations (domestic).....	29	91
Stoker installations (commercial).....	59	269
Bake Oven installations (commercial).....	3	5
Air Conditioning Oil Fired Unit installations (com- mercial).....	..	2
Pulverizer installations (domestic).....	..	2
Oil Fired Water Heater installations (domestic)....	1	99
Oil Fired Water Heater installations (commercial)..	..	27
Oil Fired Range installations (commercial).....	..	2
Heat Treating Furnace installations (commercial)..	3	4
Stack installations (commercial).....	..	7
Blue Coal Burner installations (domestic).....	..	8
Oil Fired Roasting Oven installations (commercial)..	..	1
Grate installations (commercial).....	..	3
Locomotives (commercial).....	..	1
Cabinets for Smoking Meat (commercial).....	2	2
Total.....	5,130	27,280
Permits issued during year.....	4,016	25,212
Permit and certificate fees collected during year....	\$2,775	\$14,215

COST OF SMOKE CONTROL FOR THE YEAR 1938

Salaries.....	\$6,725.15
Labor.....	1,307.17
Transportation.....	19.99
Supplies.....	148.70
Car Tokens.....	130.00
Total.....	\$8,331.01

ANNUAL REPORT OF

DETAIL COST STATEMENT OF OPERATING EXPENSES
FOR THE YEAR 1938

1—GENERAL EXPENSES

11	Administrative Expenses—Executive Division		
11-1	Pay and Expenses of Employees.....	\$10,653.49	
11-2	Office Supplies and Expenses.....	115.33	
11-4	Stationery, Printing and Advertising.....	295.46	
	Total 1—General Expenses.....		\$11,064.28

2—OPERATING EXPENSES

21-A	Operating Management Expenses— Engineering Division		
21-A-1	Pay and Expenses of Employees.....	\$6,563.04	
21-A-2	Office Supplies and Expenses.....	165.13	
21-A-4	Printing, Stationery and Advertising....	1.85	
21-A-7	Miscellaneous Expenses.....	1,048.40	
	Sub-Total.....	\$7,778.42	
21-B	Operating Management Expenses— Conduit Construction Division		
21-B-1	Pay and Expenses of Employees.....	\$13,431.43	
21-B-2	Office Supplies and Expenses.....	531.15	
21-B-4	Printing, Stationery and Advertising.....	289.53	
21-B-5	Storeroom and Yard Expenses.....	24,119.29	
21-B-7	Miscellaneous Expenses.....	32.50	
	Sub-Total.....	\$38,403.90	
21-C	Operating Management Expenses— Conduit Inspection Division		
21-C-1	Pay and Expenses of Employees.....	\$25,191.55	
21-C-4	Printing, Stationery and Advertising.....	168.50	
	Sub-Total.....	\$25,360.05	
21-D	Operating Management Expenses— Lighting Division		
21-D-1	Pay and Expenses of Employees.....	\$10,226.35	
21-D-2	Office Supplies and Expenses.....	15.43	
21-D-4	Printing, Stationery and Advertising.....	136.78	
21-D-5	Storeroom and Yard Expenses.....	2,287.53	
	Sub-Total.....	\$12,666.09	
21-E	Operating Management Expenses— Incinerator Division		
21-E-1	Pay and Expenses of Employees.....	\$13,703.34	
21-E-2	Office Supplies and Expenses.....	9.47	
21-E-4	Printing, Stationery and Advertising.....	492.28	
21-E-7	Miscellaneous Expenses.....	1.02	
	Sub-Total.....	\$14,206.11	
21-F	Operating Management Expenses— Mechanical Division		
21-F-1	Pay and Expenses of Employees.....	\$7,714.47	
21-F-2	Office Supplies and Expenses.....	15.00	
21-F-4	Printing, Stationery and Advertising.....	337.22	
21-F-5	Storeroom and Yard Expenses.....	6.32	
	Sub-Total.....	\$8,073.01	

DEPARTMENT OF PUBLIC WORKS

383

21-G	Operating Management Expenses— Smoke Control Division	
21-G-1	Pay and Expenses of Employees.....	\$8,256.96
21-G-3	Postage, Telephone and Telegraph.....	5.50
21-G-4	Printing, Stationery and Advertising.....	68.55
	Sub-Total.....	\$8,331.01
22	Electric Conduit Operating Expenses	
22-1	Trunk Conduits	\$155.03
22-2	Lateral Conduits	157.00
22-6	Manholes.	6,612.90
	Sub-Total.....	\$6,924.93
23	Street Lighting Operating Expenses	
23-1	Electric Lighting	\$862,686.57
23-2	Gas Lighting	424,282.23
23-3	Meter Reading	319.96
23-4	Lamp Inspection	4,811.72
	Sub-Total.....	\$1,292,100.48
24	Street Sign Operating Expenses	
24-1	Changing Street Signs.....	\$2,188.95
24-2	Street Sign Inspection	5,832.73
	Sub-Total.....	\$8,021.68
25-A	Incinerator Operating Expenses— No. 1 Plant, Rubbish	
25-A-10	Purchase of Fuel and Electricity.....	\$0.50
25-B	Incinerator Operating Expenses— No. 2 Plant, Rubbish	
25-B-1	Supervision and General Operating Ex- penses.	\$8,921.45
25-B-2	Unloading Platform	13,669.60
25-B-3	Conveyor Operations	17,758.11
25-B-4	Baling Tin	7,067.06
25-B-5	Assorting Salable Metals.....	1,113.62
25-B-6	Assorting Bottles	3,739.17
25-B-7	Baling Paper and Rags.....	5,062.45
25-B-8	Operating Furnaces and Equipment.....	9,932.27
25-B-9	Disposal of Ashes and Refuse.....	22,634.61
25-B-10	Purchase of Fuel and Electricity.....	4,081.41
25-B-11	Supplies.	733.61
	Sub-Total.....	\$94,713.36
26	Incinerator Operating Expenses—No. 3 Plant	
26-1	General Operating Expenses.....	\$2,148.76
26-2	Unloading Platform	1,441.56
26-3	Incinerator Rubbish	72,742.52
26-4	Incinerating Garbage	152,190.06
	Sub-Total.....	\$228,522.90
27	Garbage Pulverizer Operating Expenses	
27-1	Pay and Expenses of Employees.....	\$6.23
27-3	Supplies.	119.97
	Sub-Total.....	\$126.20

ANNUAL REPORT OF

28	Scow Expenses	
28-1	Rubbish.	\$107.62
Total 2—Operating Expenses		\$1,745,336.26

3—MAINTENANCE EXPENSES

31	General Repairs	
31-2	Accounting and Commercial Properties.	\$9.66
31-4	Street Lighting Shop	780.07
31-5	Shop Properties	2,118.26
31-6	Storeroom and Yard Properties.	2,744.73
31-9	Miscellaneous General Properties.	4,407.03
Sub-Total.		\$10,059.75
32	Electric Conduit System Repairs	
32-1	Trunk Conduits	\$3,771.00
32-2	Lateral Conduits	445.61
32-3	Service and Distribution Conduits.	2,456.46
32-6	Manholes.	3,028.11
32-7	Hand Boxes—Roadway and Footway.	139.94
32-9	Miscellaneous.	11.88
Sub-Total.		\$9,853.00
33	Street Lighting System Repairs	
33-1	Electric Lighting Properties.	\$13,427.49
33-2	Gas Lighting Properties.	3,535.41
Sub-Total.		\$16,962.90
34	Street Sign Property Repairs	
34-1	Street Name Signs.	\$2,161.42
35-A	Incinerator Repairs—No. 1 Plant	
35-A-1	Building.	\$52.85
35-B	Incinerator Repairs—No. 2 Plant, Rubbish	
35-B-1	Building.	\$1,977.35
35-B-2	Grounds.	20.27
35-B-3	Roads.	4.67
35-B-4	Scales.	125.00
35-B-6	Crane.	709.28
35-B-7	Conveyor.	961.98
35-B-8	Salvage Equipment	773.94
35-B-9	Furnaces, Blowers, Stacks and Appurtenances.	4,089.94
35-B-10	Ash Handling Equipment.	91.92
35-B-11	Dumps.	44.39
Sub-Total.		\$8,798.74
37	Garbage Pulverizer Repairs	
37-1	Buildings.	\$16.82
37-3	Pulverizer and Appurtenances.	352.93
Sub-Total.		\$369.75
Total 3—Maintenance Expenses.		\$48,258.41

4—MISCELLANEOUS REVENUE AND EXPENSES

41-A	Incidental Operating Expenses	
41-A-1	Shop Expenses	\$37,903.23
41-A-2	Shop Orders in Progress.....	121,723.39
41-A-3	Manufacture of Stock Material—Concrete Forms	1,348.59
		<u>\$160,975.21</u>
	Less Shop Work to Accessory Enterprises.....	\$159,568.54
	Less Mfg. of Concrete Forms to Stock	1,406.67
		<u>160,975.21</u>

Sub-Total..... \$0.00

41-B	Incidental Operating Expenses— Motor Transportation Expenses	
41-B-1	Garage Expense	\$712.84
41-B-2	Motor Transportation Expense—Bureau ..	5,771.27
41-B-3	Tires and Tubes Expense.....	1,094.00
41-B-4	Motor Vehicle Expense—Accidents	132.76
41-B-5	Motor Vehicle Depreciation	3,744.54
41-B-6	Motor Vehicle Insurance.....	899.53
		<u>\$12,354.94</u>

Less Rental Rate to Operating Accounts.. 12,354.94

Sub-Total..... \$0.00

41-D	Incidental Operating Expenses— Construction Equipment Expenses	
41-D-1	Construction Machinery Expense.....	\$5,123.75
	Less Rental Rate to Operating Accounts..	5,123.75
		<u>\$0.00</u>

46-A	Gratuitous Work	\$7.02
46-B	Special Services Rendered Other Bureaus	
46-B-1	Snow Removal	\$288.76
46-B-3	Shop Work	13,172.64
46-B-4	Miscellaneous	816.25
		<u>\$14,277.65</u>

47 Sundry Revenue and Expense..... 452.87

Total 4—Miscellaneous Expenses..... \$13,831.80

6—FIXED ASSETS AND FUNDS

60	Construction Work in Progress	
60-1-a	Levy Appropriations—Conduits	\$51,817.15
60-1-b	Levy Appropriations—Street Lighting and Sign Properties	25,179.16
60-1-c	Levy Appropriations — Incinerator Prop- erties.	475.94
60-1-e	Levy Appropriations—General Properties.	1,388.18
		<u>\$78,860.43</u>
	Less Depreciation on Motor Equipment...	2,903.73
		<u>\$75,956.70</u>

ANNUAL REPORT OF

68	Miscellaneous Properties		
68-1	Motor Transportation Properties.....	\$2,903.73	
	Total 6—Fixed Assets and Funds.....		78,860.43
	7—CURRENT AND NOMINAL ASSETS		
76	Materials and Supplies		
	Purchases.....	\$71,706.13	
	Less Increase in Stock from Inventory		
	Accounts.....	3,272.18	
		\$68,433.95	
	Less Distribution to Operating Accounts..	68,433.95	
	Total 7—Current and Nominal Assets.....		\$0.00
	Total Expenses—Bureau of Mechanical-Electrical		
	Service Funds		\$1,897,351.18
42	Accessory Enterprises		
42-1	Electric Conduit Systems.....	\$8,591.46	
42-2	Street Lighting System	2,387.35	
42-3	Shop Work	159,568.54	
42-4	Miscellaneous Billwork.....	18,806.98	
			189,354.33
60-3-a	Levy Funds—Pay-As-You-Go Plan—Conduits.....		16,583.72
69-A	Annual Equity in No. 3 Incinerator.....		42,306.81
	Grand Total.....	\$2,145,596.04	

SUMMARY COST STATEMENT OF OPERATING EXPENSES
FOR THE YEAR 1938

1—General Expenses			
11	Administrative Expenses—Executive Division.....		\$11,064.28
2—Operating Expenses			
21-A	Operating Management Expenses—Engi- neering Division	\$7,778.42	
21-B	Operating Management Expenses—Con- duit Construction Division	38,403.90	
21-C	Operating Management Expenses—Con- duit Inspection Division	25,360.05	
21-D	Operating Management Expenses—Light- ing Division	12,666.09	
21-E	Operating Management Expenses—Incin- erator Division	14,206.11	
21-F	Operating Management Expenses—Me- chanical Division	8,073.01	
21-G	Operating Management Expenses—Smoke Control Division	8,331.01	
22	Electric Conduit Operating Expenses.....	6,924.93	
23	Street Lighting Operating Expenses.....	1,292,100.48	
24	Street Sign Operating Expenses.....	8,021.68	
25-A	Incinerator Operating Expenses—No. 1 Plant, Rubbish	50	
25-B	Incinerator Operating Expenses—No. 2 Plant, Rubbish	94,713.36	
26	Incinerator Operating Expenses—No. 3 Plant.....	228,522.90	
27	Garbage Pulverizer Operating Expenses..	126.20	
28	Scow Expenses	107.62	
			1,745,336.26

3—Maintenance Expenses			
31	General Repairs	\$10,059.75	
32	Electric Conduit System Repairs.....	9,853.00	
33	Street Lighting System Repairs.....	16,962.90	
34	Street Sign Property Repairs.....	2,161.42	
35-A	Incinerator Repairs—No. 1 Plant, Rubbish	52.85	
35-B	Incinerator Repairs—No. 2 Plant, Rubbish	8,798.74	
37	Garbage Pulverizer Repairs	369.75	
			<u>48,258.41</u>
4—Miscellaneous Expenses			
46-A	Gratuitous Work	\$7.02	
46-B	Special Services Rendered Other Bureaus	14,277.65	
47	Sundry Revenue and Expense.....	452.87	
			<u>13,831.80</u>
6—Fixed Assets and Funds			
60	Construction Work in Progress.....	\$75,956.70	
68	Miscellaneous Properties	2,903.73	
			<u>78,860.43</u>
	Total Expenses—Bureau of Mechanical-Electrical Service Funds	\$1,897,351.18	
42	Accessory Enterprises	189,354.33	
	Grand Total.....	<u>\$2,086,705.51</u>	

FINANCIAL STATEMENT OF APPROPRIATIONS AS OF DECEMBER 31, 1938

Account	Description	Appropriations	Increments	Total Credits	Expenditures	Encumbrances	Total Expenditures	Balance
9.20a	Salaries.....	\$84,100.00	.....	\$84,100.00	\$81,764.09	.....	\$81,764.09	\$2,335.91
9.21	Labor.....	176,400.00	.....	176,400.00	187,316.11	.....	187,316.11	10,916.11
9.22	Expenses.....	40,200.00	\$5,693.00	45,893.00	72,290.82	.....	72,290.82	26,397.82
9.23	Purchasing Agent's Account.....	34,250.00	40,772.61	75,022.61	76,000.38	\$867.00	76,867.38	1,844.77
9.24	Incinerator Contract ...	183,200.00	.....	183,200.00	209,459.40	.....	209,459.40	26,259.40
9.26	Gas and Electric Contract	1,335,000.00	.....	1,335,000.00	1,285,864.49	.....	1,285,864.49	49,135.51
	Total.....	\$1,853,150.00	\$46,465.61	\$1,899,615.61	\$1,912,695.29	\$867.00	\$1,913,562.29	\$13,946.68
	Shop Expenses.....	11,000.00	119,919.61	131,019.61	129,272.72	.....	129,272.72	1,746.89
9.28	Compensated Work.....	.....	175,640.40	175,640.40	176,084.99	.....	176,084.99	444.59
	From Surplus.....	.....	12,199.79	12,199.79	.....	.....	.....	12,199.79
9.28	Compensated Work Carried to 1939.....	.....	444.59	444.59	.....	.....	.....	444.59
93-D	Pay-As-You-Go Plan ...	.....	15,333.24	15,333.24	15,333.24	.....	15,333.24	0.00
	Grand Total.....	\$1,864,250.00	\$370,003.24	\$2,234,253.24	\$2,233,386.24	\$867.00	\$2,234,253.24	\$0.00

VALUATION OF BUREAU OF MECHANICAL-ELECTRICAL SERVICE PROPERTIES AS OF DECEMBER 31, 1938

Description	Additions	Retirements	Valuation		Total
			Land	Structures and Equipment	
General Properties.....	.....	.....	\$96,204.60	\$341,998.43	\$438,203.03
Electric Conduit Properties.....	\$224,163.59	\$8,513.89	.....	9,517,837.13	9,517,837.13
Street Lighting Properties.....	32,688.66	21,402.09	.....	1,284,444.32	1,284,444.32
Street Sign Properties.....	3,375.64	615.76	.....	48,391.71	48,391.71
Incinerator Properties.....	1,757.60	508.00	41,191.05	864,169.55	905,360.60
Garbage Pulverizer Properties.....	.....	.....	.....	13,384.22	13,384.22
Motor Transportation Properties.....	3,453.73	3,794.54	.....	9,016.22	9,016.22
Materials and Supplies.....	.....	.....	.....	41,786.72	41,786.72
Construction Work in Progress.....	.....	.....	.....	22,246.29	22,246.29
Total.....	\$265,439.22	\$34,834.28	\$137,395.65	\$12,143,274.59	\$12,280,670.24

REPORT OF THE QUANTITY AND VALUE OF ELECTRIC CONDUIT
PROPERTIES IN SERVICE AS OF DECEMBER 31, 1938

Description	Additions			Retirements			In Service December 31, 1938		
	Duct Ft.	Lin. Ft.	Cost	Duct Ft.	Lin. Ft.	Cost	Duct Ft.	Lin. Ft.	Cost
Trunk Conduits	318,128	29,684	\$106,366.77	306	25	\$79.71	15,986,281	1,080,754	\$4,224,667.58
Type "B" Trunk Conduits							779,768	68,608	182,522.09
Lateral Conduits	32,212	15,018	34,055.74	2,057	1,796	1,244.72	2,309,284	940,251	1,011,019.39
Service and Distribution Conduits	8,133	4,224	9,911.97	8,970	3,065	4,232.71	2,896,798	622,485	1,201,174.83
Type "B" Service and Distribution Conduits							516,983	67,364	167,942.60
Dead End Conduits.....	848	547	687.47	823	161	273.71	571,792	155,966	177,813.74
P. and F.A.T. Conduits							318,123	111,908	151,772.47
Special Connections—									
Fire Alarm Boxes...	365	311	742.34	78	78	51.48	25,135	24,314	18,393.20
Police Boxes	78	78	102.23	37	37	24.42	7,466	7,342	5,036.25
Traffic Signals.....	319	319	636.02	98	98	64.68	12,445	11,640	8,620.86
Safety Beacons.....	2,134	2,134	8,466.49				7,171	7,181	13,214.85
Control Boxes							383	383	258.38
Trolley Poles.....	408	176	481.45	436	206	161.20	43,692	21,536	18,733.06
Work in Progress.....							15,092	11,160	20,291.84
Total Conduits..	362,625	52,491	\$161,450.48	12,805	5,466	\$6,132.63	23,490,423	3,130,892	\$7,201,461.14
	Trench Feet	Number	Cost	Trench Feet	Number	Cost	Trench Feet	Number	Cost
Manholes—									
Trunk and Lateral..	1,145	146	\$58,383.97	76	12	\$2,367.82	49,538	6,965	\$1,733,276.18
Serv. & Distribution							17,643	3,328	515,561.79
P. and F.A.T.....							1,375	320	50,420.49
Handboxes	229	352	4,329.14	2	3	13.44	4,768	7,261	37,409.37
Work in Progress.....								104	1,695.62
Total Manholes.	1,374	498	\$62,713.11	78	15	\$2,381.26	73,324	17,978	\$2,338,363.45
Grand Total.....			\$224,163.59			\$8,513.89			\$9,539,824.59

STATEMENT SHOWING OCCUPANCY OF ELECTRICAL CONDUITS
AS OF DECEMBER 31, 1938

		Duct Feet	Percentage
Conduits Available for Occupancy			
Trunk.	15,986,231		
Type "B" Trunk	779,768		
Lateral.	2,309,234		
Service and Distribution	2,896,798		
Type "B" Service and Distribution	516,983		
P. and F. A. T.	318,123		
Special Connections			
Fire Alarm Boxes	25,135		
Police Boxes	7,466		
Traffic Signals	12,445		
Safety Beacons	7,181		
Control Boxes	383		
Trolley Poles	43,692	22,903,539	100.0%
Less Conduits Occupied			
Mains.	6,697,914		
Distribution.	2,999,503	9,697,417	42.3%
Conduits Unoccupied		<u>13,206,122</u>	<u>57.7%</u>

INTEREST AND SINKING FUNDS ON MECHANICAL-ELECTRICAL
SERVICE LOANS FINANCED DURING THE YEAR 1938

Loan	Interest	Sinking Fund	Amount of Stocks and Bonds Outstanding as of 12/31/38
\$1,000,000.00—1958—4% (Conduit Loan)	\$40,000.00	\$5,000.00	\$1,000,000.00
\$2,000,000.00—1962—4% (Conduit Loan)	80,000.00	14,000.00	2,000,000.00
\$1,000,000.00—1918 to 1942—4% (First Conduit Serial Loan)	10,340.00	53,000.00	232,000.00
\$1,500,000.00—1936 to 1965—4% (Second Conduit Serial Loan)	55,000.00	50,000.00	1,350,000.00
\$1,000,000.00—1933 to 1967—4% (Third Conduit Serial Loan)	34,200.00	29,000.00	826,000.00
\$1,150,000.00—1922 to 1946—5% (General Improvement Loan— \$26,000,000.00)	27,677.50	52,634.50	527,230.00
\$7,650,000.00—Total.	<u>\$247,217.50</u>	<u>\$203,634.50</u>	<u>\$5,935,230.00</u>

February 8, 1912.

In describing the work which has been accomplished by the Electrical Commission since its formation in October, 1898, it might be interesting to first briefly outline the history of underground conduit construction in this city prior to that date, and touch on the most important points which led to the appointment of the first Commission.

In 1889-90 the Chesapeake and Potomac Telephone Company took the initiative in underground conduit construction, when they built a small amount of conduits in the business or congested district of the city. In the Charter under which the Telephone Company was operating was a provision which made it compulsory for them to reserve one duct or compartment in each line for the free use of the city. Shortly after this, the city constructed several small conduit lines in order to tie in the lines already built by the telephone company, thereby making the one duct available for their use. Besides this, The Brush Electric Company laid about 10,000 feet of cement line pipe on North Avenue between Charles and Gay streets.

About this time the city awoke to the fact that if any concentrated effort was to be made to remove the unsightly poles and wires, which were increasing in numbers from year to year, it would be necessary to start in a methodical and business-like way, and to formulate some plan whereby all the wire operating companies would be obliged to place their wires underground, and all under the same conditions.

In 1892 an Act was secured by the city which empowered the Mayor and City Council to appoint a commission for this purpose. This Act did not, however, provide for any appropriation with which to carry on the work. In 1896 the Legislature passed an Act authorizing the

city to issue stock to the amount of \$1,000,000.00 subject to the approval of a majority of the registered voters of the city. The ordinance submitting this Act to a vote was passed the same year and was approved by the voters in November, 1897.

After this, the City Council appointed an Electrical Commission and defined in detail the duties of the commission. This Commission was composed of the Mayor as Chairman, the City Register as Secretary and the President of the Fire Board as the third member. This ordinance was approved August 25, 1898.

The Commission met on October 1st, 1898 and appointed a Chief Engineer and certain sub-ordinates. Work was immediately started on formulating plans, procuring certain necessary data and other work necessary before actual construction of the conduit system could be begun. This construction work was started in March, 1899, and from that time until the present, construction work has gone on each year.

When the Engineering force started to formulate its plans it was, of course, necessary to determine the different lay-outs and future wants of all of the several wire operating companies, which at that time were: The Baltimore City Passenger Railway Company, The Baltimore Consolidated Railway Company, The Brush Electric Company, The Edison Electric Illuminating Company, The Northern Electric Company, The Chesapeake and Potomac Telephone Company, The Maryland Telephone Company, The Postal Telegraph-Cable Company and The Western Union Telegraph Company. While this was going on certain data as to the location and character of underground obstructions which would be met with was looked up, but it was found that unfortunately the city had never kept any detailed records of the hundreds of gas pipes, water pipes, drains, sewers, and other underground structures; so, it was necessary to dig hundreds of test holes to determine the exact

conditions under the surface of the streets. This cost thousands of dollars. All of this data was plotted on plats drawn to the scale of twenty (20') feet to the inch; and then the work of determining on the locations of the different lines was begun. This, as I said, was finished in time to begin actual construction work in March, 1899.

It might be well to say now that the underground conduit system for electric wires is made up of several different classes of conduits; First, Trunk lines, which are of necessity the largest and which carry the trunk or through cables from the different power plants to the different feeding centres or points from which the several companies feed certain districts. There are now ten power plants or sub-stations operated by the Consolidated Gas Electric Light & Power Company, six operated by the United Railways & Electric Company and three by the Baltimore & Ohio Railroad Company.

Next comes the Lateral lines or lines which distribute cables from the Trunk line centres to smaller centres of distribution, which centres are picked out as being the geographical centres of any particular portion of the city. Then we have distributing lines for house to house service. These lines are usually built under the sidewalks and distribute the cables from the lateral lines into the several buildings to be supplied with current of one kind or another. In addition to these three classifications we also have small spurs known as trolley taps, which feed the railway trolleys underground; arc light connections which feed the arc lamp poles underground; Police and Fire Alarm call box connections which feed the Fire Alarm boxes and the Police call boxes underground.

Besides these we have recently introduced a system of supplying connections to buildings in the residential section of the city, where the houses which use electric current are pretty well

scattered. This system is known as the alley distribution. Lateral lines are run East and West to intersect trunk lines or laterals as the case may be, which run North and South. From these lateral lines underground pole connections are made in the alleys in the rear of the buildings and from these poles wires may be distributed to each building in a block. By this system all the streets are cleared of overhead wires and poles and the poles are confined entirely to the alleys.

Now as to the method of actual construction work. After it is found necessary to lay a certain size line in any particular street, test holes are dug in the location of the proposed manholes. This is done in order that if a space large enough to admit the construction of a manhole is found, the test hole can be used as part of the excavation for the manhole, thereby saving the cost of the test hole; but it is sometimes found that the location of the manhole has to be shifted one way or the other. After it is found that there is room for a manhole at any particular point the trenches are opened up between two manholes to the required depth. I might say that all trenches, except those on steep grades are laid to the readings of a level, so as to do away with any chance of having broken grades or low points, what we call pockets in the line, where water can settle.

In the bottom of the trenches we place from three (3") to six (6") inches of concrete, depending largely upon the character of the soil. Sometimes it is found necessary to reinforce this concrete with iron rods. Then the conduits are laid and before any concrete is put on top of them, are carefully lined up so as not to have any kinks or curvatures in the line. Then the side concrete, three (3") inches thick is put in, and three (3") inches of concrete on top. After this has had a chance to settle the trenches are back-filled.

Several different kinds of conduit material are used. Some of it is vitrified clay and some of it made of a fibrous composition which is known as fibre conduit. The vitrified clay conduit comes in different sizes, viz: one duct, four duct, six duct and nine duct, and the fibre conduit in $1\frac{1}{2}$ ", 2" and 3" inches diameter.

The joints of the terra cotta conduit are wrapped with a heavy cheesecloth, dipped in a composition composed of Asphaltum, wax tailings and pitch, which serve to make the joints more or less water tight.

As to the manholes, several different styles are used. The trunk line manholes are usually constructed of brick, laid in cement mortar, with walls of a thickness of either nine (9") or thirteen (13") inches, depending upon the size and depth of the hole. The trunk line manhole varies in size from six by five feet inside measurement to twelve by sixteen feet, depending upon the number of ducts entering the hole. The depths vary from eight to fifteen feet, depending upon the arrangement of the ducts in the walls of the hole, and their depth.

$$\begin{array}{r} 56.5 \\ 4 \\ \hline 12 \overline{) 226.0} \\ \underline{19} \\ 27 \\ \hline 46 \end{array} \qquad \begin{array}{r} 54 \\ 8 \\ \hline 12 \overline{) 324} \\ \underline{27} \end{array}$$

Commission

RESOLUTION REQUESTING THE DEPARTMENTAL HEADS TO PUT SUCH LABORERS AS MAY BE EMPLOYED IN EACH OF SAID DEPARTMENTS UPON A TWO-DOLLAR BASIS, OR, IF THAT CANNOT BE DONE, TO PAY THEM BY THE WEEK AT THE RATE OF TEN DOLLARS PER WEEK, REGARDLESS OF THE INFERENCES OF THE WEATHER.

WHEREAS, the City Council, in response to a popular conviction, has endeavored by a series of resolutions and other measures to secure for municipal laborers a wage rate of two dollars per day; and

WHEREAS, among other things the Council specifically requested His Honor the Mayor to instruct the departmental heads to make requisition for labor at the two dollar rate; and

WHEREAS, the Mayor, instead of instructing the departmental heads as he was requested, sent an entirely different order to each of said departments; and

WHEREAS, said order of the Mayor, instead of requesting a positive and compulsory requisition from said ~~MMR~~ departments at the two-dollar rate, suggested that the requisition be an alternative one, first at the two-dollar rate and, secondly, at the dollar and sixty-six cents rate; and

WHEREAS, this refusal of the Mayor to pursue the course recommended by the City Council destroyed the project which otherwise would have made certain the two-dollar rate; and

WHEREAS, the Mayor's instructions to submit alternative estimates would not have been made had there been a bona fide purpose on the part of the Mayor and his friends on the Board of Estimates to secure the two-dollar rate; and

WHEREAS, said alternative estimates would not have been necessary had the Mayor been sincerely in earnest about obtaining two dollars at this time for labor; and

WHEREAS, neither the Mayor nor the Board of Estimates officially notified the City Council when said estimates would be considered, notwithstanding the specific request, by resolution, to both the Mayor and said Board that said notice be sent in order that the Council's special committee might be heard; and

WHEREAS, the various departmental heads were prevented from making a single and direct requisition on the Board of Estimates for nothing but the two-dollar wage, owing to the form of the Mayor's instructions; and

WHEREAS, in the sessions of the Board of Estimates, before the wage question came up for final settlement, it was made manifest that said Board had resolved to cut everything so as to reduce the tax rate for this particular year; and

WHEREAS, the disclosure of this purpose rendered useless any departmental request for the two-dollar rate; and

WHEREAS, compliance with this year's fixed policy of the city executive made it necessary for the several departments to content themselves with the existing wage rate; and

WHEREAS, in conformity therewith, some departments asked for the old \$1.66 rate; but calculated the same on the basis of ten dollars per week instead of by the day; AND be it

RESOLVED by the Mayor and City Council of Baltimore, that the several departmental heads be and the same are hereby requested to pay their laborers at the rate of two dollars per day if the funds in hand for 1907 will justify or permit of such wages; be it further

RESOLVED that if the fund in the hands of said departments is insufficient to pay laborers two dollars per day for the days actually worked, then the said departments are hereby requested to contract with said laborers by the week, paying them ten dollars per week, despite any interferences to work which may be interposed by nature; this request to contract by the week, however, shall not apply to those cases in which laborers are employed temporarily and on work requiring less than a week to complete it; be it further

RESOLVED that a copy of these resolutions be sent by the Mayor to each department.

Approved Jan. 21, 1907,

E. Clay Timanus,

Mayor.

A TRUE COPY,

Jan 22 1907
Amey H. Jones
Register.

REFERRED TO _____

RECEIVED JAN. 20 1907

ANSWERED _____

Resolution re - rate
of laborers pay

2.00 per day.

Jan. 21/07

(1)

RELATING TO BUILDING A CONDUIT ON NORTH STREET, AND REMOVING WIRES FROM THE ELEVATED STRUCTURE THEREIN.

From "Keasbey on Electric Wires" page 92, sec. 72.

This legislation (referring to the general removal of overhead wires) has been held to be a valid exercise of the police power. Injunctions against removing the wires have been denied, and in an action for damages for cutting the wires the New York court of appeals ordered judgement to be entered for the defendant.

The question came before Judge Wallace, of the United States circuit court for the southern district of New York, (*Western Union Teleg. Co. vs. New York*, 38 Fed. Rep. 552; 2 Am. El. Gas. 195, 1889) and he held that the act of 1884 was a valid police regulation, even as to a telegraph company engaged in interstate commerce which had accepted the provisions of the act of Congress of July 24, 1866, (U.S. Rev. Stat., sec. 5263. ~~See first section of chap. XII, infra.~~) and which thereby became, as to government business, a government agency, and also that the act of the New York legislature was good as a police regulation, even though it gave special privileges to a subway company.

And he denied an injunction against cutting down telegraph wires left hanging in the streets after notice to place them in the subways, but as to wires along the line of the elevated railroad, which was a post-road of the United States, he said it was doubtful whether the statutes were lawful to the extent of depriving the plaintiff of the use of such a road, and he granted an injunction.

Ibid page 218, sec. 188.

The act of congress (of July 24, 1866) has not the effect of putting telegraph companies beyond municipal control in the use of the streets. When the Legislature of New York gave authority to commissioners to cause telegraph wires in large cities to be placed underground, Judge Wallace allowed a temporary injunction to stand,

as far as the wires strung along the elevated railroads were concerned, on the ground that it was doubtful whether the State's statutes could deprive the plaintiff of the use of a post road; (ref. W. U. Teleg. vs N. Y. as above) but it was afterward held by the New York court of appeals that the acts of congress in regard to telegraph companies and post roads did not deprive the state of the control of its highways, and its right to regulate them under the police power, and that the acts providing for the use of post roads are perfectly satisfied by the permission given by state legislation to put the wires in subways. (Am. Rapid Teleg. Co. vs Hess, 125 N.Y. 641, 26 N. E. Rep. 919, 3 Am. El. Cas. 142; Richmond vs Southern Bell Tel. Co., -U.S.C.C.A.- 85 Fed. Rep. 19, 1898; same vs same, 174 U. S. 761.)

In a later case the supreme court of the United States said: "It is a misconception to suppose that the act of 1866 carries with it the unrestricted right to appropriate the public property of a state. It is, like any other franchise, to be exercised in subordination to public and private rights."

St. Louis vs W.U. Teleg. Co., 148 U.S. 92, 4 Am. El. Cas. 102;
Postal Teleg. Co. vs Baltimore, 79 Md. 502, 5 Am. El. Cas. 37;
Postal Teleg. Co., vs Charleston, 153 U.S. 692 (1894);
Michigan Tel. Co. vs Charlotte, 93 Fed. Rep. 11 (1899).

IN RE THE POLICE POWER OF THE STATE TO PLACE WIRES UNDERGROUND.

"Keasbey on Electric Wires", page 93, sec. 72.

This subject came up before the state courts of New York in several cases. In PEOPLE vs SQUIRE, (People ex rel. N.Y. Electric Lines Co., vs Squire, Com'r, 107 N.Y. 593-1888-, 14 N.E. Rep. 820, affirming 14 Daly, 154, 2 Am. El. Cas. 170.) the court of appeals decided that the act of 1884 (of the New York Legislature) was not unconstitutional, and was a proper exercise of the power to regulate streets. The court said that in great cities there were many public uses to which the streets were necessarily put, -that they must be used for sewers, gas pipes, steam pipes, telegraph and electric wires, and that it was competent and proper for the legislature to distribute the space for the various uses, so that all should best serve the public convenience, and that in the exercise of this power it was reasonable to require the electric wires to be placed in subways under the control of a neutral board, which should determine how and where the various kinds of wires should be laid.

This decision was affirmed by the supreme court of the United States, and the court said that the statutes of 1885 and 1886 giving control to the board of commissioners of electrical subways did not impair the obligation of the existing contract with the city, and were a constitutional exercise of the general police powers of the state. (145 U.S. 175, 4 Am. El. Cas. 122.)

This decision was followed in two cases in the supreme court of New York, (U.S. Ill. Co. vs Hess, 3 N.Y. Supp. 777, 19 N.Y. St. Rep. 883, 2 Am. El. Cas. 187; U.S. Ill. Co. vs Grant, 7 N.Y. Supp. 788, 55 Hun. 222, 3 Am. El. Cas. 95. See also East River Elec. Lt. Co. vs Grant, 25 Jones and S. (57 N.Y. Superior Court) 553, 9 N.Y. Supp. 317, 3 Am. El. Cas. 127.) and the question came again before the court of appeals in AMERICAN RAPID TELEGRAPH CO. vs HESS? decided February 24, 1891. (125 N.Y. 641, 26 N.E. Rep. 919, 3 AM. El. Cas. 142, 10 Ry. & Corp. L. J. L17, affirming 12 N.Y. Supp. 536, 58 Hun, 610, 35 N.Y. St. Rep. 606. See also Armstrong V. Grant, 31 N.Y. St. Rep

Rep. 248, 9 N.Y. Supp. 388, 50 Hun, 220.)

The plaintiff, a telegraph company organized under the telegraph acts of 1848 & 1853, had constructed lines in the streets of the city of New York without any special grant or authority of the city. The plaintiff claimed that these acts operated as a grant to it of a franchise to use the streets, which constituted an inviolable contract under the protection of the constitution of the United States, so that neither the state nor the city could cause the poles and wires to be removed without making compensation.

The court held that the statute did not grant the plaintiff any interest in the streets, but only conferred upon it an authority or license to enter upon the streets and use them for a public purpose - one of the purposes for which the public streets could be used - not inconsistent with the use for general street purposes, and that these acts of the legislature were general public legislative acts in the exercise of the police power of the state, and therefore they were not beyond the reach of future legislation.

The court said, moreover, that even though they were a grant of some sort of franchise, yet the state did not abdicate its power over the public streets, nor in any way curtail its police power, nor absolve itself from the duty of maintaining the streets and highways of the state in a safe and proper condition for public travel, and they held that the order to remove the poles and wires and put the wires in the subways, after due notice, was a proper and reasonable exercise of the control over streets, and that the cutting down of wires, after failure to comply with the notice, was not a taking of property for public use, but was simply a removal of it after it had become a nuisance.

The court said, also, that the authority to remove wires could be found in the proviso of the act of 1848 under which they were erected, namely, that they should not be so constructed as to incommode the public use of the highways. The legislature, having determined that they do obstruct the public use of the streets has a

right to direct them to be put beneath the surface. The telegraph company insisted that under the act of congress of July 24, 1866, Revised Statutes, section 5263, they were entitled to use the post roads of the United States, and that under section 3964, and the act of March 1, 1884, all letter carriers' routes and all public roads and highways were post roads; but the court held that these acts of congress could not deprive the state of the control of its highways and its right to regulate them under the police power, and that the laws of congress are perfectly satisfied by permission to place the wires in the subway.

RELATING TO BUILDING
A CONDUIT ON NORTH ST X
REMOVING WIRES FROM THE
ELEVATED STRUCTURE
THEREIN

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STATUS AND DUTIES OF THE
ELECTRICAL COMMISSION.

The Electrical Commission is an Ex-officio body, composed of the Mayor, City Register, and President of the Board of Fire Commissioners.

The Mayor, by resolution of the Electrical Commission, has hitherto acted as Chairman, and the City Register, in the same way, as Secretary.

The powers and duties of the Electrical Commission are defined in Ordinances No. 106, 107 and 108, of the Mayor and City Council, which were approved August 25th, 1898. These ordinances were passed under authority of the Legislature, Acts of 1892, Chapter 200.

Ordinance No. 106 empowers the Commission to order and compel all wires to be placed underground in the City conduits. It prescribes that a notice must be sent to the owners of overhead wires when the conduits are built, to remove said overhead wires within 150 days after receipt of the notice. Failure to remove wires within the 150 days, subjects the owners of poles then standing to a fine of \$50. per week for each pole for four weeks, or a total fine of \$200. per pole. At the end of this second limit, the Commission is directed to chop or saw down and remove the poles and wires then still standing.

Ordinance No. 107, is the ordinance which names the Commission, and under which it derives its general authority.

1. Authority to construct a general system of conduits;
2. Authority to employ Engineer;
3. Authority to employ help;
4. Authority to purchase materials, and that only registered voters may be employed;
5. Preparation of plans and specifications for the work to be performed, and advertisements of proposals;
6. Authority to determine rentals and fix conditions, rules etc.;
7. Authority to act for rental in arrears;
8. Monthly statement of receipts to be made to the City Comptroller;
9. Lessees to give bond for space rented;
10. Authority to require all wires to be placed underground;
11. Authority to rent space;
12. Appropriation of \$1,000,000.

Ordinance No. 108, was passed for the purpose of enabling the Electrical Commission to secure information from the Companies which owned overhead wires and poles on the streets, prior to the beginning of

construction. It requires these companies to furnish, fully and accurately, the necessary information, within 60 days from the time the notice should have been ~~received~~ the President or General Manager of each of the several companies, such notice to be signed by the Mayor. Upon default in complying with this notice, the Company to be subjected to a fine of \$25. per day for each day they shall remain in default thereafter.

RESULTS OF THE COMMISSION'S WORK.

The Electrical Commission, by virtue of Ordinance No. 107, organized on the 21st day of September 1898, by the election of the Mayor as Chairman and the City Register as Secretary. Construction work was begun in the Spring of 1899, and before notices could be served upon the Companies to remove their wires, it was necessary that a certain proportion of the system should be constructed. A large amount of work was completed in 1900, and made ready for occupancy, and from time to time legal notices were served upon various companies to remove their wires and put them underground. Very early in the effort to remove wires, it was discovered that the limit of time which was allowed by ordinance No. 106, namely 150 days, was inadequate to enable the Companies to readjust their systems to conform with the law. Considerable delay naturally resulted from this fact, but in spite of the delays, by 1901 considerable cables had been pulled into the municipal conduits, considerable wire had been removed from the streets, and some poles (about 135) removed from the streets in the down-town section. At this date, there is no Company in the city which is not working, with more or less vigor, in getting its cables into the City conduits, and removing wires and poles from the streets. The following companies have practically completed work under the several notices sent them to this date:

Maryland Telephone & Telegraph Company,
Postal Telegraph-Cable Company,
Western Union Telegraph Company,
B. & O. R. R. Co., Electric Light Service,
B. & O. R. R. Co., Telegraph Service,
United Railways & Electric Company.

The two remaining Companies, the Chesapeake & Potomac Telephone Company

and the United Electric Light & Power Company are now at work upon their systems getting them into the City conduits. The delay with reference to the Chesapeake & Potomac Telephone Company resulted from the fact that an appeal to the Courts had been necessary in order to establish the legal relation existing between the Chesapeake & Potomac Telephone Company and the City. As a result of this litigation, the Chesapeake & Potomac Telephone Company has entered into a contract by virtue of which it will remove all its poles and wires from the down-town district, and for this purpose, will use in part its own conduits, and in part the conduits belonging to the City. Work is now progressing, and it is expected that by the end of the present year, the Chesapeake & Potomac Telephone Company will have removed all of its remaining poles and wires in the congested section of the City.

In the case of the United Electric Light & Power Company, the removal of their overhead wires has made it necessary to practically re-construct their distributing system, and this Company has taken advantage of the situation to re-design its power equipment, and they are now adding new machinery in their Central operating station on Pratt Street, and are constructing a sub-station in Little Sharp Street. This construction is not solely due to the notices which have been served upon that Company by the Electrical Commission, as the primary consideration has been the concentration of their power in one station, eliminating the present uneconomical method of operating three separate and distinct power stations.

The Electric Light Company, has, within the past year, in the business section of the City, put all of its arc light wires, or the wires which serve the street lights under contract with the City, underground. This has removed, in a large measure, a very dangerous class of wires from the streets, as these arc lighting wires are operated at a very high voltage, dangerous to life.

The congested section of the City, as outlined by the Commission, embraces that territory within the bounds of Saratoga, Pratt, Eutaw and Gay Streets. The ordinance under which this Commission derives its general authority, that is No. 107, prohibits any wires crossing over any

street or alley from house to house. This made it necessary to provide means whereby the commercial service of electric light and power, telephone and telegraph could be made accessible to buildings without the necessity of any overhead wires. In order to provide such accommodations, a distributing system has been built within the congested district, and services have been built into each building within the section, where services now are, or which were sufficiently important to warrant making the connection. Therefore, when the work of the various companies, under notices served upon them by the Commission, has been completed, there will be no reason for the retention of any pole or overhead wire within this district. All service of this character will be underground, in the same general manner as are water and gas services now.

This underground distributing system was limited to the territory above mentioned, for the reason that it was found that such a method of distribution would not be economical, except in places where the services to be connected were very close together. In other words, in residential sections of the City, it would not be an economical construction, where there may be only three or four services to each block, while the general distributing conduit would have to be built for such residential sections in exactly the same manner that it would be built for a more congested section. The plan, therefore, which has been discussed, from time to time by the Commission, and which presents itself as being the most feasible method for distribution in outlying territory, is by means of poles set in alleys. Branch conduits will carry the cable to such poles, and the wires to the houses will be distributed from such poles. This will enable the Commission with its present resources, to cover all the important sections of the City with a general system of necessary conduits, and require the removals of poles from streets and thoroughfares, having such poles set in the alleys, with lateral connections from the main conduits to such poles. This method of distribution is well established in the larger cities of the Country, and is so well considered, that the poles in the alleys are not considered as obstructions, but such method of distribution is recognized as a standard for such work.

PROSPECTIVE RETURNS FROM THE CONDUITS.

Ordinance No. 107 required the Electrical Commission to establish reasonable rentals for the use of the conduits, and that these rentals must be approved by the Mayor and City Council. Such has been done, and the existing rentals were approved by Ordinance No. 81, approved December 17th 1900. Rental charges vary from 7 cents a foot for 5000 feet or under to 5 cents per foot for 100,000 feet or over. The calculation of rentals has been based (first) upon the average cost per duct foot, assuming a certain percentage of average occupation of the ducts - that is, that all of the ducts will not be occupied all of the time, and the actual cost of one duct foot is increased in proportion as the amount of duct feet used decreases from the total number. With this cost price as datum, and considering the fixed charges, such as interest, sinking fund provision, as well as the expense of maintaining and operating the system, the above rates have been arrived at.

THE PRESENT REVENUE.

Nearly all of the conduit at present occupied by cables is located in the congested district, which comprises but a small proportion of the total extent of the conduit system. There are at present 504,720.5 feet of cable in the conduits. Of this amount 33,143.93 feet belong to the City, and for which no actual revenue is paid. This leaves a total of 471,576.57 feet, which produce about \$23,500. per year. At the end of the present year, when the cables already under installation by the United Electric Light & Power Company and the Chesapeake & Potomac Telephone Company are completed, the revenue derived from the congested district will be sufficient to pay the interest on the entire cost of the system. Extensions in outlying territory should be made as speedily as is consistent with the burdens imposed upon the various companies, that is, if the entire work were imposed on the companies all at one time, it is doubtful if they could stand the obligation without embarrassment.

ELECTRICAL COMMISSION.

Permanent Establishment
of the
Organization.

All methods and operations are to continue in force except as they may be changed by this scheme of re-organization.

The sub-division of this Commission's work are to be as follows:

- FIRST: Operating & Maintenance,
- SECOND: Engineering,
- THIRD: Construction.

OPERATING AND MAINTENANCE:

The work of this branch shall continue as heretofore under the charge of the Chief Cable Inspector.

ENGINEERING:

This branch shall be defined as having to do with the drafting of plans, the laying out of the work, determination of an Engineering character during the progress of the work as to changes in the plans &c., the collection and recording of data.

The operations of this branch shall come under one or

more Assistant Engineers, as may be deemed necessary by the Chief Engineer. The operation of the Drafting Room and corps of Linemen shall continue as heretofore with such changes in their duties as may be involved in this re-organization.

CONSTRUCTION:

This branch of the work is defined as all the operations of this Commission in executing the plans, and it shall be solely under the authority of the General Superintendent of Construction who shall report and be directly responsible to the Chief Engineer except in such particulars as the Chief Engineer may be represented by an Assistant Engineer on the work, in which case the authority of such Assistant Engineer will be limited to the engineering details by direct arrangement with the General Superintendent, or with his knowledge; in no case shall an Assistant Engineer or other employe engaged in the engineering branch of the work have any authority over, or issue any independent instructions to any of the subordinates to the General Superintendent.

The work under construction shall be classed in five (5) general divisions according to the character of the construction,

- FIRST: Trunk,
- SECOND: Service and Distribution,
- THIRD: Service and Distribution, (Type-b)
- FOURTH: Lateral.

Trunk conduit shall be defined in the same manner as heretofore

Service & Distribution conduit is the house to house service and distribution of the standard construction where electric light and power distribution is by direct current.

Service & Distribution (Type-B) conduit consists of the underground service and distribution arranged for electric light and distribution by alternating current where transformer manholes are used and whether with or without the addition of extra ducts underneath.

Lateral conduits include the conduit connections of any delected number of ducts connecting distributing lines with trunk conduits, and shall include all the items of construction formerly known as "special", regardless of their use.

To define the "Lateral Construction" more closely it shall include in addition to the standard lateral conduits, connections made for the Police and Fire Alarm Telegraph, arc lamps, trolley poles and terminal poles.

The above four divisions of construction are to embrace all conduit constructed that add duct feet to the system.

REPAIRS AND MAINTENANCE:

All work called upon to be done by construction other than that which adds duct feet to the system, such for example as ordinary repairs, re-placing &c. &c.

There will, therefore, be five (5) general divisions of construction.

CONSTRUCTION ORDERS:

The Superintendent's orders for work shall, when issued, be stamped with the name of one of the above five (5) divisions according to the class within which it falls.

CONDUCT OF THE OFFICE AND METHOD
OF CHARGING ACCOUNTS
TO BE
EMPLOYED.

The operations of the office shall be incharge of the Chief Clerk; the operations to continue as heretofore with the addition of the General Store-keeper.

In connection with the duties of the Store-keeper already outlined, in so far as it relates to the checking of the materials outside of the office, the clerical operations shall be as follows:

All requisitions of purchases of any description, embracing in addition to construction materials, all supplies used in the operations of the Commission, originate by requisition of either.

- (a) The Chief Engineer, or an Assistant Engineer with his approval,
- (b) The General Superintendent, or the Material Man, with his approval,
- (c) Chief Cable Inspector,
- (d) Chief Clerk,
- (e) Chief Draftsman.

All requisitions shall come through or be directly approved by one of these sources.

These requisitions shall be made on the Store-keeper and the Chief Clerk shall secure the necessary quotations and arrange for the deliveries. When the materials or supplies are delivered to the party making the requisition, he shall receipt therefor to the Store-keeper either directly or through an Assistant Store-keeper at the place of storage.

All of these sheets shall be certified by the Store-keeper to the book-keeper through the Chief Clerk.

The formal written orders for materials shall contain a definite description of the quantity and character of materials together with the agreed upon time of delivery and the price, and these orders shall be drawn out by the Chief Clerk as they may be certified to him by the Store-keeper.

The Store-keeper shall keep a current inventory of all material ordered which shall show both the quantity and price of material purchased and received. This running inventory shall be so arranged that the stock on hand may be taken off daily.

REPORT OF MOTOR VEHICLE ACCIDENT, COLLISION, FIRE, ETC.

To be made in triplicate immediately after accidents, collisions, fires, etc.
Two copies to be sent to City Comptroller.
One copy to be retained by Municipal Garage.

MAYOR AND CITY COUNCIL OF BALTIMORE. MUNICIPAL GARAGE.

Baltimore, Md., _____ 19__

Insurance Policy No. Name of Insurance Co.
City Department using motor vehicle.....
Make of motor vehicle..... Factory No..... Horse power..... Requisition No.....
Date of Accident..... 19....., at..... o'clock..... M.
Location of Accident.....



(Please fill in names of streets nearby and mark spot at which accident happened.)

Names of Occupants of Motor Vehicle:

Addresses:

.....
.....
.....

Names of Other Witnesses:

Addresses:

.....
.....
.....

Damage to vehicle or other property.....
.....

Injured Persons' Names:

Addresses:

.....
.....
.....

Was injured person careless or intoxicated when accident occurred?.....

What statement was made by injured person and to whom?.....

How many lights were maintained?..... Were any barricades put up?.....

How many?..... What were their locations?.....

Rate of speed at time of accident.....

If doctor was called, give name..... Address.....

What is the name of the Police Officer stationed in this vicinity?.....

of the..... Police District.

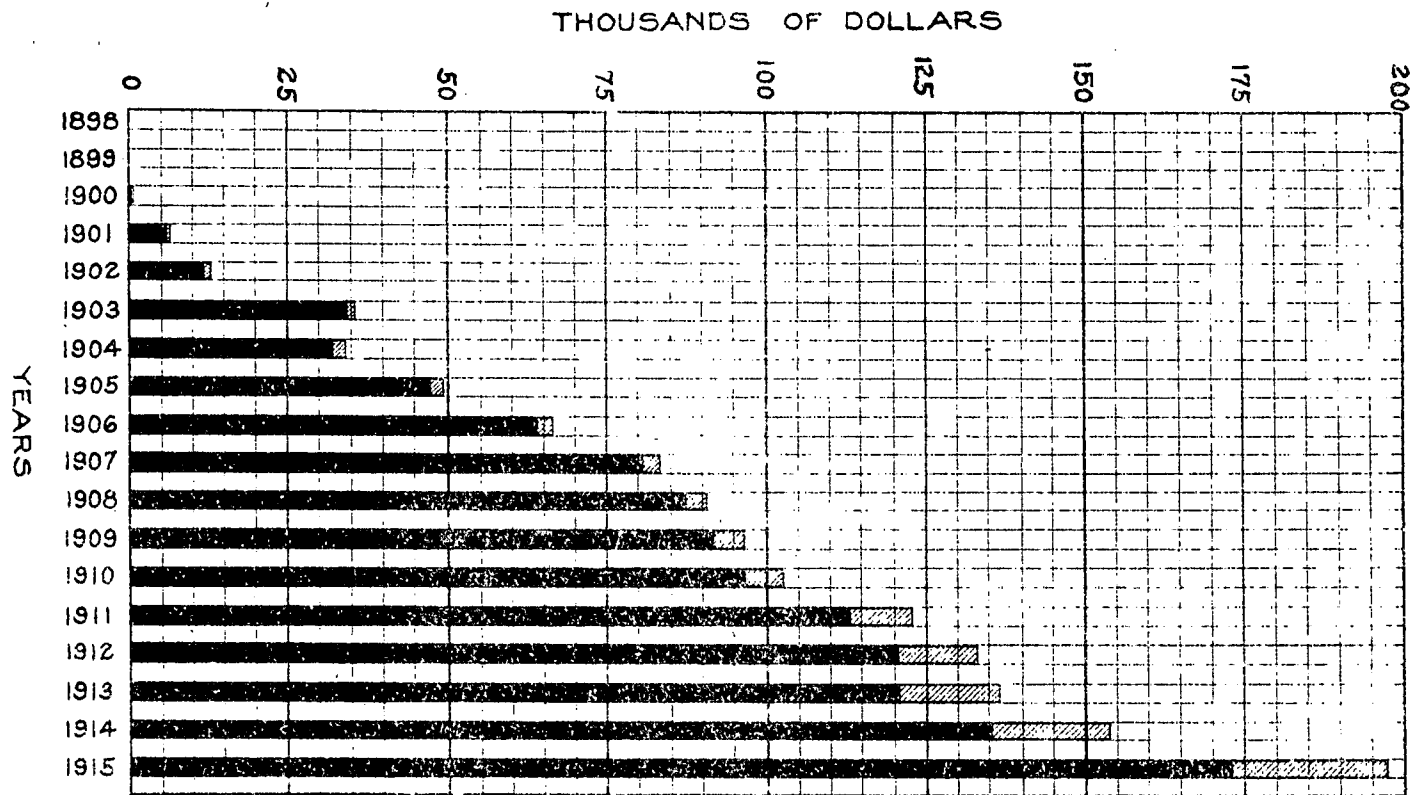
At what hour did he pass the point last preceding accident?.....

Give all other information regarding the accident. If this space is not sufficient, write on back of form.

.....
.....
.....
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.....
.....

.....
Signature of Chauffeur in Charge at time of accident.

License No.....



REVENUE FROM DUCT RENTAL

~ KEY ~

- UNPRODUCTIVE (CITY DEPT'S., ETC)
- PRODUCTIVE

6. Contents--continued of commitment, case number; case history includes facts for identification and reference, record of case from Social Service Exchange; summary of case; history of case from case worker or (cont. on line 12)
7. Arrangement Alphabetically by name of child.
(Chronologically--by what? Numerically--by what? Alphabetically--by what?)
8. Indexing None.
(Self-contained--describe what it shows. If separate, fill out a form for it, and place cross reference here to that form by title and identification number)
9. Writing Handwritten on printed form; typed on printed form; typed on plain paper;
(Handwritten. Handwritten printed form. Handwritten printed head. Typed. Typed printed form. Typed printed head. Printed. Photostat. Other. Give months and years covered by each kind of writing)
10. Size of drawer 11 1/2" x 15" x 24" 1087 Cases.
(Of record or container. Height, width, thickness or depth. Average number of pages or documents)
Average 9 documents per folder.
11. Location by dates and quantities 1935 to date, 9 drawers on east wall in room # 302.
(Room, vault, wall--N.E.S.W., section, bin, shelf, cabinet, on floor)
12. Other information Records and containers in excellent condition.
(Condition of record if not good. Relation to other records.)
Continued from line 6 ~~~~~ from other source;
Information on prior, subsequent, or similar records. Whether record is known
Verification of birth, marriage or death;
to have been kept earlier than dates shown in item 2)
Psychiatric report; medical record; school reports from Educational Departments; Baptismal Certificate report.
~~17. (For use in Reports) Early documents~~ (Author) (Publisher)

Note: 7 drawers shown on addenda sheet #1
(Place of publication) (Date of publication)
contain Baltimore City Cases; 2 drawers shown

on addenda sheet