Richard & Linda

1982 to1992



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Linda Rae Growing Up

284

STANDARD CERTIFICATE OF BIRTH
STATE OF VERMONT

State File No. 570
Registered No.

MARGIN RESERVED FOR BINDING

In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth, stated.

1. PLACE OF BIRTH:
(a) County ADDISON
(b) City or town MIDDLEBURY
(c) Name of hospital or institution: PORTER
(If not in hospital or institution give street number or location)
(d) Mother's stay before delivery:
In hospital or institution 1 Wk In this community none
(Specify whether years, months or days)

2. USUAL RESIDENCE OF MOTHER:
(a) State Vt
(b) County Addison
(c) City or town Monkton.
(d) Street No. (If rural give location)

3. Full name of child LINDA RAE COTA
4. Date of birth 11-8-47 (Month day year)
5. Sex Female
6. Twin or triplet if so—born 1st, 2nd, or 3rd
7. Weight at birth 7# 11 oz Number months of pregnancy 9
8. Legitimate Yes

FATHER OF CHILD
9. Full name Miles Edwin COTA
10. Color or race W 11. Age at time of this birth 30 yrs.
12. Birthplace Starksboro (City or town) (State or foreign country)
13. Usual occupation wood working
14. Industry or business

MOTHER OF CHILD
15. Full maiden name Meta Celinda Zeno
16. Color or race W 17. Age at time of this birth 25 yrs.
18. Birthplace BRISTOL VT (City or town) (State or foreign country)
19. Usual occupation housewife
20. Industry or business own home

21. Children born to this mother: 4
(a) How many other children of this mother are now living? 3
(b) How many other children were born alive but are now dead? 0
(c) How many children were born dead? 0

22. Mother's mailing address for registration notice:
Monkton
VT

23. (a) Pregnancy: Complications of none
Mother Rh neg. Father Rh+
(b) Labor: Complications of none
Induced? no
(c) Was there an operation for delivery? no (Yes or no) State all Operations none

(d) Did baby have any:
(1) Congenital malformation? no Describe
(2) Birth injury? no Describe
(e) Was silver nitrate solution used in the baby's eyes? Yes (Yes or no)
24. Was blood test done? Yes (Yes or no) Date 9-27-47 (Month) (Day) (Year)
(a) If not, give reason

25. I hereby certify that I attended the birth of this child who was born alive at the hour of 12 15 Am on the date above stated and that the information given is verified by Meta Cota (Signature of parent) related to the child as mother
26. Date received by local registrar Nov-17-1947
27. Registrar's signature H. L. Eastman
28. Date on which given name added by

Attendant's own signature Charles S. Parrie
M.D., ~~midwife, or other~~ Date signed 11-10-47
Address Bristol Vt

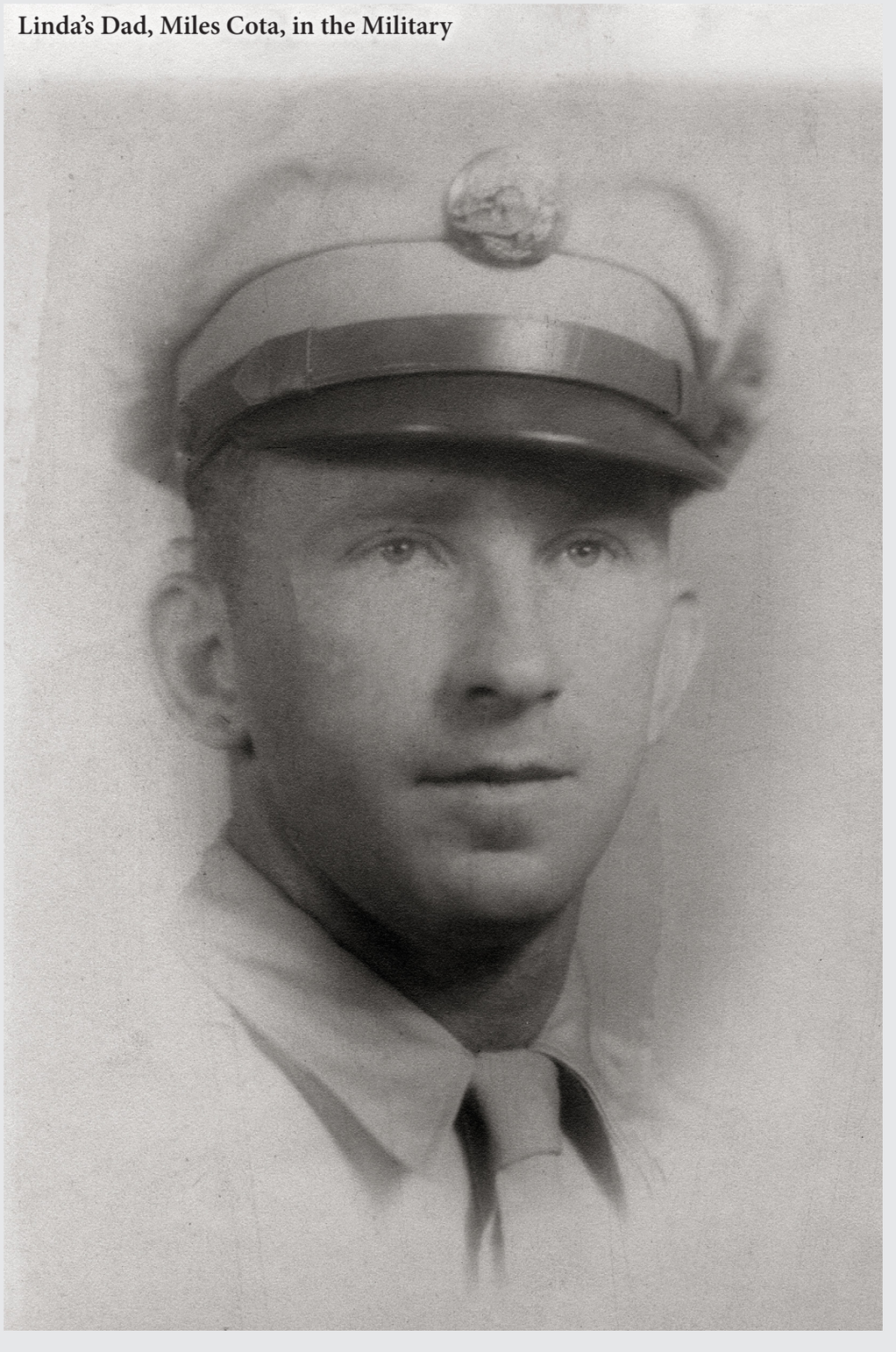
TOWN CLERK
MIDDLEBURY, VT.
A TRUE COPY, ATTEST:
JUL 20 1970
Kenneth W. Caul
TOWN CLERK

MONKTON

The Loyal Workers will meet Thursday with Mrs. Florence Shepard for a dinner.—There will be a military whist card party at the Kaolin hill schoolhouse Friday evening. Prizes will be awarded and refreshments served. Mrs. Altheda Todriff is hostess.—Mrs. Barrie Vrooman and infant daughter, Janice Elaine, returned Saturday from the Mary Fletcher Hospital to the home of her parents, Mr. and Mrs. L. V. Bushey.

Mr. and Mrs. Miles Cota are parents of a daughter, Linda Rae, born Nov. 8, in Porter Hospital, Middlebury.—Guests at the Whalley home Sunday were Elmer Whalley of Charlotte, D. N. Tower, Mrs. Grace Webster, Shelburne, Mr. and Mrs. Lawrence McCrea and sons of Burlington and Thomas

Linda's Dad, Miles Cota, in the Military





Linda Rae & Lawrence Zeno



Linda Rae & Lawrence Zeno

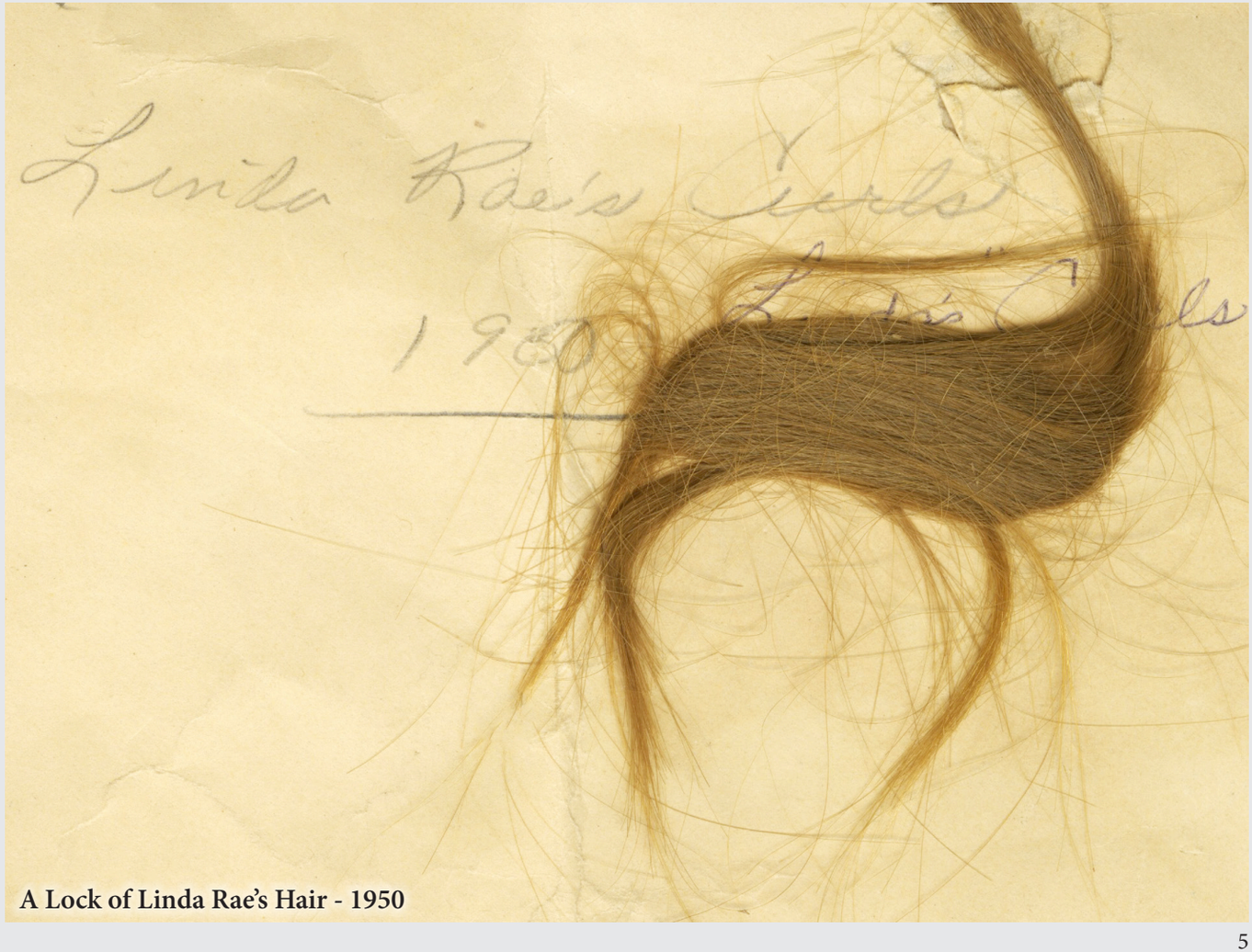


Linda Rae & Sarah Beth





Linda Rae - Summer 1950



A Lock of Linda Rae's Hair - 1950



Linda Rae - 1949



Linda Rae - 1950



Linda Rae - 1951











8th Grade Prom



8th Grade
School Picture


High School Graduation









Senior Prom







The Wedding - June 26, 1982



DH-PHS-9-78

LOCAL FILE NUMBER

STATE FILE NUMBER 21

VERMONT DEPARTMENT OF HEALTH

CERTIFICATE OF MARRIAGE

(DECLARATION OF INTENTION AND MARRIAGE CERTIFICATE)

TYPE, OR PRINT IN **PERMANENT INK** SEE HANDBOOK FOR INSTRUCTIONS

9.00

GROOM

NAME	FIRST	MIDDLE	LAST
1	Richard	Hunt	Farnham

MAILING ADDRESS	STREET OR R.F.D.	CITY/TOWN	STATE	ZIP
2	Box 149	Hinesburg,	Vermont	05461

RESIDENCE— STATE IN WHAT CITY OR TOWN DOES 3A GROOM ACTUALLY LIVE	COUNTY	CITY, TOWN
Vermont	3B Chittenden	3C Hinesburg

DATE OF BIRTH (Month, Day, Year)	FATHER—Name	MOTHER—Maiden Name
4A June 16, 1946	5A Willard B. Farnham	6A Phyllis H. Hunt
STATE OF BIRTH (If not in U.S.A. Name Country)	STATE OF BIRTH (If not in U.S.A. Name country)	STATE OF BIRTH (If not in U.S.A. Name Country)
4B Vermont	5B Vermont	6B Mass.

BRIDE

NAME	FIRST	MIDDLE	LAST	MAIDEN NAME—(If different)
7A	Linda	Rae	Wainer	7B Cota

MAILING ADDRESS	STREET OR R.F.D.	CITY/TOWN	STATE	ZIP
8	Box 149	Hinesburg	Vermont	05461

RESIDENCE— STATE IN WHAT CITY OR TOWN DOES 9A BRIDE ACTUALLY LIVE	COUNTY	CITY, TOWN
Vermont	9B Chittenden	9C Hinesburg

DATE OF BIRTH (Month, Day, Year)	FATHER—Name	MOTHER—Maiden Name
10A Nov. 8, 1947	11A Miles E. Cota	12A Meta C. Zeno
STATE OF BIRTH (If not in U.S.A. Name Country)	STATE OF BIRTH (If not in U.S.A. Name Country)	STATE OF BIRTH (If not in U.S.A. Name Country)
10B Vermont	11B Vermont	12B Vermont

APPLICANT

WE HEREBY CERTIFY THAT THE INFORMATION PROVIDED IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF AND THAT WE ARE FREE TO MARRY UNDER THE LAWS OF VERMONT.

APPLICANT—Signature	DATE SIGNED	APPLICANT—Signature	DATE SIGNED
13A Richard Farnham	13B 6/23/82	13C Linda Wainer	13D 6/23/82

CERTIFICATION:

I hereby certify that the above named persons have made oath to the truth of the facts stated in the foregoing declaration of intention of marriage and complied with the marriage laws of the State of Vermont. A medical certificate or waiver, as per 18 V.S.A. 5136-5137, is on file in this office.

DATE ON WHICH LICENSE WAS ISSUED
14A June 23, 1982

TOWN CLERK—Signature
14B Denise M Hlodak asst.

TOWN OR CITY
14C Hinesburg

OFFICIANT

This license authorizes the marriage IN VERMONT ONLY of above named parties by any person duly authorized to perform a marriage ceremony.

THIS LICENSE MUST BE USED ON OR BEFORE (Month, Day, Year)
14D valid 6/27/82

NOT GOOD AFTER THIS DATE
July 22, 1982

I CERTIFY THAT THE ABOVE PERSONS WERE MARRIED ON: (Month, Day, Year)	PLACE OF MARRIAGE (City or Town, County)
15A June 26 - 1982	15B Hinesburg — Chittenden
OFFICIANT—Signature 15C Michael H. Hart	DATE SIGNED (Month, Day, Year) 15D June 26, 1982
	RELIGIOUS OR CIVIL OFFICIAL (Specify) 15E Civil
CLERK'S SIGNATURE 16A Kay D Muller	DATE RECEIVED BY LOCAL OFFICIAL 16B July 27, 1982

TO BE SIGNED BY REGISTRAR ON COPY ONLY

TRUE COPY—Clerk Signature	TOWN	DATE
17A Attest: Denise M Hlodak asst.	17B HINESBURG	17C 7/1/84



























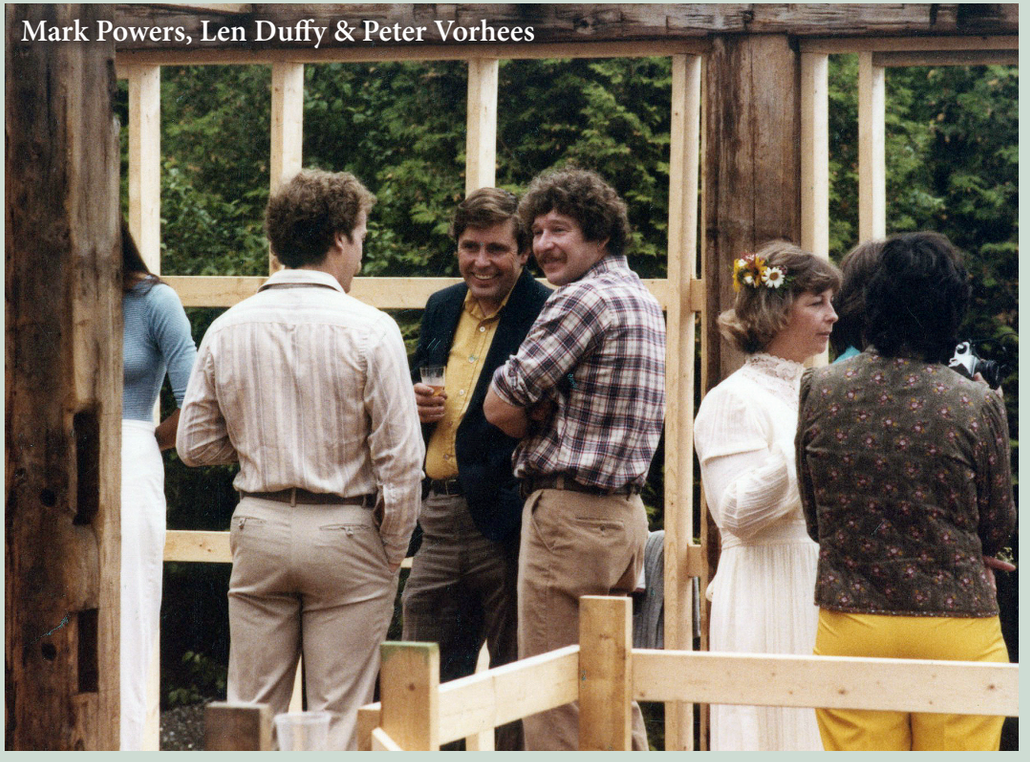
Rod Whittier & Alice Hyerstay



Denny & Lanny Cota



Vicky & Mark Powers,
Maya Zimmermann & Peter Vorhees



Mark Powers, Len Duffy & Peter Vorhees



Ed & Sandy Buturla



Rod Whittier

Len Duffy - Tony & Cecile Grassano





Kim & Denny Cota





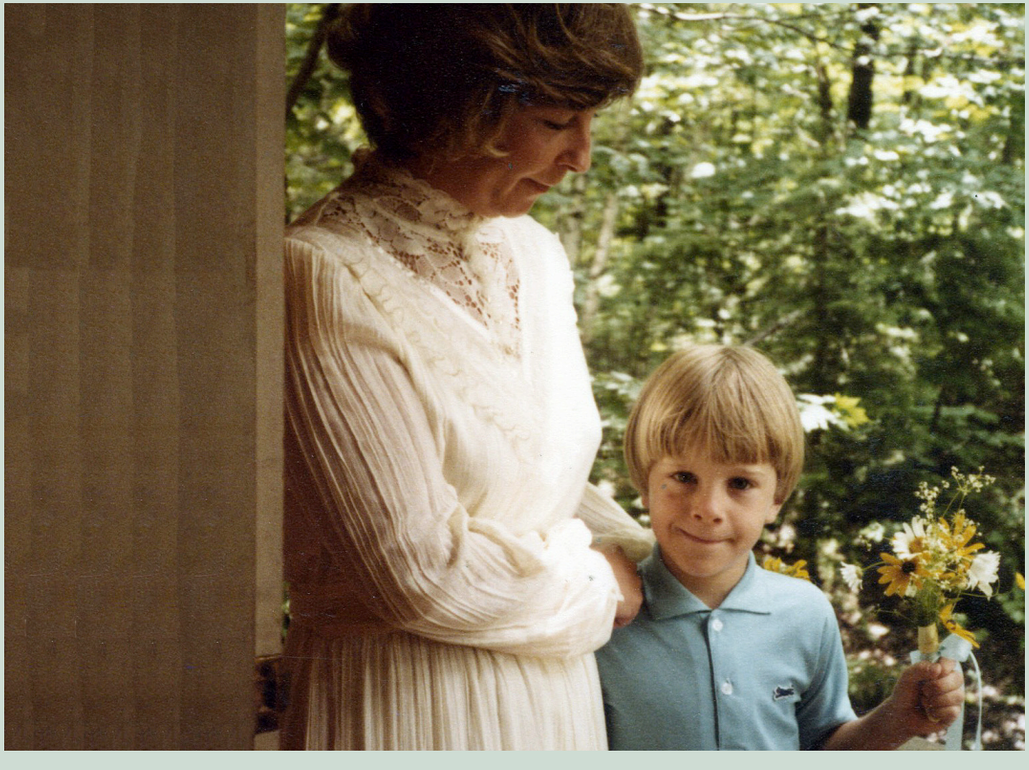
















Richard & Linda




In the Wainer House - 1982



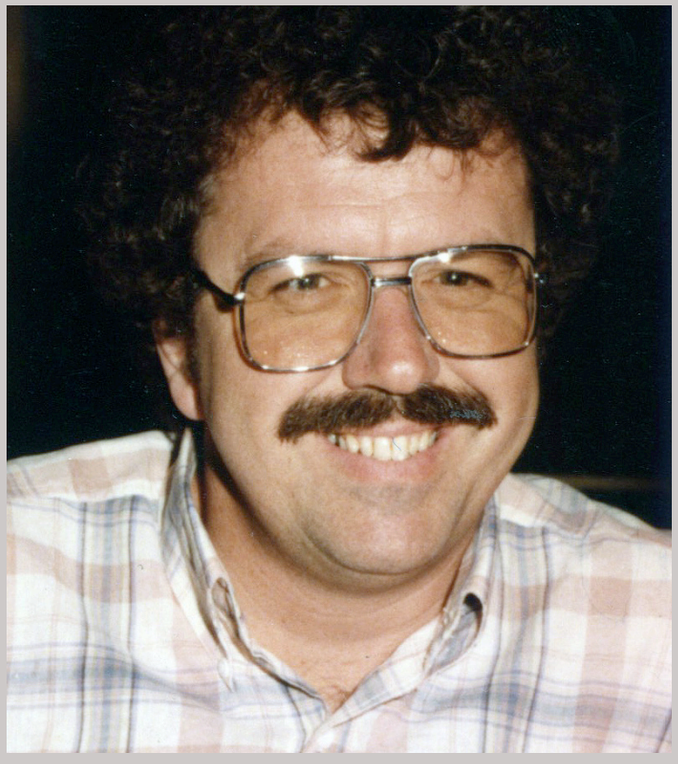









LOVE
makes
house
HOME






















Home from the Hospital with One Kidney

Very Sad News - The Cancer is Back



CERTIFICATION OF VITAL RECORD

NAME MEANT TO BE: Linda R Farnham

DH-PHS-DTH-89

STATE OF VERMONT

DEPARTMENT OF HEALTH

VERMONT CERTIFICATE OF DEATH

LOCAL FILE NUMBER — STATE FILE NUMBER

DECEDENT

1. DECEDENT'S NAME (First, Middle, Last): Linda Rae Farnham
2. SEX: Female
3. DATE OF DEATH (Month, Day, Year): December 6, 1991
4. SOCIAL SECURITY NUMBER: 009-38-2168
5a. AGE (Yrs.) — Last Birthday: 44
5b. UNDER 1 YEAR — Months / Days:
5c. UNDER 1 DAY — Hours / Minutes:
6. DATE OF BIRTH (Mo., Day, Yr.): November 8, 1947
7. BIRTHPLACE (City and State or Foreign Country): Middlebury, Vt.
8. PLACE OF DEATH (Check only one): HOSPITAL ☐ Inpatient ☐ ER/Outpatient ☐ DOA; OTHER ☐ Nursing Home ☒ Residence ☐ Other (Specify)
9. FACILITY NAME (If not institution, give street and number): Tucker Hill Road
10. CITY OR TOWN OF DEATH: Hinesburg, Vt.
11. VETERAN? (If so, what war?): NO
12. MARITAL STATUS — Married, Never Married, Widowed, Divorced (Specify): Married
13. SURVIVING SPOUSE (If wife, give maiden name): Richard H. Farnham
14. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of life. Do not use retired.): Cosmetologist
15. KIND OF BUSINESS / INDUSTRY: Cosmetology
16. DECEDENT'S EDUCATION (Specify only highest grade completed) — Elementary/Secondary (0-12): — College (1-4 or 5+): 1
17. WAS DECEDENT OF HISPANIC ORIGIN? (Specify No or Yes — If yes, specify Cuban, Mexican, Puerto Rican, etc.): ☒ No ☐ Yes (Specify)
18. RACE — White, Black, American Indian, etc. (Specify): White
19. RESIDENCE — STATE: Vt.
20. CITY, TOWN, OR LOCATION: Hinesburg
21. MAILING ADDRESS (Street, City or Town, State, Zip Code): PO Box 149, Hinesburg, Vt. 05461
22. FATHER'S NAME (First, Middle, Last): Miles Cota
23. MOTHER'S NAME (First, Middle, Maiden Surname): Meta Zeno
24a. INFORMANT'S NAME (Type/Print): Richard H. Farnham
24b. MAILING ADDRESS (Street, City, or Town, State, Zip Code): PO Box 149, Hinesburg, Vt. 05461

CAUSE OF DEATH (Type or Print)

25. **PART 1.** Enter the diseases, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line. — Approximate Interval Between Onset and Death

IMMEDIATE CAUSE (Final disease or condition resulting in death)
a. METASTATIC Renal Cell Carcinoma — 6 mo
DUE TO (OR AS A CONSEQUENCE OF):
b.
DUE TO (OR AS A CONSEQUENCE OF):
c.
DUE TO (OR AS A CONSEQUENCE OF):
d.

Sequentially list conditions, if any, leading to immediate cause. Enter **UNDERLYING CAUSE** (Disease or injury that initiated events resulting in death) **LAST**

PART 2. Other significant conditions contributing to death but not resulting in the underlying cause given in Part 1: None
26a. WAS AN AUTOPSY PERFORMED? (Yes or No): NO
26b. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? (Yes or No): N A
27a. MANNER OF DEATH: ☒ Natural ☐ Accident ☐ Suicide ☐ Homicide ☐ Undet ☐ Pending
27b. DATE OF INJURY (Month, Day, Year): N A
27c. HOUR: N/A
27d. HOW DID INJURY OCCUR? (Enter nature of injury in Part 1 or Part 2): N A
27e. INJURY AT WORK (Specify Yes or No): N A / NO
27f. PLACE OF INJURY (At Home, Farm, Factory, Street, Office Bldg., etc. (Specify)): None
27g. LOCATION (Street, or R.F.D. No. City or Town State): N B

CERTIFIER

TO THE BEST OF MY KNOWLEDGE, ON THE BASIS OF THE CASE HISTORY, EXAMINATION AND/OR INVESTIGATION, DEATH OCCURRED AT THE TIME, DATE AND PLACE AND DUE TO CAUSE(S) AND MANNER STATED. ☐ Staff phys. ☒ Attend. phys. ☐ Pathologist ☐ Med. Examiner
29a. DATE SIGNED (Mo., Day, Yr.): Dec 6 91
29b. HOUR OF DEATH: 8:40 AM
28a. (Signature): Paul B. Stanilonis M.D.
29c. PRONOUNCED DEAD ON (Date) (Time): Dec 6 91 8:45 AM
28b. NAME AND ADDRESS OF CERTIFIER (Type or Print): PAUL B. STANILONIS, Williston VERMONT
30. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)

DISPOSITION

31a. METHOD OF DISPOSITION: ☐ Temporary Storage ☒ Burial ☐ Cremation ☐ Removal from State ☐ Donation ☐ Other (Specify)
31b. PLACE OF TEMPORARY STORAGE (Cemetery, City or Town, State)
31c. PLACE OF FINAL DISPOSITION (Cemetery or Crematory, City or Town, State): Boro Cemetery, Monkton, Vt.
32a. SIGNATURE OF FUNERAL DIRECTOR OR AUTHORIZED PERSON: Thomas Senecal
32b. NAME AND ADDRESS OF FACILITY OR AUTHORIZED PERSON: Ready Funeral Home, Inc. 05401, 261 Shelburne Rd., Burlington, Vt.
33. DATE OF DISPOSITION (Month, Day, Year): 12/9/91
34a. REGISTRAR — Signature: Mary E. Zuber
34b. DATE RECEIVED BY LOCAL REGISTRAR (Month, Day, Year): 12/9/91

TO BE SIGNED BY REGISTRAR ON COPY ONLY

35a. TRUE COPY / ATTEST — Clerk Signature
35b. TOWN
35c. DATE (Month, Day, Year)

THIS IS A TRUE AND EXACT REPRODUCTION OF THE DOCUMENT OFFICIALLY REGISTERED AND PLACED ON FILE IN THIS OFFICE.

PLACE ISSUED: Hinesburg — ATTEST: Cynthia A. Durdak

DATE ISSUED: December 9, 1991

This copy not valid unless prepared on engraved border displaying State Seal.

American Bank Note Company — ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

The Kids

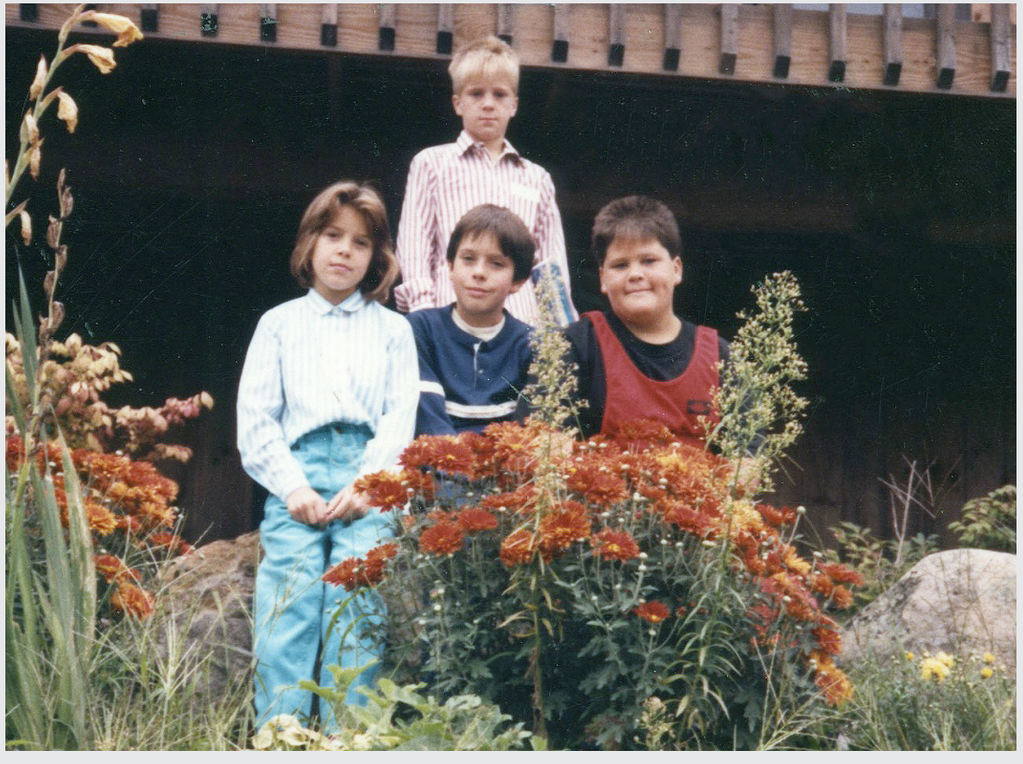



KEEWAYDIN










PATRIOTS
11













Todd


1989



1989


1986



Jason

















Jeremy

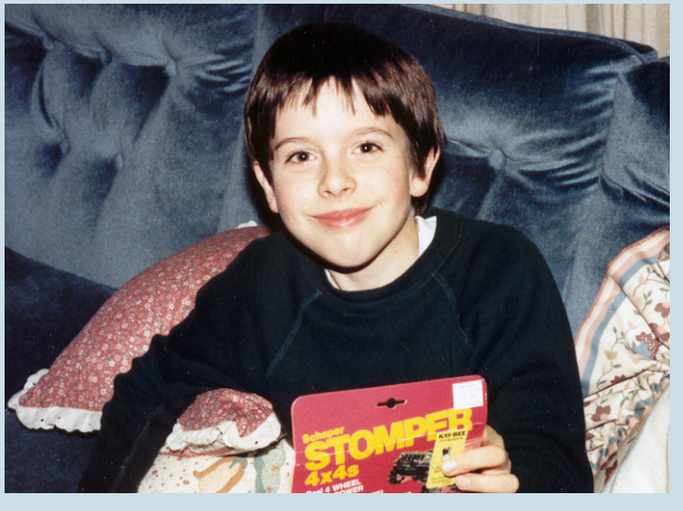














Jeffery















Jessica













The Animals



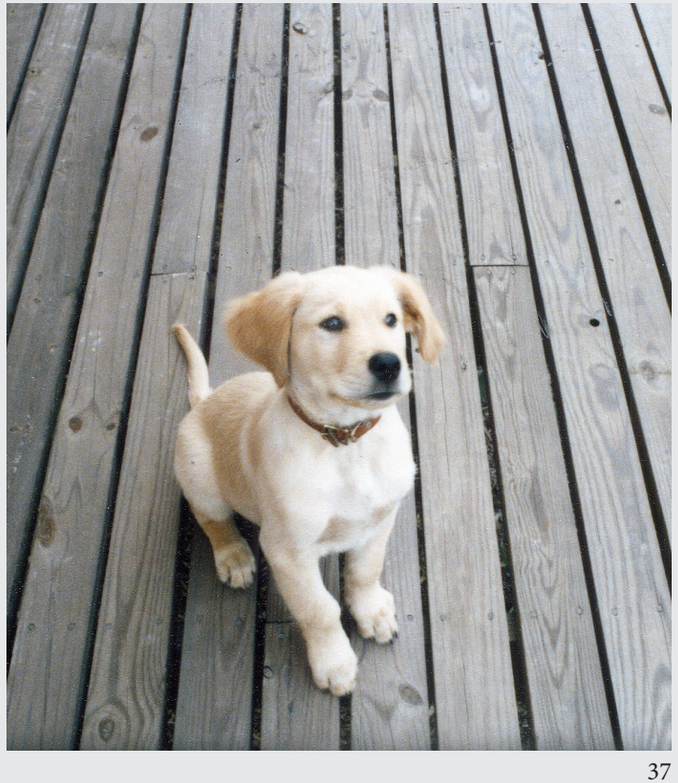
Welcome to the Family Beau



Beau Growing Up







Beau's All Grown Up



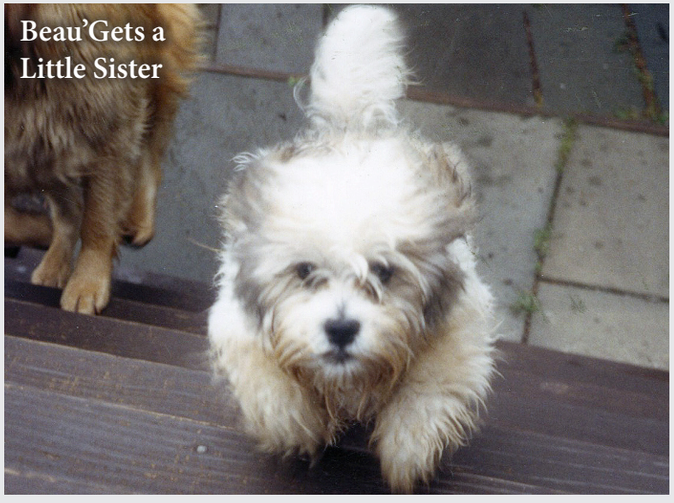








Beau'Gets a
Little Sister















Family & Friends



Jason, Meta Cota, Todd



Jo Bombard, Grandma Farnham, Jeremy

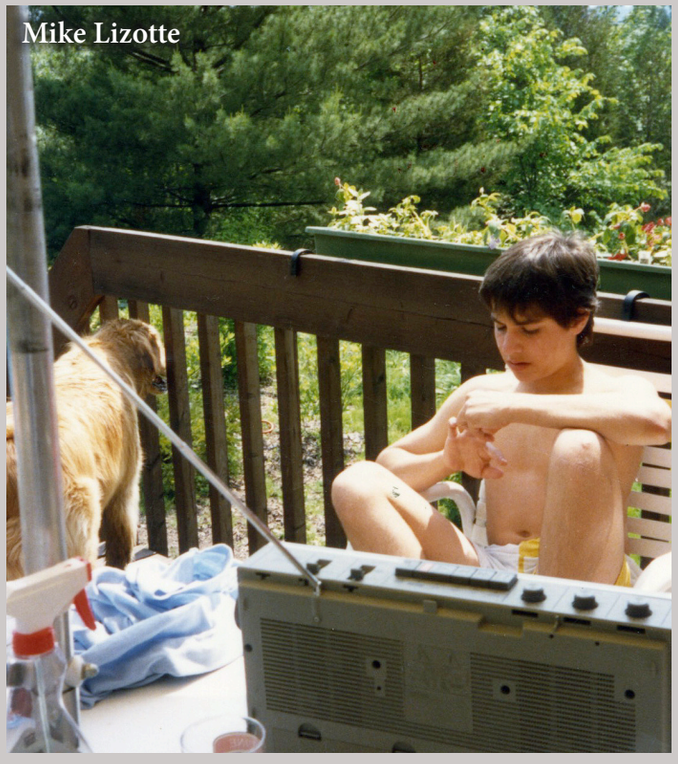


Denny Cota





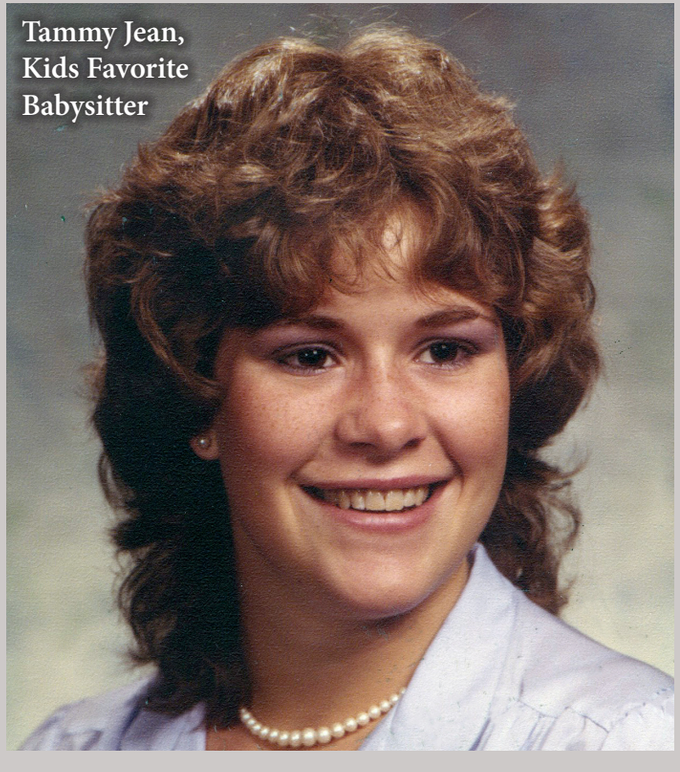
Megan Lizotte



Mike Lizotte



Mike Lizotte



Tammy Jean,
Kids Favorite
Babysitter



Jason & Friend



Jason & Friend



Emily & Doug Griswold, Jessica



Jeremy, Betty Rosenberg, Jessica



Alice & Dale Hyerstay, Some Other Folks, Jeremy & Richard



Best Friend, Joe Fallon

Living on Lake Iroquois

























Building the Hinesburg Barn



The Old Barn Comes Down







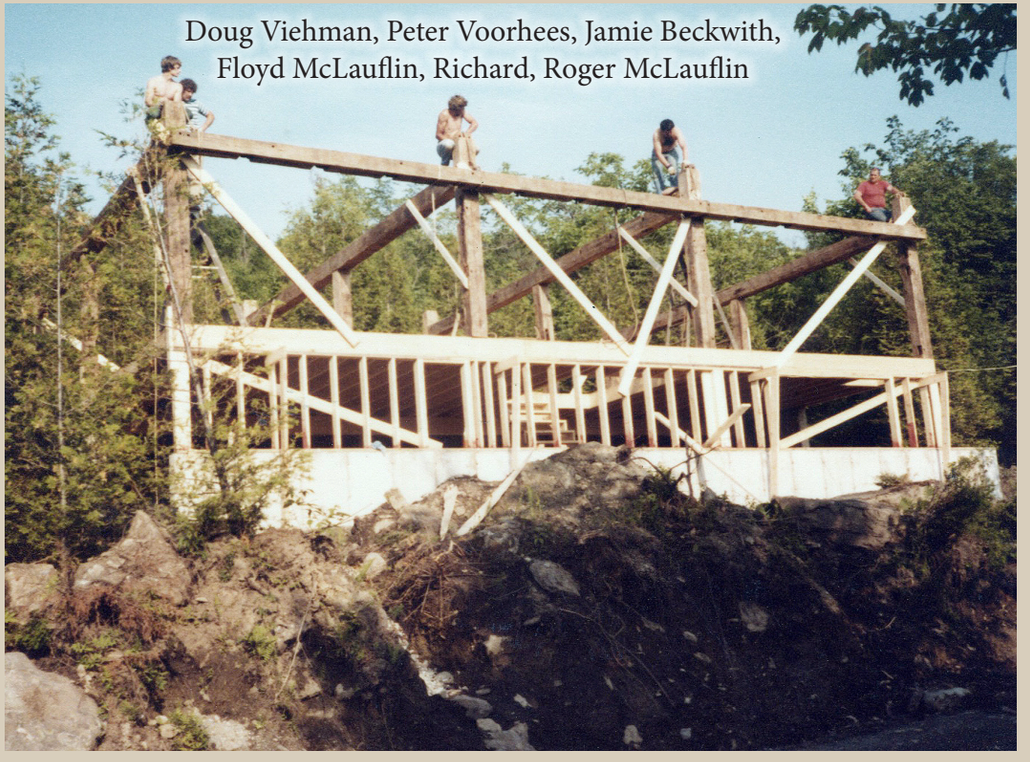




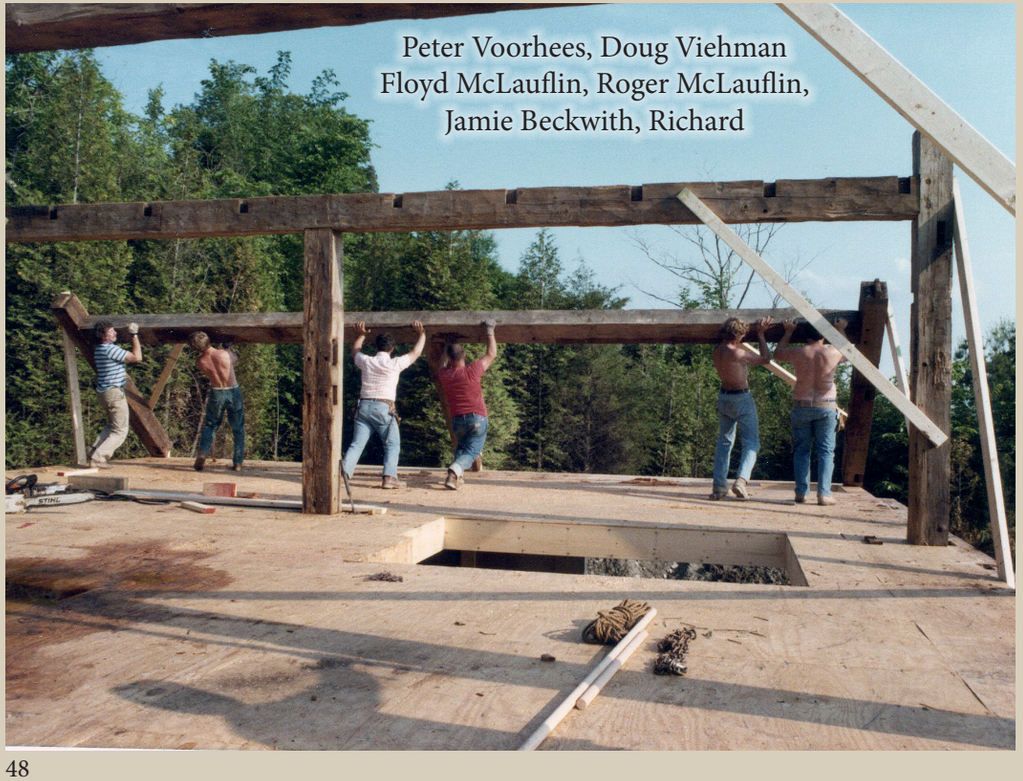


The New Barn Goes Up





Doug Viehman, Peter Voorhees, Jamie Beckwith,
Floyd McLauflin, Richard, Roger McLauflin



Peter Voorhees, Doug Viehman
Floyd McLauflin, Roger McLauflin,
Jamie Beckwith, Richard



Jeffrey, Jamie, Todd




















JEFF
11

Around the House














Out and About



Shelburne Museum

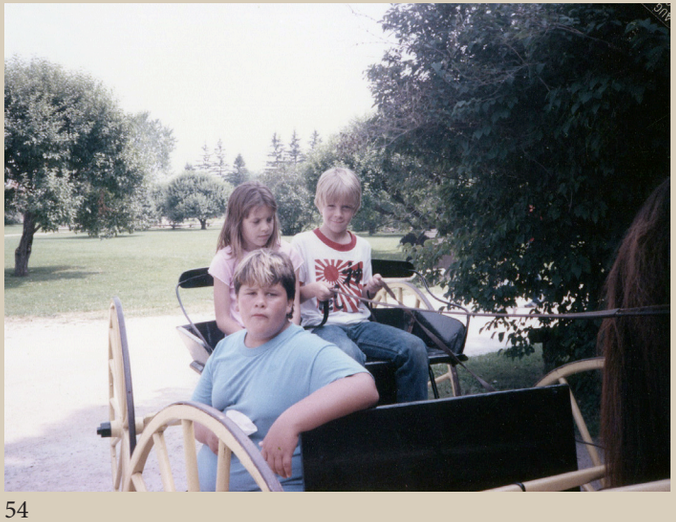














Hot Air Balooning















At Work


RICHARD FARNHAM
ASSOCIATES
CONTRACTORS
Farnham
Hyerstay
REAL ESTATE

The Hinesburg Office


Jamie Beckwith


Charlie Wood


Debbie Burton











Peter Voorhees, Cecile Grassano, Dana Hirth



The Salons









Sports and Events



Sports














BATELAND
19




12



Jessica at Camp Kiniya









Birthdays









Graduations


Jason, Jamie 8th Grade Graduation - Jeff & Sara Marshalls



Jason, Jamie 8th Grade Graduations



Jason, Jamie 8th Grade Graduations


Jason, Jamie 8th Grade Graduations



Jes 8th Grade Graduation



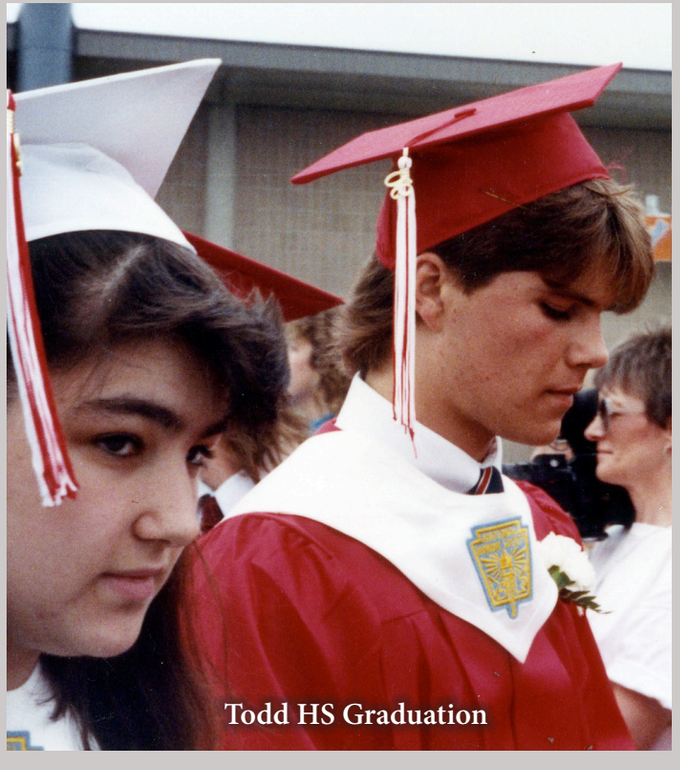
Jes 8th Grade Graduation



Jeff 8th Grade Graduation - Jes Marshall



Jeff 8th Grade Graduation

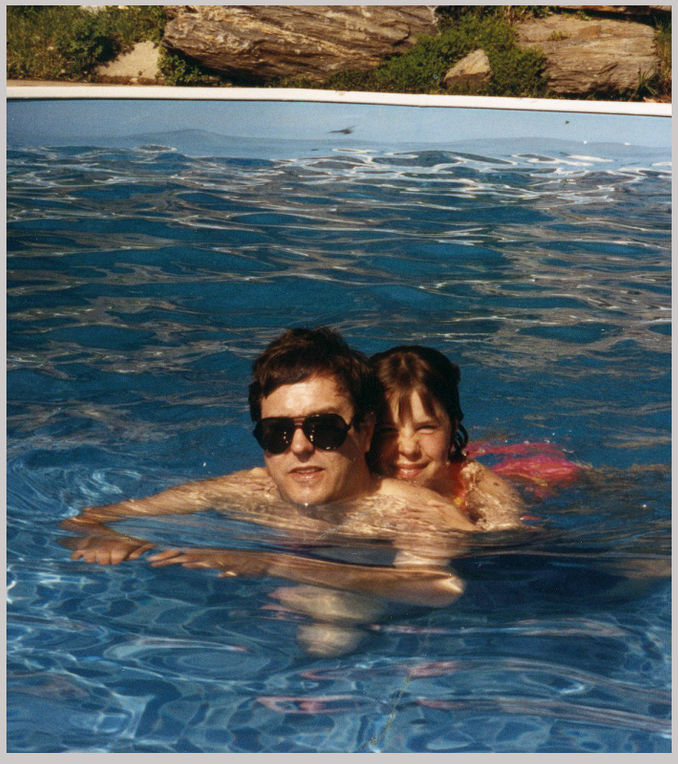


Todd HS Graduation

Real Estate Party - 1990













Christmas Over the Years



1983




















NOEL




VERN

1984











1985











1986



















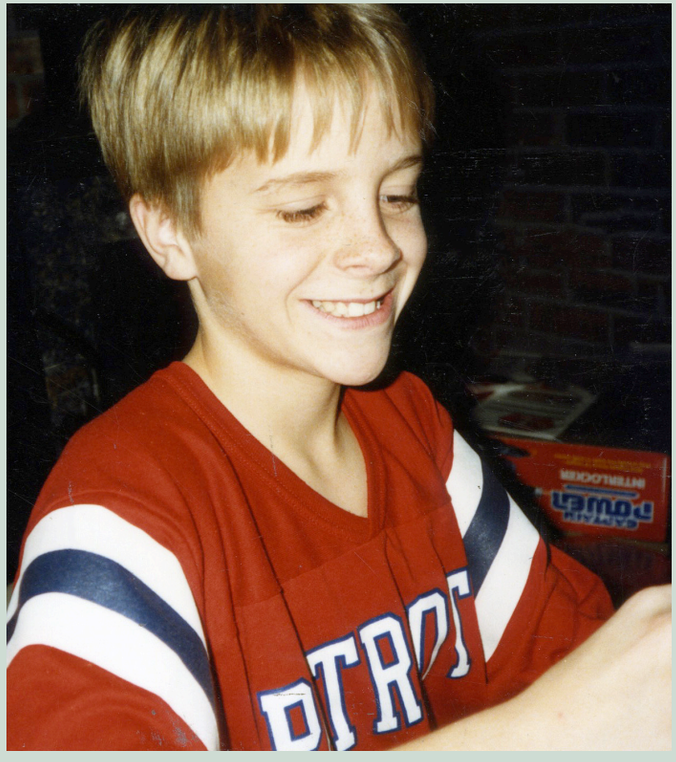



Bushnell
BINOCULAR

1987













1988

















1989















On Vacation



Song of America - 1983

















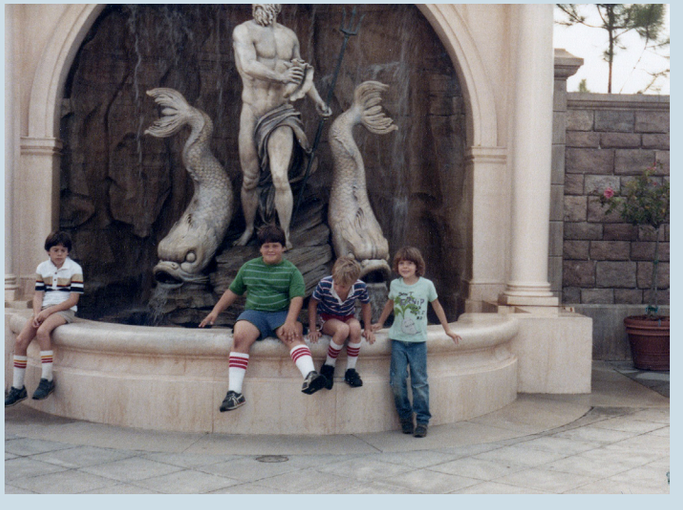
Florida - 1983







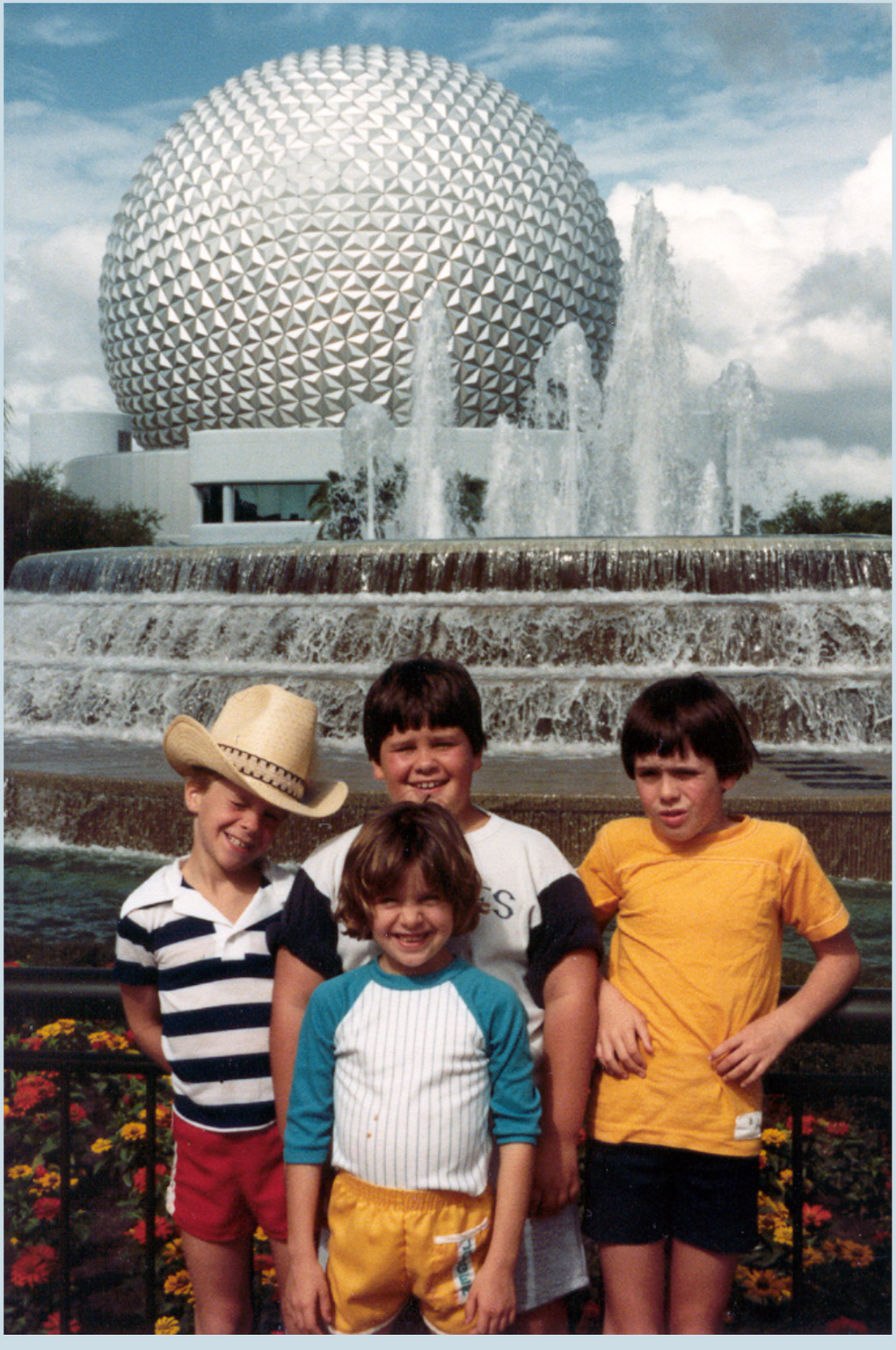













Sea World



St. Martin - 1983



















Saba - 1983






ISLAND TOURS
REASONABLE STORIES
S-76
UNSPOILED QUEEN












CABLE AND WIRELESS (WEST INDIES) LIMITED
PROVIDE AND MAINTAIN THIS SHELTER
FOR THE CONVENIENCE AND COMFORT
OF WHOMSOEVER MAY PASS THIS WAY

Mt Washington - 1983









Bermuda - 1984







EAA Trip - 1984

















Nashville 1985















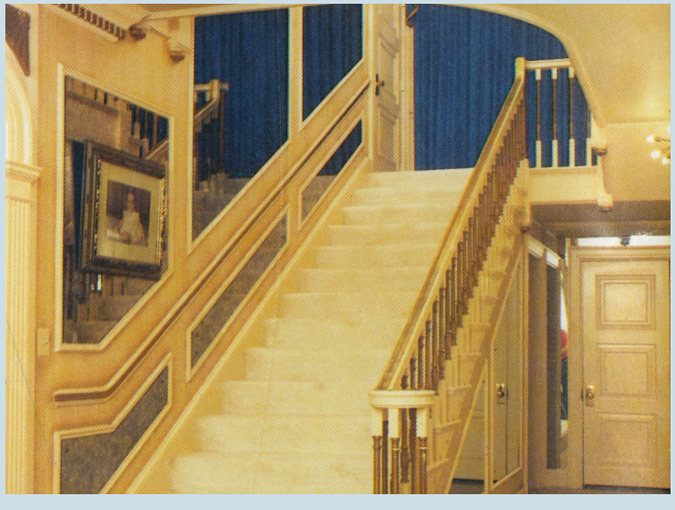
Memphis - 1985

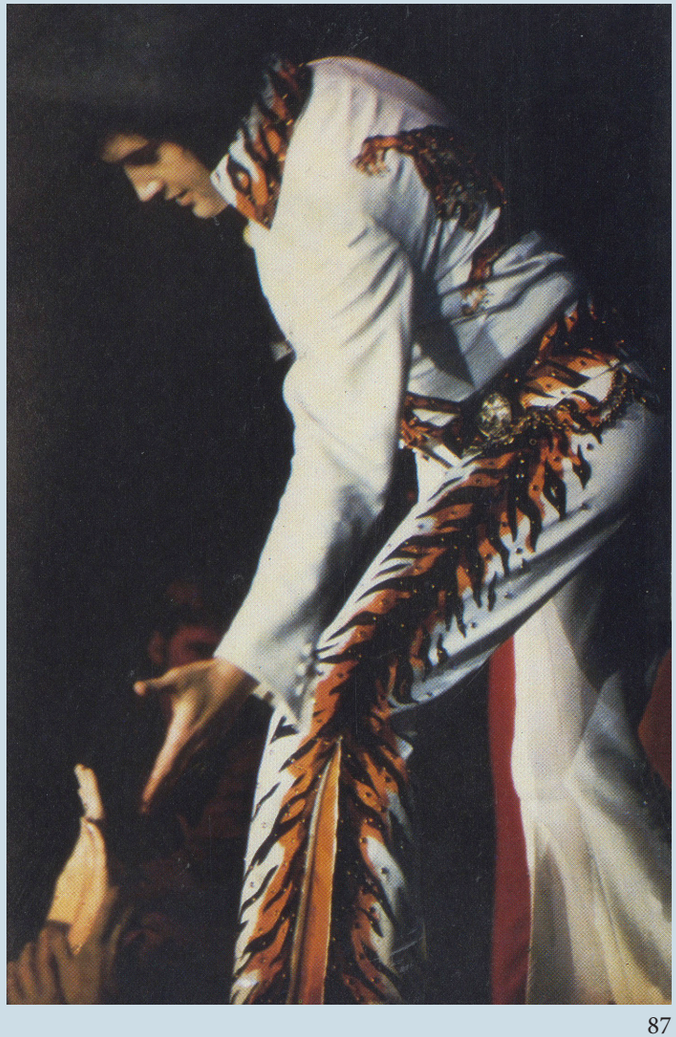
















SS Norway - 1985

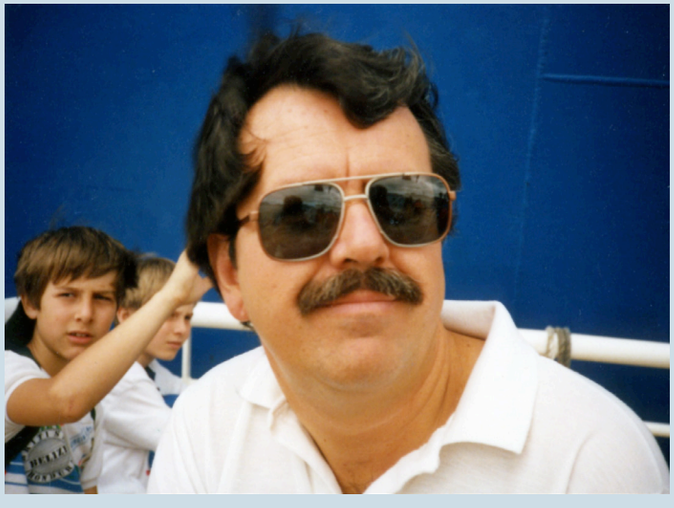


















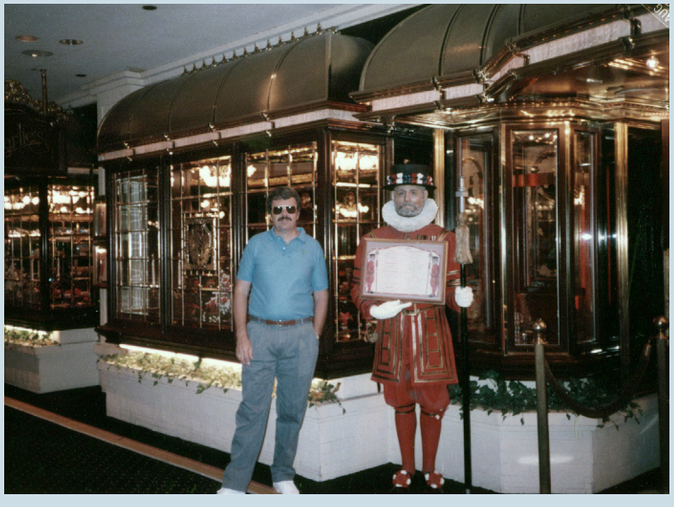
Atlantic City - 1986



Jim & Jeanette Warner















California - 1986







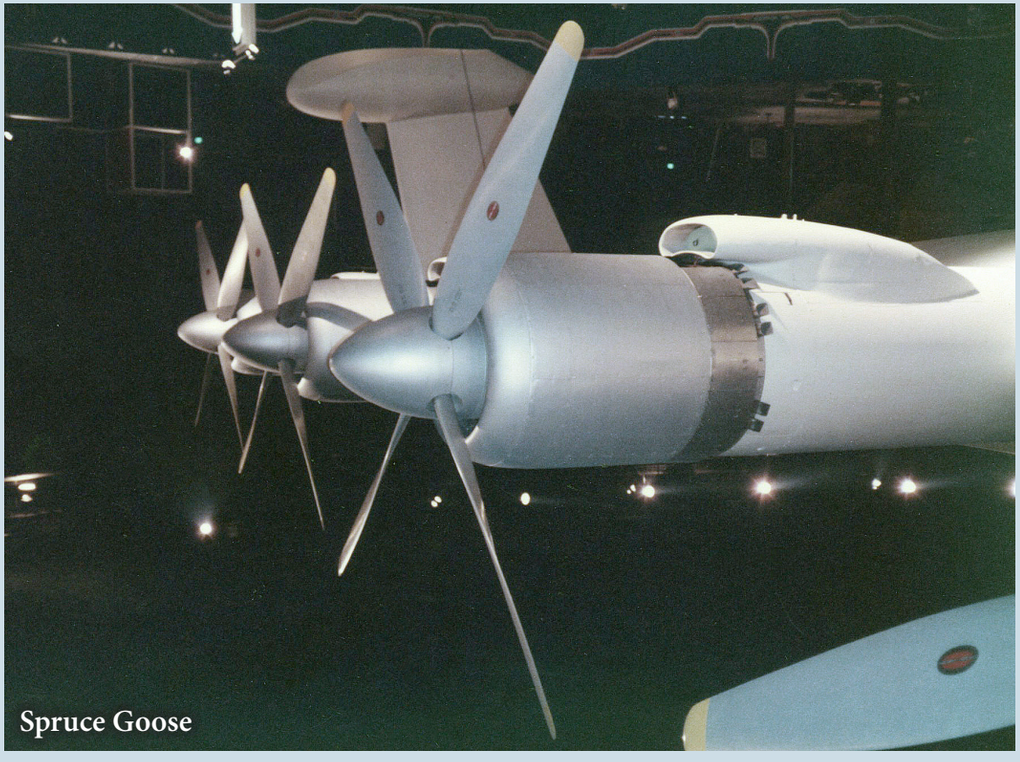




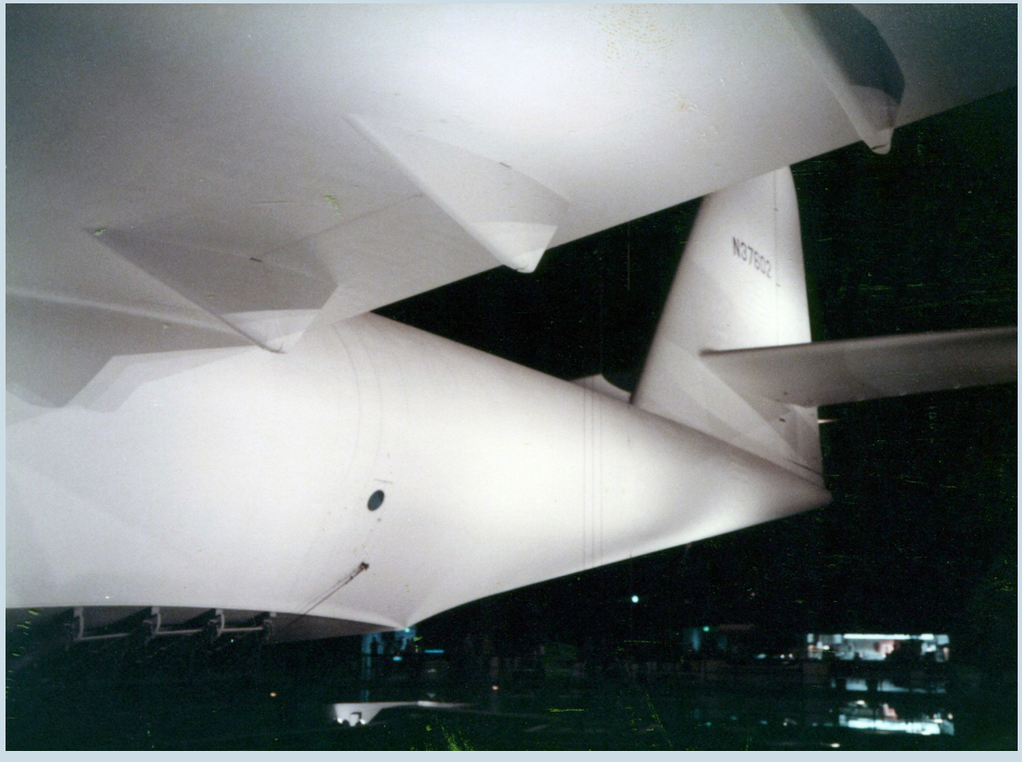








Spruce Goose

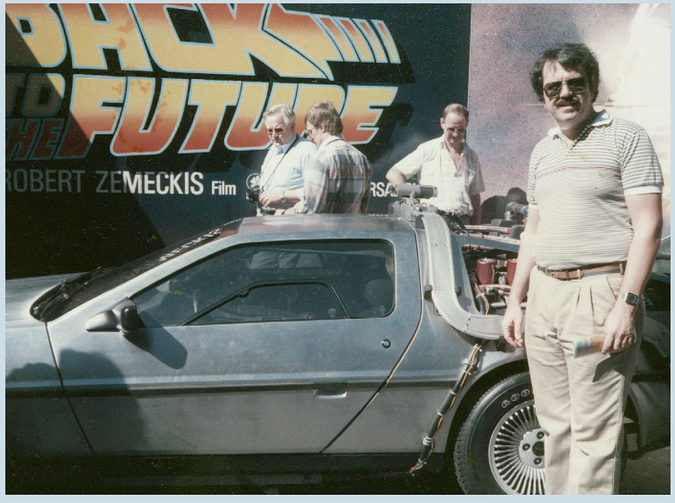






Queen Mary




FUTURE
ROBERT ZEMECKIS Film




CALIFORNIA
GIORGIO






1880
UNION
HOTEL
HOTEL


PENTHOUSE THREE



Canada - 1987

















Cliff Island - 1987



















Mexico - 1987







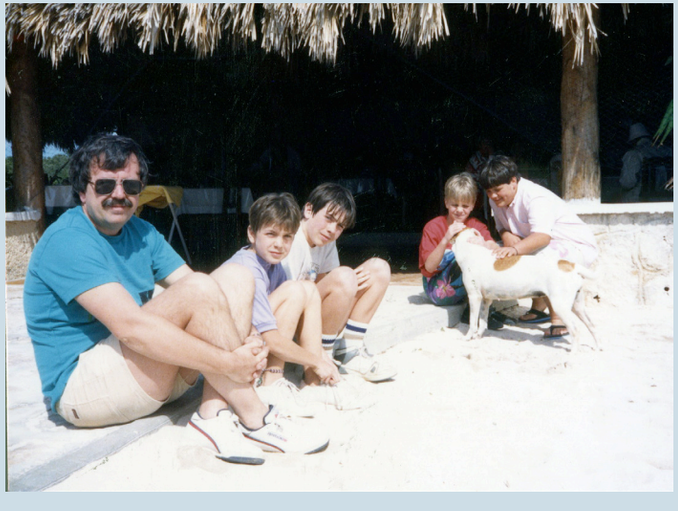


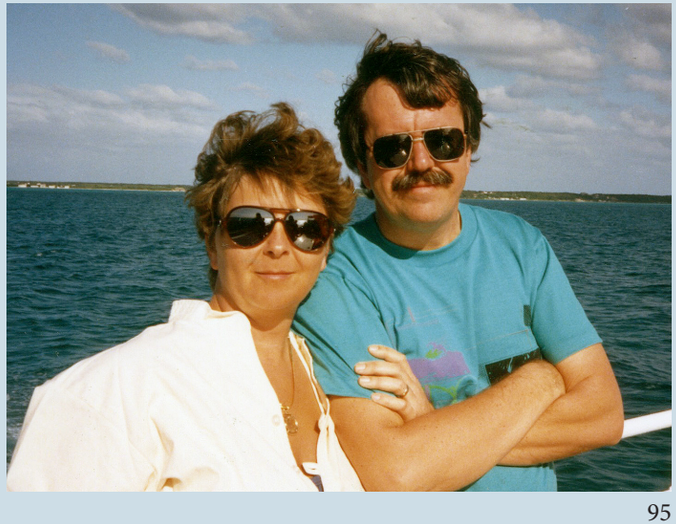












Atlantic City - 1988



















Mexico - 1988





















Kim Cota - Linda's Sister-in-Law















Mayan Ruins at Chichen Itsa



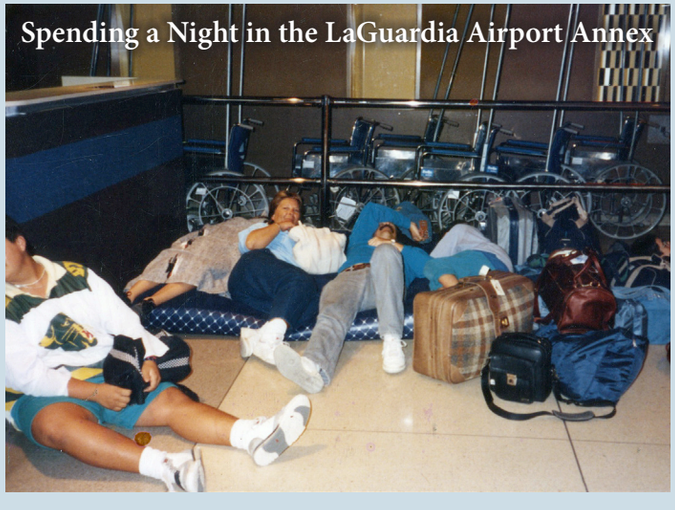



Beginning the 36 Hour Nightmare Getting Home




Hoping to Find the Next Flight




Spending a Night in the LaGuardia Airport Annex








Finally Home - Almost



Las Vegas 1989

















Richard at “Fly Away”





Hawaii - 1989

















Pali Lookout













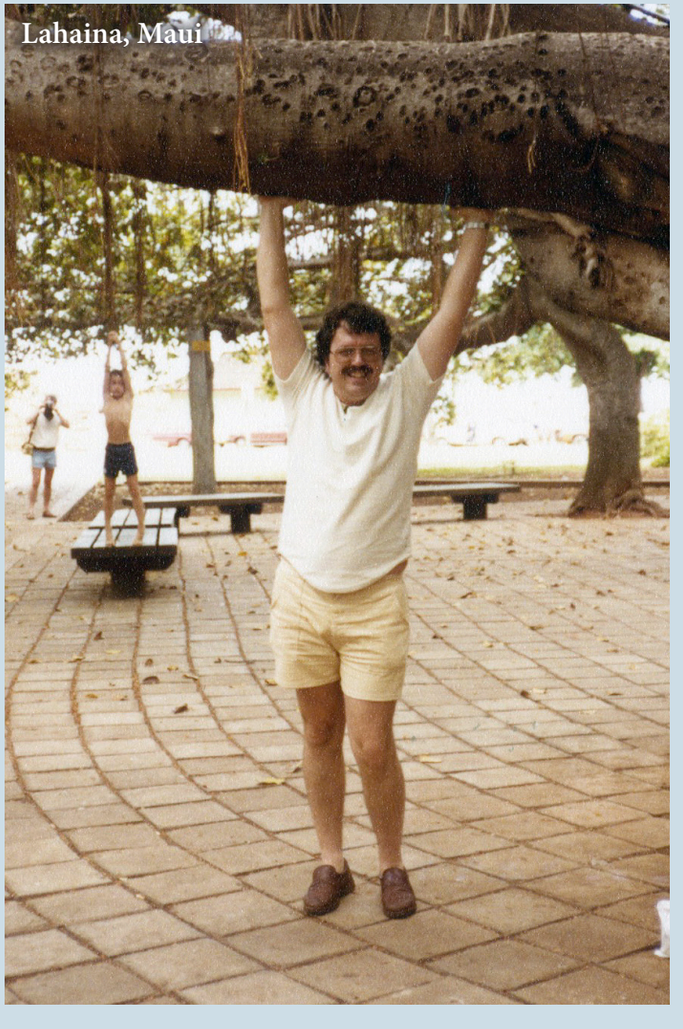
Sea Life Park











Lahaina, Maui

New York City - 1989



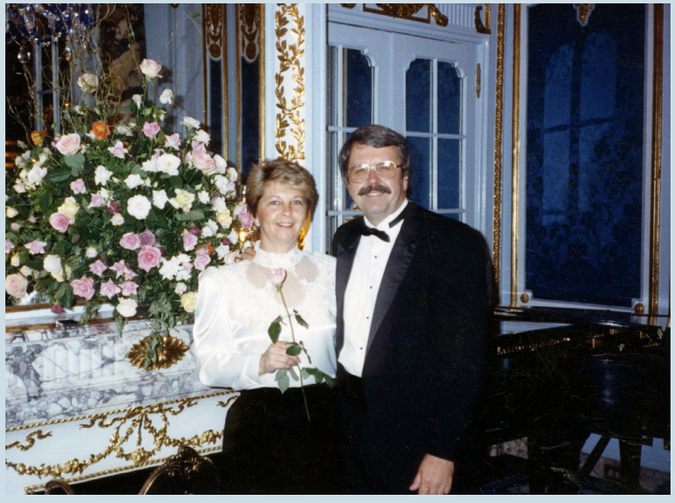












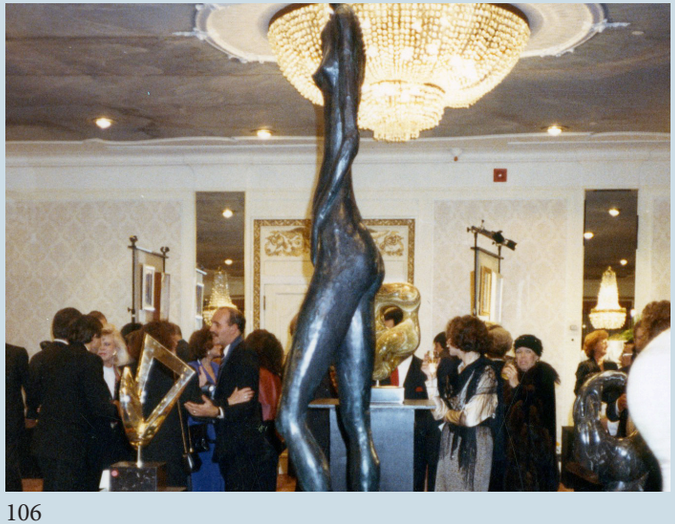













to Mrs Ma
Farnha