## STATE OF NEBRASKA

WHEN THIS COPY CARRIES THE RAISED SEAL OF THE NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES, IT CERTIFIES THE BELOW TO BE A TRUE COPY OF THE ORIGINAL RECORD ON FILE WITH THE NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES, VITAL RECORDS OFFICE, WHICH IS THE LEGAL DEPOSITORY FOR VITAL RECORDS.

DATE OF ISSUANCE

MAR 2 7 2012

LINCOLN, NEBRASKA

Stanley J. COOPER STANLEY SCOOPER ASSISTANT STATE REGISTRAR DEPARTMENT OF HEALTH AND HUMAN SERVICES

PLACE OF BIRTH	NEBRASKA STATE DEPARTMENT OF HEALTH
County of Plaice	BUREAU OF VITAL STATISTICS
Township of St Remard 2 362 CERTIFICATE OF BIRTH	
Village of Twasay,	Registered Na
City of (No.	St.; Ward)
FULL NAME OF CHILD an Thomy Francis Will is not yet named, make supplemental report, as directed.	
Sex of Twin, Triplet Number in order / Data of / 1.4	
Child or Other? of birth (To be answered only in event of plural birth	moto (14 10)
FATHER	MOTHER
NAME antone Diederich	MAIDEN Sophia. Tresser
RESIDENCE / mi W. of Indray.	RESIDENCE / mi W. of Lindsey
COLOR AGE AT LAST 29 BIRTHDAY 29 Years	COLOR COLOR AGE AT LAST 29 BIRTHDAY Years
BIRTHPLACE St Bernard, Neb.	BIRTHPLACE Kumphrey, Net,
OCCUPATION Granuer	OCCUPATION House wrife
Number of children born to this mother, including present birth	Number of children of this mother now living
CERTIFICATE OF ATTENDING PHYSICIAN*	
I hereby certify that I attended the birth of this child, who was alive on the date above stated.  (Born Alive or Stillborn)  at 1. M.	
then the father, householder, etc., should	
make this return. A still-born child is one that neither breathes nor shows other evi-	0 - 1
(dence of life after birth.) Address 2 monday, /Vel-	
Given name added from a supplemental report	
Was 2 per cent Nitrate of Silver instilled in each eye?	
Registrar Filed	, 19,21 J. H. Jasken Registrar