

GAS FORM 553

Serial No. 03-89-84

BIRTH CERTIFICATE OF AMERICAN SAMOA

Village LBJ TROPICAL MEDICAL CENTER Full Name of Child PAULINE GEBAUER

Sex FEMALE, Twin, Triplet or other? No, Number in order of birth: 1, Born at: Hospital XX, Date of Birth: NOV. 19, 1972

FATHER: PETER GEBAUER, Residence: NU'UULI, Race: POLYNESIAN, Age at last birthday: 20, Birthplace: PAGO PAGO, AM. SAMOA, Nationality: U.S. NATIONAL, Occupation: CLERK. MOTHER: ILIGANOA SOIALO GEBAUER, Residence: NU'UULI, Race: POLYNESIAN, Age at last birthday: 20, Birthplace: FUGALEI, W. SAMOA, Nationality: WESTERN SAMOAN, Occupation: HOUSEWIFE

Number of children born to this mother including present birth 1, Number of children of this mother now living 1

DO NOT WRITE IN THIS SPACE—For Registrar's Use Only:

RECEIVED TO BE TRULY COPY BY REGISTRAR OF VITAL STATISTICS GOVERNMENT OF AMERICAN SAMOA

I hereby certify that the foregoing information is true to the best of my knowledge and belief.

AFA M. TAITO, M.O. Person Attending Birth

Reviewed and accepted.

LOWELL M. WIESE, M.D. Public Health Officer DIRECTOR OF MEDICAL SERVICES

(ALL BLANKS MUST BE FILLED IN) RECEIVED Office of Vital Statistics

on 11-30-72 Signed 10:30 AM