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(State or Country) Maiden Birth- Mother: NameElizabeth Eckhardt.placeIndiana (State or Country) Affidavit: I hereby declare upon oath that the above statements are true. Signature <u>1</u> from <u>Harry</u> Matrix Address 1204 E. Burlington (To be signed by referrant if possible) Subscribed and sworn to before me on NOV. 10, 19.54. My commission expires on 19.74. My commission expires on 19.74. Applicant—no not write below this line. Clerk of District Co ABSTRACT OF SUPPORTING EVIDENCE Date of Matrice On the Matried 1 The Mutual Life Insurance Co., of New York Oct. 30, 19 2 Certificate of Marriage - Keokuk Co., Ia. Sept. 20, 1 3 Information Concerning Registrant as Stated in Documents Dirth date or age Birthplace Name of Father Maiden Name of Mother 1 Aug. 9, 1880 Wellman, Ia. 2 2 6 years	(State or Country) Maiden Birth- Mother: Name_Elizabeth Eckhardt place_Indiana (State or Country) Affidavit: I hereby declare upon oath that the above statements are true. Signature from the fore upon oath that the above statements are true. Signature from the fore upon oath that the above statements are true. Signature from the fore upon oath that the above statements are true. Signature from the before me on NOV. 10, 19.54 My commission expires on	(State or Country) Maiden Birth- Mother: Name Elizabeth Eckhardt place Indiana (State or Country) Affidavit: I hereby declare upon oath that the above statements are true. Signature Arrow Herman Methods, Address, 1204 E. Burlington Mro be signed by referrant if possible Iowa City, Iowa Subscribed and sworn to before me on. NOV. 10, 19.54. My commission expires on 19. (SEAL) Applicant—no not write below this line. Clerk of District CC ABSTRACT OF SUPPORTING EVIDENCE Date of ginfil forth Name and kind of document, and by whom issued and signed was made 1 The Mutual Life Insurance Co., of New York Oct. 30, 19 (Seath of Marriage – Keokuk Co., Ia. Sept. 20, 1 3 Information Concerning Registrant as Stated in Documents Dirth date or age Birthplace Name of Father Maiden Name of Mother 1 Aug. 9, 1850 Wellman, Ia. 2 26 years 3 Additional information: Statement of Reviewing Official I hereby certify that no prior certificate has been found in the County or State Bureau of Vital Statists forth in the foregoing abstract. Signature Active Active Registrar and that documentary evidence has been seen and read which substantiates the facts forth in the foregoing abstract. Signature Active Registrar of Direct State Registrar)	D -41	Full	Cuet	oro Wotni	Birth-	9	harlen
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(State or Country) Affidavit: I hereby declare upon oath that the above statements are true. Signature <u>Jorden Herman</u> Methods Address 1204 F. Burlington (To be signed by referrant if possible) Iowa City, Iowa Subscribed and sworn to before me on <u>NOV</u> . 10, 19.54 My commission expires on <u>19</u> (SEAL) Applicant—no not write below this line. <u>Clerk of District Co</u> <u>ABSTRACT OF SUPPORTING EVIDENCE</u> Date of glad document Name and kind of document, and by whom issued and signed <u>Name and kind of document</u> , and by whom issued and signed <u>The Mutual Life Insurance Co., of New York Oct. 30, 19</u> Married <u>2</u> Certificate of Marriage - Keokuk Co., Ia. <u>Birth date or age</u> <u>Birthplace</u> Name of Father Maiden Name of Mother <u>1</u> Aug. 9, 1850 <u>2</u> 26 years	Affidavit: I hereby declare upon oath that the above statements are true. Signature. A direct the Address 1204 E. Burlington Aro be algoed by referrant if possible) Iowa City, Iowa Subscribed and sworn to before me on NOX. 10, 19.54 My commission expires on 19 (SEAL) Applicant—no not write below this line. Clerk of District C ABSTRACT OF SUPPORTING EVIDENCE Date of 2014 Name and kind of document, and by whom issued and signed The Mutual Life Insurance Co., of New York Oct. 30, 1 Certificate of Marriage – Keokuk Co., Is. Birth date or age Birthplace Name of Father Maiden Name of Mothe 1 Aug. 9, 1880 Wellman, Ia. 2 Cortify that no prior certificate has been found in the County or State Bureau of Vital Statis this registrant and that documentary evidence has been seen and read which substantiates the facts forth in the foregoing abstract. Signature County Registrart	Affidavit: I hereby declare upon oath that the above statements are true. Signature. J. France Statements and the statements are true. Subscribed and sworn to before me on. NOV. 10, 19.54 My commission expires on	Mat	Maiden	F14	abath Fak		Indian	e sum court mus
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Iowa, U.S., Births (series) 1880-1904, 1921-1944 and Delayed Births (series), 1856-1940

Record Index

Name:John Henry WetrichGender:MaleRace:WhiteResidence Age:Death Age:Death Age:9 Aug 1880Birth Date:9 Aug 1880Birth Place:Wellman, Washington,
lowa, USABurial Place:Gustave Wetrich
Elizabeth EckhardtCertificate Number:00-205813

Source Information

Record Url: https://www.ancestry.com/imageviewer/collections/61441/images/101713794_00820

Source Citation: State Historical Society of Iowa; Des Moines, Iowa; Title: Iowa Birth Records, 1888-1904

Source Information Ancestry.com. *Iowa, U.S., Births (series) 1880-1904, 1921-1944 and Delayed Births (series), 1856-1940* [database on-line]. Lehi, UT, USA: Ancestry.com Operations, Inc., 2017. Original data: Iowa Births, 1880-1904, 1921-1946. State Historical Society of Iowa, State Archives, Des Moines, Iowa.; Iowa Delayed Births, 1856-1940. State Historical Society of Iowa, States Archives, Des Moines, Iowa.