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Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A373737 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

George Thomas Hauck to Marjorie Maxine Rench

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is George Thomas Hauck
2. Color W 3. Where born Hendricks Co. Ind. (Town, County, State or Country) 4. When born Feb. 10-1929 (Day, Month, Year)
5. Present residence R#1 Brownsburg Ind.
6. Present occupation Truck Driver 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Ryasell Hauck 10. His color W
11. His birthplace Boone Co. Ind. 12. His occupation Farmer 13. His residence R#1 Brownsburg
14. Full christian and maiden name of mother Eula Luttrell 15. Her color W 16. Her occupation Housewife
17. Her birthplace Corbin Co. Ky 18. Her residence R#1 Brownsburg 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant George Thomas Haulk

George Thomas Haulk deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives ~~consent to the issuance of~~ this license. George Thomas Haulk

Subscribed and sworn to before me, this 29th day of May, 1950

Adda M. Johnson Clerk Hendricks Circuit Court

Certificate No. A373738 Application is hereby made for a license for the marriage of **FEMALE**

Marjorie Maxine Rench to George Thomas Hauck

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Marjorie Maxine Rench
2. Color W 3. Where born Delaware Co. Indiana (Town, County, State or Country) 4. When born Sept. 7-1931 (Day, Month, Year)
5. Present residence Brownsburg
6. Present occupation Not Employed 7. Full christian and surname of father Luke Rench
8. His color W 9. His birthplace Delaware Co. Ind. 10. His occupation Machinist 11. His residence Brownsburg
12. Full christian and maiden name of mother Opal D. Frost 13. Her color W 14. Her occupation Housewife
15. Her birthplace Delaware Co. Ind. 16. Her residence Brownsburg
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Marjorie Maxine Rench

Marjorie Maxine Rench deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Marjorie Maxine Rench

Subscribed and sworn to before me, this 29th day of May, 1950

Adda M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

George Thomas Hauck
To
Marjorie Maxine Rench

ss:

BE IT REMEMBERED, That on this 29th day of May, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife George Thomas Hauck and Marjorie Maxine Rench and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adda M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 29th day of May, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 14th day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, George Thomas Hauck and Marjorie Maxine Rench on the Fourth day of June, 1950

Lester B. Yearick
Minister

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Marriage Record, No. 21, Hendricks County, Indiana

Application for Marriage License

MALE

Certificate No. A38874

Application is hereby made for a license for the marriage of Robert Vernon Stader to Iva Dean Epperson

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Robert Vernon Stader
2. Color wh. 3. Where born Marion Co. Ind. (Town, County, State or Country) 4. When born Nov 18-1928 (Day, Month, Year)
5. Present residence Mooresville Ind.
6. Present occupation Farmer 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Jessie Stader 10. His color wh.
11. His birthplace Columbus Ind. 12. His occupation Farmer 13. His residence Same
14. Full christian and maiden name of mother Lena Bertram 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Kentucky 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Robert Vernon Stader

Robert Vernon Stader deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Robert Vernon Stader

Subscribed and sworn to before me, this 29th day of May, 1950.

Cora M Johnson Clerk Hendricks Circuit Court

Certificate No. A38873

Application is hereby made for a license for the marriage of Iva Dean Epperson to Robert Vernon Stader

FEMALE

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Iva Dean Epperson
2. Color wh. 3. Where born Pulaski Co. Ky. (Town, County, State or Country) 4. When born April 28-1933 (Day, Month, Year)
5. Present residence Plainfield Ind.
6. Present occupation Office work 7. Full christian and surname of father Emery E Epperson
8. His color wh. 9. His birthplace Kentucky 10. His occupation Carpenter 11. His residence Same
12. Full christian and maiden name of mother Sophia Estes 13. Her color wh. 14. Her occupation Factoryworker
15. Her birthplace Kentucky 16. Her residence Same
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Iva Dean Epperson

Sophia Epperson deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. + Sophia Epperson

Subscribed and sworn to before me, this 29th day of May, 1950

Cora M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Robert Vernon Stader
To
Iva Dean Epperson

ss:

BE IT REMEMBERED, That on this 29th day of May, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Robert Vernon Stader and Iva Dean Epperson and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Cora M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 29th day of May, 1950.

(SEAL)

BE IT FURTHER REMEMBERED, That on this 2nd day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Robert Vernon Stader and Iva Dean Epperson on the 2nd day of June, 1950.

Robert O. Fife, Christian Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A267878

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Eli Andrew Osborne, Jr. to Lois James Morehead

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Eli Andrew Osborne
2. Color W 3. Where born Indianapolis (Town, County, State or Country) 4. When born Nov 1-1924 (Day, Month, Year)
5. Present residence 3849 Kenwood Ave Indianapolis
6. Present occupation Shift Man - Gaskets 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Eli Osborne 10. His color W
11. His birthplace Indianapolis 12. His occupation Farmer 13. His residence RR6 Frankfort Ind.
14. Full christian and maiden name of mother Leona N. Hellman 15. Her color W 16. Her occupation Housewife
17. Her birthplace Clinton Co. Ind. 18. Her residence R6 Frankfort 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Jan - 1950 - Divorce
25. Give the names and ages of any minor children of the male applicant from all former marriages None
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Eli Andrew Osborne deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Eli Andrew Osborne Jr.

Subscribed and sworn to before me, this 29th day of May, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A90928

Application is hereby made for a license for the marriage of

FEMALE

Lois James Morehead to Eli Andrew Osborne, Jr.

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Lois James Morehead
2. Color W 3. Where born Plainfield Ind. (Town, County, State or Country) 4. When born Sept. 21-1921 (Day, Month, Year)
5. Present residence Plainfield Ind.
6. Present occupation Bank Clerk 7. Full christian and surname of father J. O. James
8. His color W 9. His birthplace Montrose Ill 10. His occupation Railroad-ticket agt. 11. His residence Altamont, Ill
12. Full christian and maiden name of mother Bertha M. Miller 13. Her color W 14. Her occupation Housewife
15. Her birthplace Montrose, Ill 16. Her residence Altamont, Ill.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? once 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when? Death - Jan, 1947
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Lois James Morehead deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Lois J Morehead

Lois J Morehead

Subscribed and sworn to before me, this 29th day of May, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Eli Andrew Osborne, Jr.
To
Lois James Morehead

} ss:

BE IT REMEMBERED, That on this 29th day of May, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Eli Andrew Osborne, Jr. and Lois James Morehead and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 29th day of May, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 1st day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Eli Andrew Osborne, Jr. and Lois James Morehead on the 29th day of May, 1950

Rev. F. J. Beisel

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Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A-373284

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of James Solomon to Lorna Dee Ellis

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is James Solomon
2. Color White 3. Where born Washington, Indiana (Town, County, State or Country) 4. When born May 9, 1928 (Day, Month, Year)
5. Present residence R. 2, Box 440, Indianapolis, Indiana
6. Present occupation Clerks at Elevator 7. If no occupation, what means has the male contracting party to support a family? —
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father James Williams Solomon 10. His color White
11. His birthplace Du Bois Co., Ind. 12. His occupation Farming 13. His residence Indianapolis, Ind. R. 2.
14. Full christian and maiden name of mother Lucy Mae Stanley 15. Her color White 16. Her occupation Cooking Teacher
17. Her birthplace Linton, Ind. 18. Her residence Indianapolis, Ind. R. 2 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue? —
21. Is this his first marriage? Yes 22. If not, how often has he been married? — 23. Has such prior marriage or marriages, been dissolved? — 24. If so, how and when? —
25. Give the names and ages of any minor children of the male applicant from all former marriages —
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names —
27. Are you supporting them and are you complying with all Court orders issued for their support? —
28. Is the male contracting party afflicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant James Solomon

James Solomon deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives James Solomon consent to the issuance of this license.

Subscribed and sworn to before me, this 31st day of May, 1950

Adah M. Johnson, Clerk Hendricks Circuit Court

Certificate No. A-373783

Application is hereby made for a license for the marriage of

FEMALE

Lorna Dee Ellis to James Solomon

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Lorna Dee Ellis
2. Color White 3. Where born Marshall, Indiana (Town, County, State or Country) 4. When born Feb. 25, 1932 (Day, Month, Year)
5. Present residence Clermont, Indiana
6. Present occupation At Home 7. Full christian and surname of father Early Ellis, Jr.
8. His color White 9. His birthplace Indiana 10. His occupation Retired 11. His residence Clermont Rd.
12. Full christian and maiden name of mother Millie Lillis Rusk 13. Her color White 14. Her occupation Housewife
15. Her birthplace Illinois 16. Her residence Clermont, Indiana
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? — 20. Has such prior marriage, or marriages been dissolved? — 21. If so, how and when? —
22. Is the female contracting party afflicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Lorna Dee Ellis

Lorna Dee Ellis deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives Lorna Dee Ellis consent to the issuance of this license.

Subscribed and sworn to before me, this 31st day of May, 1950

Adah M. Johnson, Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

James Dewese Solomon
To
Lorna Dee Ellis

Indiana, to-wit: Hendricks County, ss:

BE IT REMEMBERED, That on this 31st day of May, 1950, the following Marriage License was issued, to-wit:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife James Dewese Solomon and Lorna Dee Ellis and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 31st day of May, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 2nd day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Lorna Dee Ellis and James Dewese Solomon on the 31st day of May, 1950

James Earl Lacy II

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A90850

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Kenneth Woodrow Ratliff to Alice Margaret Foreman

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Kenneth Woodrow Ratliff
2. Color Wh. 3. Where born W. Virginia (Town, County, Stqte or Country) 4. When born Feb 12-1922. (Day, Month, Year)
5. Present residence 605 No. Pine - Indianapolis
6. Present occupation Instructor - National Guard 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Charles C. Ratliff 10. His color wh.
11. His birthplace W. Virginia 12. His occupation Retired 13. His residence Columbus - Ohio
14. Full christian and maiden name of mother Maude Carter 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace W. Virginia 18. Her residence Dead 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? no. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Kenneth Woodrow Ratliff

Kenneth Woodrow Ratliff deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives his consent to the issuance of this license. Kenneth Woodrow Ratliff

Subscribed and sworn to before me, this 1st day of June, 1950

Arah M Johnson Clerk Hendricks Circuit Court

Certificate No. A84557

Application is hereby made for a license for the marriage of

FEMALE

Alice Margaret Foreman to Kenneth Woodrow Ratliff

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Alice Margaret Foreman
2. Color wh. 3. Where born Indiana (Town, County, State or Country) 4. When born Oct 16-1910 (Day, Month, Year)
5. Present residence 605 No Pine - Indianapolis
6. Present occupation Laundry worker 7. Full christian and surname of father John Sherman Weffelfinger
8. His color wh. 9. His birthplace Indiana 10. His occupation Retired 11. His residence Dead
12. Full christian and maiden name of mother Lula Wallapster 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Indiana 16. Her residence Huntertown Ind
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? no.
18. Is this her first marriage? No. 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce - 1945
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Alice Margaret Foreman

Alice Margaret Foreman deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives she consent to the issuance of this license. Alice Margaret Foreman

Subscribed and sworn to before me, this 1st day of June, 1950

Arah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Kenneth Woodrow Ratliff
To
Alice Margaret Foreman

ss:

BE IT REMEMBERED, That on this 1st day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Kenneth Woodrow Ratliff and Alice Margaret Foreman and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Arah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 1st day of June, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 2nd day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Kenneth Woodrow Ratliff and Alice Margaret Foreman on the 1st day of June, 1950

Thomas P. Kinney

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Marriage Record, No. 21, Hendricks County, Indiana

MALE

Certificate No. A38661

Application for Marriage License

Application is hereby made for a license for the marriage of

Douglas David West to Edna Angeline Holbrook

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Douglas David West
2. Color W 3. Where born Plymouth Indiana (Town, County, State or Country) 4. When born Apr. 30 - 1927 (Day, Month, Year)
5. Present residence Clayton R.R. 2
6. Present occupation Shipping Clerk 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Homer West 10. His color W
11. His birthplace Hendricks Co. Ind. 12. His occupation Salesman 13. His residence Clayton R.R.
14. Full christian and maiden name of mother Julia Ann Casselin 15. Her color W 16. Her occupation Housewife
17. Her birthplace Iron Mountain, Mich. 18. Her residence Clayton R.R. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Douglas D West

Douglas David West deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Douglas D West

Subscribed and sworn to before me, this 1st day of June, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A38517

FEMALE

Application is hereby made for a license for the marriage of Edna Angeline Holbrook to Douglas David West

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Edna Angeline Holbrook
2. Color W 3. Where born Coburn, Va (Town, County, State or Country) 4. When born Dec. 21 - 1930 (Day, Month, Year)
5. Present residence Clayton Ind.
6. Present occupation Machine Operator 7. Full christian and surname of father Otis Holbrook
8. His color W 9. His birthplace Coburn, Va 10. His occupation Night Watchman 11. His residence Clayton Ind.
12. Full christian and maiden name of mother Grace Gibson 13. Her color W 14. Her occupation Factory
15. Her birthplace Lebanon, Va. 16. Her residence Clayton, Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Angeline Holbrook

Edna Angeline Holbrook deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Angeline Holbrook

Subscribed and sworn to before me, this 1st day of June, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Douglas David West
To
Edna Angeline Holbrook

ss:

BE IT REMEMBERED, That on this 1st day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Douglas David West and Edna Angeline Holbrook and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 1st day of June, 1950.

(SEAL)

BE IT FURTHER REMEMBERED, That on this 6th day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Douglas David West and Edna Angeline Holbrook on the 1 day of June, 1950

Anthony L. McLaughlin

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A160923 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

John Elmer Bartoloth to Priscilla Dean Ward

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is John Elmer Bartoloth
2. Color W 3. Where born Milwaukee, Wis. (Town, County, State or Country) 4. When born May 25-1922 (Day, Month, Year)
5. Present residence 5331 West National, Milwaukee
6. Present occupation Chiropractor 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father John Bartoloth 10. His color W
11. His birthplace Austria 12. His occupation Supervisor 13. His residence 5331 W. National, Milwaukee
14. Full christian and maiden name of mother Agnes Sclauer 15. Her color W 16. Her occupation Housewife
17. Her birthplace Vienna Austria 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant John E. Bartoloth

John Elmer Bartoloth deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. John E. Bartoloth

Subscribed and sworn to before me, this 2nd day of June, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A90976 Application is hereby made for a license for the marriage of **FEMALE**

Priscilla Dean Ward to John Elmer Bartoloth

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Priscilla Dean Ward
2. Color W 3. Where born Hendricks Co. Ind. (Town, County, State or Country) 4. When born Nov. 6-1925 (Day, Month, Year)
5. Present residence Plainfield Ind.
6. Present occupation Secretary 7. Full christian and surname of father Harrison M. Ward
8. His color W 9. His birthplace Hendricks Co. 10. His occupation Farmer 11. His residence Plainfield Ind.
12. Full christian and maiden name of mother Rose Haworth 13. Her color W 14. Her occupation Housewife
15. Her birthplace Hendricks Co. Ind. 16. Her residence Same
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Priscilla D. Ward

Priscilla Dean Ward deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Priscilla D. Ward

Subscribed and sworn to before me, this 2nd day of June, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

John Elmer Bartoloth
To
Priscilla Dean Ward

ss:

BE IT REMEMBERED, That on this 2nd day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife John Elmer Bartoloth and Priscilla Dean Ward and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 2nd day of June, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 12th day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, John Elmer Bartoloth and Priscilla Dean Ward on the 4th day of June, 1950

Red Guy Lawyer

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Marriage Record, No. 21, Hendricks County, Indiana

MALE

Certificate No. A 26785 8

Application for Marriage License

Application is hereby made for a license for the marriage of Pearley McMasters to Dorothy Leone Scott

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Pearley McMasters
2. Color W 3. Where born Parke Co. Ind. (Town, County, State or Country) 4. When born Dec 1-1885 (Day, Month, Year)
5. Present residence Tangier, Parke Co. Ind.
6. Present occupation Carpenter 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin? No
9. Full christian and surname of father Miles McMasters 10. His color W
11. His birthplace Park Co. Ind. 12. His occupation Carpenter 13. His residence Deceased
14. Full christian and maiden name of mother Mary E. Ox 15. Her color W 16. Her occupation Housewife
17. Her birthplace Fountain Co. Ind. 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? Twice 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Death
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Pearley McMasters

Pearley McMasters deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Pearley McMasters

Subscribed and sworn to before me, this 3rd day of June, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

FEMALE

Certificate No. A 26785 7

Application is hereby made for a license for the marriage of Dorothy Leone Scott to Pearley McMasters

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Dorothy Leone Scott
2. Color W 3. Where born Park Co Ind (Town, County, State or Country) 4. When born Aug 30-1903 (Day, Month, Year)
5. Present residence Tangier Ind.
6. Present occupation Housewife 7. Full christian and surname of father Wm. N. Hobson
8. His color W 9. His birthplace Park Co. 10. His occupation Carpenter 11. His residence deceased
12. Full christian and maiden name of mother Grace Marshall 13. Her color W 14. Her occupation Housewife
15. Her birthplace Park Co. Ind. 16. Her residence deceased
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? divorce - 1942
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Dorothy Leone Scott

Dorothy Leone Scott deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Dorothy Leone Scott

Subscribed and sworn to before me, this 3rd day of June, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Pearley McMasters
To
Dorothy Leone Scott

ss:

BE IT REMEMBERED, That on this 3rd day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Pearley McMasters and Dorothy Leone Scott and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 3rd day of June, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 7th day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Pearley McMasters and Dorothy Leone Scott on the 3rd day of June, 1950

Miles S. Hinkle

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A4788

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Edwin Orel Reed to Alice Louise Westerfield

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Edwin Orel Reed
2. Color wh. 3. Where born Pittsboro (Town, County, State or Country) 4. When born June 14-1926 (Day, Month, Year)
5. Present residence Pittsboro Ind.
6. Present occupation Engineer 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin no.
9. Full christian and surname of father Charles R. Reed 10. His color wh.
11. His birthplace Indiana 12. His occupation Farmer 13. His residence Same
14. Full christian and maiden name of mother Dora Agnes 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Indiana 18. Her residence Dead 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Edwin Orel Reed

Edwin Orel Reed deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Edwin Orel Reed

Subscribed and sworn to before me, this 3rd day of June, 1950

Isaac M Johnson Clerk Hendricks Circuit Court

Certificate No. A4789

Application is hereby made for a license for the marriage of

FEMALE

Alice Louise Westerfield to Edwin Orel Reed

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Alice Louise Westerfield
2. Color wh. 3. Where born Indpls. (Town, County, State or Country) 4. When born Nov 26-1932 (Day, Month, Year)
5. Present residence Pittsboro
6. Present occupation Student 7. Full christian and surname of father Albert Westerfield
8. His color wh. 9. His birthplace Indpls. 10. His occupation Dead 11. His residence Dead
12. Full christian and maiden name of mother Dorothy Daughtel 13. Her color wh 14. Her occupation Secretary
15. Her birthplace Indpls. 16. Her residence Pittsboro
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Alice Louise Westerfield

Dorothy Smith deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. Mrs. Dorothy Smith

Subscribed and sworn to before me, this 3rd day of June, 1950

Isaac M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Edwin Orel Reed

To

Alice Louise Westerfield

ss:

BE IT REMEMBERED, That on this 3rd day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Edwin Orel Reed and Alice Louise Westerfield and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Isaac M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 3rd day of June, 1950.

(SEAL)

BE IT FURTHER REMEMBERED, That on this 15th day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Edwin Orel Reed and Alice Louise Westerfield on the 10th day of June, 1950.

Rev. Arthur Harrell

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Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 261985

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Noah Jim Sheely to Elizabeth VanDenBosch

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Noah Jim Sheely
2. Color White 3. Where born La Crosse Ind. (Town, County, State or Country) 4. When born July 29-1928 (Day, Month, Year)
5. Present residence 257 Main St., Danville, Indiana.
6. Present occupation Teacher 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Noah F. Sheely 10. His color White
11. His birthplace Hanna, Ind 12. His occupation Carpenter 13. His residence La Crosse. Ind.
14. Full christian and maiden name of mother Maudie E. James 15. Her color White 16. Her occupation Housewife
17. Her birthplace Denham, Indiana. 18. Her residence La Crosse, Ind 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? — 23. Has such prior marriage or marriages, been dissolved? — 24. If so, how and when? —
25. Give the names and ages of any minor children of the male applicant from all former marriages —
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names —
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Noah Jim Sheely

Noah Jim Sheely deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Noah Jim Sheely

Subscribed and sworn to before me, this 5th day of June, 1950.

Adah M. Johnson, Clerk Hendricks Circuit Court

Certificate No. A 261987

Application for Marriage License

FEMALE

Application is hereby made for a license for the marriage of Elizabeth VanDenBosch to Noah Jim Sheely

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Elizabeth VanDenBosch
2. Color White 3. Where born Monrovia Indiana (Town, County, State or Country) 4. When born March 8th, 1931. (Day, Month, Year)
5. Present residence Monrovia, Indiana
6. Present occupation Office Worker 7. Full christian and surname of father John Gerard VanDenBosch
8. His color White 9. His birthplace Holland, Mich. 10. His occupation Farmer 11. His residence Monrovia, Ind.
12. Full christian and maiden name of mother Martha Gray Shannon 13. Her color White 14. Her occupation Housewife
15. Her birthplace Colama, Ind. 16. Her residence Monrovia, Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? — 20. Has such prior marriage, or marriages been dissolved? — 21. If so, how and when? —
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Elizabeth VanDenBosch

Elizabeth VanDenBosch deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Elizabeth VanDenBosch

Subscribed and sworn to before me, this 5th day of June, 1950

Adah M. Johnson, Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Noah Jim Sheely
To
Elizabeth Van Den Bosch

ss:

BE IT REMEMBERED, That on this 5th day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Noah Jim Sheely and Elizabeth VanDenBosch and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 5th day of June, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 1st day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

Noah Jim Sheely and Elizabeth VanDenBosch

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, on the 11 day of June, 1950.

Rev. Clifford L. Miller

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. ~~A 267984~~ 334400 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

Harry E. Belville to Nellie A. Farr

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Harry E. Belville
2. Color W 3. Where born Tiltonsville, Ohio (Town, County, State or Country) 4. When born June 15 - 1909 (Day, Month, Year)
5. Present residence 520 N. Meridian St. Brazil Ind.
6. Present occupation Not employed at present. 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Harry Belville 10. His color W
11. His birthplace Wheeling, West Va. 12. His occupation Laborer 13. His residence Deceased
14. Full christian and maiden name of mother Elizabeth Cramer 15. Her color W 16. Her occupation Housewife
17. Her birthplace Ohio 18. Her residence 520 N. Meridian St. Brazil 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Harry E. Belville deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Harry E. Belville

Subscribed and sworn to before me, this 6th day of June, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A334373 Application is hereby made for a license for the marriage of **FEMALE**

Nellie A. Farr to Harry E. Belville

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Nellie A. Farr
2. Color W 3. Where born Illinois (Town, County, State or Country) 4. When born Jan 6 - 1896 (Day, Month, Year)
5. Present residence Havanna Ill.
6. Present occupation Housewife 7. Full christian and surname of father Alexander Rutke
8. His color W 9. His birthplace Pennsylvania 10. His occupation Farmer 11. His residence Deceased
12. Full christian and maiden name of mother Sarah Bird 13. Her color W 14. Her occupation Housewife
15. Her birthplace Pennsylvania 16. Her residence Deceased
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce - 1950
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Nellie A. Farr deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Nellie A. Farr

Subscribed and sworn to before me, this 6th day of June, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Harry E. Belville
To
Nellie A. Farr

ss:

BE IT REMEMBERED, That on this 6th day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Harry E. Belville and Nellie A. Farr and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 6th day of June, 1950.

(SEAL)

BE IT FURTHER REMEMBERED, That on this 7th day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Harry E. Belville and Nellie A. Farr on the 6th day of June, 1950

John Paul Jones, Minister

Marriage Record, No. 21, Hendricks County, Indiana

MALE

Certificate No. A 89938

Application for Marriage License

Application is hereby made for a license for the marriage of Richard Edward Cannon to Ruth Ann Sundstrom

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Richard Edward Cannon
2. Color W. 3. Where born Indianapolis (Town, County, State or Country) 4. When born Feb. 23-1926 (Day, Month, Year)
5. Present residence 217 - Woodlawn Court, Bloomington, Ind.
6. Present occupation Student 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Edward B. Cannon 10. His color W
11. His birthplace Nashville, Tenn. 12. His occupation Asst. Supt. Linde Air Products 13. His residence R 2 - Danville Ind.
14. Full christian and maiden name of mother Muriel Underwood 15. Her color W 16. Her occupation Housewife
17. Her birthplace St Louis Mo. 18. Her residence R2 - Danville Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Richard Edward Cannon

Richard Edward Cannon deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Richard Edward Cannon

Subscribed and sworn to before me, this 6th day of June, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

FEMALE

Certificate No. A 89937

Application is hereby made for a license for the marriage of Ruth Ann Sundstrom to Richard Edward Cannon

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Ruth Ann Sundstrom
2. Color W 3. Where born Elizabeth, N. J. (Town, County, State or Country) 4. When born March 5-1930 (Day, Month, Year)
5. Present residence Danville, Ind R. #2
6. Present occupation Not employed 7. Full christian and surname of father Jage Sundstrom
8. His color W 9. His birthplace Sweden 10. His occupation Carpenter 11. His residence Miami. Fla.
12. Full christian and maiden name of mother Anna Boyle 13. Her color W 14. Her occupation Housewife
15. Her birthplace Ireland 16. Her residence Miami. Florida
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Ruth Ann Sundstrom

Ruth Ann Sundstrom deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Ruth Ann Sundstrom

Subscribed and sworn to before me, this 6th day of June, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Richard Edward Cannon
To
Ruth Ann Sundstrom

BE IT REMEMBERED, That on this 6th day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Richard Edward Cannon and Ruth Ann Sundstrom and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 6th day of June, 1950.

(SEAL)

BE IT FURTHER REMEMBERED, That on this 14th day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Richard Edward Cannon and Ruth Ann Sundstrom on the Seventh day of June, 1950

Rev. Warren R. Isenhour

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A393943

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Oscar Jackson Thompson to Gloria Jeanne Kernodle

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Oscar Jackson Thompson
2. Color W 3. Where born Mt. Sherman, Ky. (Town, County, State or Country) 4. When born Nov 8 - 1922 (Day, Month, Year)
5. Present residence 4403 Madison Ave. Indianapolis
6. Present occupation Poultry Dealer 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Elijah J Thompson 10. His color W
11. His birthplace Mt Sherman Ky 12. His occupation Farmer 13. His residence Mt. Sherman Ky
14. Full christian and maiden name of mother Rosalie Despain 15. Her color W 16. Her occupation Housewife
17. Her birthplace Mt Sherman Ky 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce - 1950
25. Give the names and ages of any minor children of the male applicant from all former marriages No
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Oscar Jackson Thompson

Oscar Jackson Thompson deposes and says that has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Oscar Jackson Thompson

Subscribed and sworn to before me, this 7th day of June, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A393942

Application is hereby made for a license for the marriage of

FEMALE

Gloria Jeanne Kernodle to Oscar Jackson Thompson

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Gloria Jeanne Kernodle
2. Color W 3. Where born Indiana (Town, County, State or Country) 4. When born Nov. 8 - 1931 (Day, Month, Year)
5. Present residence Indianapolis, R 3 Box 342
6. Present occupation Factory 7. Full christian and surname of father Charles Kernodle
8. His color W 9. His birthplace Indiana 10. His occupation Factory 11. His residence Same
12. Full christian and maiden name of mother Frances M Burns 13. Her color W 14. Her occupation Housewife
15. Her birthplace Indiana 16. Her residence Same - Indpls - R 3 -
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? - No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Gloria Jeanne Kernodle

Gloria Jeanne Kernodle deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Gloria Jeanne Kernodle

Subscribed and sworn to before me, this 7th day of June, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Oscar Jackson Thompson
To
Gloria Jeanne Kernodle

ss:

BE IT REMEMBERED, That on this 7th day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Oscar Jackson Thompson and Gloria Jeanne Kernodle and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 7th day of June, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 7th day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Oscar Jackson Thompson and Gloria Jeanne Kernodle on the 7th day of June, 1950

John Paul Jones, Minister

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Marriage Record, No. 21, Hendricks County, Indiana

Application for Marriage License

MALE

Certificate No. A 89651

Application is hereby made for a license for the marriage of Walter Erwin Burke Jr. to Roberta Jeanne Miles

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Walter Erwin Burke Jr.
2. Color wh. 3. Where born Anderson Ind. (Town, County, State or Country) 4. When born Aug 31-'20 (Day, Month, Year)
5. Present residence Frankton Ind.
6. Present occupation Truck Driver 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Walter E. Burke Sr. 10. His color wh. 11. His birthplace Anderson Ind. 12. His occupation Supervisor 13. His residence Frankton Ind.
14. Full christian and maiden name of mother Mary L Campbell 15. Her color wh 16. Her occupation Housewife
17. Her birthplace Peoga Ind 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce July 31-'48 1 - Girl - 7yrs. age.
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names. Same - Partially
27. Are you supporting them and are you complying with all Court orders issued for their support? Yes
28. Is the male contracting party afflicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Walter E Burke Jr.

Walter Erwin Burke Jr deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Walter E. Burke Jr.

Subscribed and sworn to before me, this 8th day of June, 19 50

Adah M Johnson Clerk Hendricks Circuit Court

FEMALE

Certificate No. A 76493

Application is hereby made for a license for the marriage of Roberta Jeanne Miles to Walter Erwin Burke Jr.

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Roberta Jeanne Miles
2. Color wh 3. Where born Plainfield Ind (Town, County, State or Country) 4. When born Sept 1-1923 (Day, Month, Year)
5. Present residence Plainfield
6. Present occupation Teacher 7. Full christian and surname of father A. Strong Miles
8. His color wh. 9. His birthplace Plainfield 10. His occupation Farmer 11. His residence Same
12. Full christian and maiden name of mother Mary Hufford 13. Her color wh 14. Her occupation Housewife
15. Her birthplace Cartersburg Ind. 16. Her residence Same
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes. 21. If so, how and when? Divorce Sept 10-1947
22. Is the female contracting party afflicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Roberta Jeanne Miles

Roberta Jeanne Miles deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Roberta Jeanne Miles

Subscribed and sworn to before me, this 8th day of June, 19 50

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Walter Erwin Burke Jr
To
Roberta Jeanne Miles

Indiana, to-wit: Hendricks County, ss:

BE IT REMEMBERED, That on this 8th day of June, 19 50, the following Marriage License was issued, to-wit:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Walter Erwin Burke Jr. and Roberta Jeanne Miles and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 8th day of June, 19 50 (SEAL)

BE IT FURTHER REMEMBERED, That on this 12th day of June, 19 50, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Walter Erwin Burke Jr. and Roberta Jeanne Miles on the 9th day of June, 19 50

Milo S. Winkle

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 77672

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Arthur Ernest Busselle to Vera Grey Anderson

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is arthur Ernest Busselle
2. Color wh. 3. Where born Rushville Ind. (Town, County, State or Country) 4. When born Jan 2-1909 (Day, Month, Year)
5. Present residence 1229 No Delaware Indpls.
6. Present occupation Claims Adjuster 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Harry L Busselle 10. His color wh.
11. His birthplace Rushville Ind 12. His occupation Decd 13. His residence Dec'd.
14. Full christian and maiden name of mother Erna Brannamer 15. Her color wh. 16. Her occupation Decs
17. Her birthplace Cloverdale Ind 18. Her residence Dec'd 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? no. 22. If not, how often has he been married? once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce - April 26-1950
25. Give the names and ages of any minor children of the male applicant from all former marriages Mary Ann - 16 James - 12
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names None
27. Are you supporting them and are you complying with all Court orders issued for their support? yes
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Arthur Ernest Busselle

Arthur Ernest Busselle deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Arthur Ernest Busselle

Subscribed and sworn to before me, this 10th day of June, 1950

Ardath M Johnson Clerk Hendricks Circuit Court

Certificate No. A 77671

Application is hereby made for a license for the marriage of

FEMALE

Vera Grey Anderson to Arthur Ernest Busselle

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Vera Grey Anderson
2. Color wh. 3. Where born Jasonville Ind (Town, County, State or Country) 4. When born Dec 20-1912 (Day, Month, Year)
5. Present residence Indpls. 237 E 15th St.
6. Present occupation Librarian 7. Full christian and surname of father Jab C. Anderson
8. His color wh. 9. His birthplace Carbon Ind. 10. His occupation Bookkeper 11. His residence Terre Haute Ind.
12. Full christian and maiden name of mother Evie M. McCammon 13. Her color wh 14. Her occupation Housewife
15. Her birthplace Paxton 16. Her residence Terre Haute Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Vera Grey Anderson

Vera Grey Anderson deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Vera Grey Anderson

Subscribed and sworn to before me, this 10th day of June, 1950

Ardath M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Arthur Ernest Busselle
To
Vera Grey Anderson

ss:

BE IT REMEMBERED, That on this 10th day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Arthur Ernest Busselle and Vera Grey Anderson and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Ardath M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 10th day of June, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 13th day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Arthur Ernest Busselle and Vera Grey Anderson, on the 10th day of June, 1950

Robert B. Pierce

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Marriage Record, No. 21, Hendricks County, Indiana

MALE

Certificate No. A38541

Application for Marriage License

Application is hereby made for a license for the marriage of Robert Gene Edwards to Ruth Eileen Rosemary

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Robert Gene Edwards
2. Color W 3. Where born New Waverly Ind (Town, County, State or Country) 4. When born Oct 3-1929 (Day, Month, Year)
5. Present residence 946 E. Main St Plainfield Ind.
6. Present occupation Cabinet Maker 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Robert Winfred Edwards 10. His color W
11. His birthplace Stineville Ind 12. His occupation Cabinet Maker 13. His residence 946 E. Main Plainfield
14. Full christian and maiden name of mother Helen Pearl Smith 15. Her color W 16. Her occupation Teacher
17. Her birthplace Nelson, Cass Co. Ind. 18. Her residence 946 E. Main 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Robert Gene Edwards

Helen Edwards deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. Mrs. Helen Edwards

Subscribed and sworn to before me, this 10 ½ day of June, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

FEMALE

Certificate No. A38540 Application is hereby made for a license for the marriage of Ruth Eileen Rosemary to Robert Gene Edwards

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Ruth Eileen Rosemary
2. Color W 3. Where born Plainfield (Town, County, State or Country) 4. When born Feb. 10-1929 (Day, Month, Year)
5. Present residence Plainfield
6. Present occupation Secretary 7. Full christian and surname of father Lee Rosemary Sr.
8. His color W 9. His birthplace France 10. His occupation Machinist 11. His residence Plainfield
12. Full christian and maiden name of mother Sara Frances Admire 13. Her color W 14. Her occupation Housewife
15. Her birthplace Indiana - Yankeetown 16. Her residence Plainfield Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Ruth Eileen Rosemary

Ruth Eileen Rosemary deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Ruth Eileen Rosemary

Subscribed and sworn to before me, this 10 ½ day of June, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Robert Gene Edwards
To
Ruth Eileen Rosemary

ss:

BE IT REMEMBERED, That on this 10 th day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Robert Gene Edwards and Ruth Eileen Rosemary and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 10th day of June, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 20 th day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Robert Gene Edwards and Ruth Eileen Rosemary on the 16 th day of June, 1950

Rev. Paul A. Shepherd

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 52554

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of James Howard Pritchett to Osie Fay Disney

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is James Howard Pritchett
2. Color wh 3. Where born California (Town, County, State or Country) 4. When born Dec 12 1879 (Day, Month, Year)
5. Present residence Rt 2 Danville Ind.
6. Present occupation Farmer 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father John N. Pritchett 10. His color wh
11. His birthplace Indiana 12. His occupation Farmer 13. His residence Decd
14. Full christian and maiden name of mother Mary B. Steward 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace California 18. Her residence Hendricks Co. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Death - Oct 24 - 1948
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant James Howard Pritchett

James Howard Pritchett deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. James Howard Pritchett

Subscribed and sworn to before me, this 10th day of June, 1950

Arah M Johnson Clerk Hendricks Circuit Court

Certificate No. A 52585

Application is hereby made for a license for the marriage of Osie Fay Disney to James Howard Pritchett

FEMALE

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Osie Fay Disney
2. Color wh. 3. Where born Hendricks Co. Ind (Town, County, State or Country) 4. When born Sept 4 - 1893 (Day, Month, Year)
5. Present residence Danville Ind.
6. Present occupation Housekeeper 7. Full christian and surname of father Edwin M. Kurtz
8. His color wh. 9. His birthplace Indiana 10. His occupation Farmer 11. His residence No
12. Full christian and maiden name of mother Mary Summers 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Indiana 16. Her residence Decd
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Twice 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce Death - April 23 - 1948
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Osie Fay Disney

Osie Fay Disney deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Osie Fay Disney

Subscribed and sworn to before me, this 10th day of June, 1950

Arah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

James Howard Pritchett
To
Osie Fay Disney

ss:

Indiana, to-wit: Hendricks County, ss:

BE IT REMEMBERED, That on this 10th day of June, 1950, the following Marriage License was issued, to-wit:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife James Howard Pritchett and Osie Fay Disney and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Arah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 10th day of June, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 3rd day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, James Howard Pritchett and Osie Fay Disney on the 11 day of June, 1950

Rev. Ira B. Stock

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 89699

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Dean Franklin Turner to Carolyn Anne Gabel

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Dean Franklin Turner
2. Color wh. 3. Where born Vermillion Co. Ind. (Town, County, State or Country) 4. When born Oct 19-1928 (Day, Month, Year)
5. Present residence Box 331 Rt 9 Indpls. Ind.
6. Present occupation Farmer 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Dana Turner 10. His color wh.
11. His birthplace Tennessee 12. His occupation Farmer 13. His residence Same
14. Full christian and maiden name of mother Audrey Boswell 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Fountain Co Ind 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Dean Turner

Dean Franklin Turner deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Dean Turner

Subscribed and sworn to before me, this 10th day of June, 1950

Arah M Johnson Clerk Hendricks Circuit Court

Certificate No. A 89692

Application is hereby made for a license for the marriage of

FEMALE

Carolyn Anne Gabel to Dean Franklin Turner

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Carolyn Anne Gabel
2. Color wh 3. Where born Indpls. Ind. (Town, County, State or Country) 4. When born Nov 17-1928 (Day, Month, Year)
5. Present residence Rt 1 Box 210 Plainfield 6. Present occupation Secretary 7. Full christian and surname of father Albert Gabel
8. His color wh. 9. His birthplace Marion Co. 10. His occupation Farmer 11. His residence Same.
12. Full christian and maiden name of mother Ruby Rinkard 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Hamilton Co. 16. Her residence Same
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes. 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Carolyn Anne Gabel

Carolyn Anne Gabel deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Carolyn Anne Gabel

Subscribed and sworn to before me, this 10th day of June, 1950

Arah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Dean Franklin Turner
To
Carolyn Anne Gabel

BE IT REMEMBERED, That on this 10th day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Dean Franklin Turner and Carolyn Anne Gabel and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Arah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 10th day of June, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 27th day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Dean Franklin Turner and Carolyn Anne Gabel on the 25th day of June, 1950

Milo S. Winkle

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A393961

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Robert Henry Dill to Mary Alice Colyer

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Robert Henry Dill
2. Color W 3. Where born Indianapolis Ind. (Town, County, State or Country) 4. When born Dec 16 1927 (Day, Month, Year)
5. Present residence 24 Wallace Lane Indianapolis Ind.
6. Present occupation Farm Implement Sales 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father E. Millard Dill 10. His color W
11. His birthplace Morgan Co. Ind. 12. His occupation Farm Implement Sales 13. His residence 24 Wallace Lane Indpls.
14. Full christian and maiden name of mother Mrs. Gertrude Paddock 15. Her color W 16. Her occupation Housewife
17. Her birthplace Johnson Co. Ind. 18. Her residence 24 Wallace Lane 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Robert Henry Dill deposes and says that has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Robert Henry Dill

Subscribed and sworn to before me, this 10th day of June, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A393962

Application is hereby made for a license for the marriage of FEMALE

Mary Alice Colyer to Robert Henry Dill

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Mary Alice Colyer
2. Color W 3. Where born Salt Lake City Utah (Town, County, State or Country) 4. When born Aug 16-1928 (Day, Month, Year)
5. Present residence Noblesville Ind. R 5 Box 197
6. Present occupation Not employed 7. Full christian and surname of father Durard B. Colyer
8. His color W 9. His birthplace Illinois 10. His occupation Farmer 11. His residence Noblesville
12. Full christian and maiden name of mother Marguerite Taylor 13. Her color W 14. Her occupation Housewife
15. Her birthplace Illinois 16. Her residence Noblesville Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Mary Alice Colyer deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Mary A. Colyer

Subscribed and sworn to before me, this 10th day of June, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Robert Henry Dill
To
Mary Alice Colyer

ss:

Indiana, to-wit: Hendricks County, ss:

BE IT REMEMBERED, That on this 10th day of June, 1950, the following Marriage License was issued, to-wit:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Robert Henry Dill and Mary Alice Colyer and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 10th day of June, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 21st day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Robert Henry Dill and Mary Alice Colyer on the 17th day of June, 1950 Rev. Wallace W. Deyo

Marriage Record, No. 21, Hendricks County, Indiana

MALE

Certificate No. A95776

Application for Marriage License

Application is hereby made for a license for the marriage of Raymond E. Polley to Katherine Louise Jewell

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Raymond E. Polley
2. Color W 3. Where born Pontiac, Michigan (Town, County, State or Country) 4. When born Apr 29-1929 (Day, Month, Year)
5. Present residence 1608 Ingewood, Indianapolis
6. Present occupation Salesman 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Raymond E. Polley 10. His color W 11. His birthplace Logansport Ind. 12. His occupation Roofer 13. His residence 1315 E. Michigan, Ind
14. Full christian and maiden name of mother Viola Ann Moore 15. Her color W 16. Her occupation Foreman
17. Her birthplace Joliet, Ill 18. Her residence 420 E. 28th Indpls 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Raymond E. Polley deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Raymond E Polley

Raymond E Polley

Subscribed and sworn to before me, this 10th day of June, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

FEMALE

Certificate No. A95821

Application for Marriage License

Application is hereby made for a license for the marriage of Katherine Louise Jewell to Raymond E. Polley

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Katherine Louise Jewell
2. Color W 3. Where born Indianapolis Ind. (Town, County, State or Country) 4. When born March 9-1930 (Day, Month, Year)
5. Present residence 2817 McPherson, Indianapolis
6. Present occupation Not employed 7. Full christian and surname of father Edgar Jewell
8. His color W 9. His birthplace Logansport Ind. 10. His occupation Painter 11. His residence 2817 McPherson
12. Full christian and maiden name of mother Flonie Mason 13. Her color W 14. Her occupation Housewife
15. Her birthplace Buford, Ind. 16. Her residence 2817 McPherson, Indianapolis
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Katherine Louise Jewell deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Katherine Louise Jewell

Katherine Louise Jewell

Subscribed and sworn to before me, this 10th day of June, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Raymond E. Polley
To
Katherine Louise Jewell

BE IT REMEMBERED, That on this 10th day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Raymond E. Polley and Katherine Louise Jewell and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 10th day of June, 1950 (SEAL)

BE IT FURTHER REMEMBERED, That on this 15th day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Raymond E. Polley and Katherine Louise Jewell on the 10th day of June, 1950

Thomas P. Devaney (Seal)

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 52997

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Richard Hugh Holzer to Martha Ann Bower

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Richard Hugh Holzer
2. Color Wh. 3. Where born Indpls. Ind. (Town, County, State or Country) 4. When born Feb 25 - 1927 (Day, Month, Year)
5. Present residence 3325 No. Euclid, Indpls.
6. Present occupation Dept. Manager 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Nick A. Holzer 10. His color Wh
11. His birthplace Madison Ind. 12. His occupation Salesman 13. His residence Same
14. Full christian and maiden name of mother Maude A. Morrow 15. Her color Wh. 16. Her occupation Housewife
17. Her birthplace Allen Co. Ind. 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Richard Hugh Holzer

Richard Hugh Holzer deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Richard Hugh Holzer

Subscribed and sworn to before me, this 12th day of June, 1950

Arah M Johnson Clerk Hendricks Circuit Court

Certificate No. A 52996

FEMALE

Application is hereby made for a license for the marriage of Martha Ann Bower to Richard Hugh Holzer

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Martha Ann Bower
2. Color Wh. 3. Where born Indpls. (Town, County, State or Country) 4. When born Dec 8-1928 (Day, Month, Year)
5. Present residence 5950 Guilford Indpls. Ind.
6. Present occupation Repair Clerk. 7. Full christian and surname of father Vernon C. Bower
8. His color Wh. 9. His birthplace Indiana 10. His occupation Civil Engr. 11. His residence Same
12. Full christian and maiden name of mother Hazel F. Hull 13. Her color Wh 14. Her occupation Housewife
15. Her birthplace Indpls. Ind. 16. Her residence Same
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Martha Ann Bower

Martha Ann Bower deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Martha Ann Bower

Subscribed and sworn to before me, this 12th day of June, 1950

Arah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Richard Hugh Holzer
Martha Ann Bower

ss:

BE IT REMEMBERED, That on this 12th day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Richard Hugh Holzer and Martha Ann Bower and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Arah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 12th day of June, 1950.

(SEAL)

BE IT FURTHER REMEMBERED, That on this 29th day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Richard Hugh Holzer and Martha Ann Bower on the 25th day of June, 1950

J Maurice Thompson, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A335239

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Frank Charles Mount to Lola Frances Wethington

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Frank Charles Mount
2. Color W 3. Where born Jamestown, Ohio (Town, County, State or Country) 4. When born June 5 - 1894 (Day, Month, Year)
5. Present residence 4320 Rockville Road, Indpls. Ind.
6. Present occupation Not employed 7. If no occupation, what means has the male contracting party to support a family? None
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Frank C. Mount 10. His color W
11. His birthplace Alexander, Ohio 12. His occupation Deceased 13. His residence Deceased
14. Full christian and maiden name of mother Carrie Heil 15. Her color W 16. Her occupation Housewife
17. Her birthplace Jamestown Ohio 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Death - 1948
25. Give the names and ages of any minor children of the male applicant from all former marriages None
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Frank Charles Mount

Frank Charles Mount deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Frank Charles Mount

Subscribed and sworn to before me, this 14th day of June 1950

Lulah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A335321

Application is hereby made for a license for the marriage of

FEMALE

Lola Frances Wethington to Frank Charles Mount

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Lola Frances Wethington
2. Color W 3. Where born Clementsville, Ky (Town, County, State or Country) 4. When born Jan 18 - 1912 (Day, Month, Year)
5. Present residence 4320 Rockville Road Indianapolis Ind.
6. Present occupation Sales Lady - H.P. Wasson Co. 7. Full christian and surname of father S. Frank Wethington
8. His color W 9. His birthplace Kentucky 10. His occupation Retired 11. His residence Jamestown, Ind
12. Full christian and maiden name of mother Emma K. Woodburn 13. Her color W 14. Her occupation Housewife
15. Her birthplace Kentucky 16. Her residence Jamestown Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Lola Frances Wethington

Lola Frances Wethington deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Lola Frances Wethington

Subscribed and sworn to before me, this 14th day of June 1950

Lulah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Frank Charles Mount
To
Lola Frances Wethington

ss:

BE IT REMEMBERED, That on this 14th day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Frank Charles Mount and Lola Frances Wethington and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Lulah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 14th day of June, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 15th day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Frank Charles Mount and Lola Frances Wethington on the 14 day of June, 1950

Thomas P. Dunning (Seal)

June 10 1950

TO WHOM IT MAY CONSERN.

I Howard D Brenneman hereby give my consent to the marriage of my Son Roy H. Brenneman To Martha Jane Edmondson.

Signed Howard D. Brenneman Father

State of Indiana
County of Randolph

Subscribed And sworn to before me a Notary Public in and for said County this 10 day of June 1950

W. A. Fields Notary Public

My commission expires January 5th 1953

Cert... ...ALE

1. ...
2. 29
5. Pl...
6. ...

9. ...
11. ...

14. Full christian and maiden name of mother Dora Deora Dooner 15. Her color W 16. Her occupation Housewife
17. Her birthplace Henry Co. Ind. 18. Her residence Lynn, Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages.
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names.
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Roy H. Breneman deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives see attached statement consent to the issuance of this license.

Signature of Applicant Roy H. Breneman

Subscribed and sworn to before me, this 15th day of June, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A 76027 Application is hereby made for a license for the marriage of **FEMALE**

Martha Jane Edmondson to Roy H. Brenneman

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Martha Jane Edmondson
2. Color W 3. Where born Clayton, Ind. (Town, County, State or Country) 4. When born Oct. 28-1929 (Day, Month, Year)
5. Present residence Clayton, Ind.
6. Present occupation Stenographer 7. Full christian and surname of father Charles Samuel Edmondson
8. His color W 9. His birthplace Hendricks Co. 10. His occupation Farmer 11. His residence Clayton,
12. Full christian and maiden name of mother Ruth Lucille Martin 13. Her color W 14. Her occupation Housekeeper
15. Her birthplace Carlesburg, Ind. 16. Her residence Clayton Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Martha Jane Edmondson deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Martha Jane Edmondson

Subscribed and sworn to before me, this 15th day of June, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Roy H. Brenneman
To
Martha Jane Edmondson

ss:

BE IT REMEMBERED, That on this 15th day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Roy H. Brenneman and Martha Jane Edmondson and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 15th day of June, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 28th day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Roy H Brenneman and Martha Jane Edmondson on the 25th day of June, 1950 P. J. McCullen

Marriage Record, No. 21, Hendricks County, Indiana

MALE

Application for Marriage License

Certificate No. A373830

Application is hereby made for a license for the marriage of James Gilbert Russell to Sarah Kathryn Gerth

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is James Gilbert Russell
2. Color wh. 3. Where born Terre Haute Ind. (Town, County, State or Country) 4. When born Jan 22-1927 (Day, Month, Year)
5. Present residence Hillsdale Ind.
6. Present occupation School Teacher 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father John Fredrick Russell 10. His color wh.
11. His birthplace Marshall Ill. 12. His occupation Gen'l contractor 13. His residence Same
14. Full christian and maiden name of mother Grace York 15. Her color wh 16. Her occupation Housewife
17. Her birthplace Hillsdale Ind 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant James Gilbert Russell

James Gilbert Russell deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives James Gilbert Russell consent to the issuance of this license.

Subscribed and sworn to before me, this 17th day of June, 1950

Carl M Johnson Clerk Hendricks Circuit Court

FEMALE

Certificate No. A373833

Application is hereby made for a license for the marriage of Sarah Kathryn Gerth to James Gilbert Russell

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Sarah Kathryn Gerth
2. Color wh. 3. Where born Bridgeport Ind (Town, County, State or Country) 4. When born Oct 9-1926 (Day, Month, Year)
5. Present residence Bridgeport
6. Present occupation School Teacher 7. Full christian and surname of father Elmer LaForest Gerth
8. His color wh. 9. His birthplace Marion Co Ind. 10. His occupation Farmer 11. His residence Same
12. Full christian and maiden name of mother Dorothy Stout 13. Her color wh 14. Her occupation Housewife
15. Her birthplace Hendricks Co. Ind. 16. Her residence Same
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes. 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Sarah Kathryn Gerth

Sarah Kathryn Gerth deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives Sarah Kathryn Gerth consent to the issuance of this license.

Subscribed and sworn to before me, this 17th day of June, 1950

Carl M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

James Gilbert Russell
To
Sarah Kathryn Gerth

ss:

BE IT REMEMBERED, That on this 17th day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife James Gilbert Russell and Sarah Kathryn Gerth and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Carl M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 17th day of June, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 6th day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, James Gilbert Russell and Sarah Kathryn Gerth on the 25 day of June, 1950

Robert C. Royse

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A327510

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Homer William Kivett to Virginia Pauline Phillips.

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Homer William Kivett
2. Color wh. 3. Where born Indpls. Ind. (Town, County, State or Country) 4. When born Nov 30-1918 (Day, Month, Year)
5. Present residence 3410 E 9th Indpls. Ind
6. Present occupation Salesman 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Homer L. Kivett 10. His color wh.
11. His birthplace Indiana 12. His occupation Welder 13. His residence same
14. Full christian and maiden name of mother Esther Sertay 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Hayesville Ind. 18. Her residence same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce April 1950
25. Give the names and ages of any minor children of the male applicant from all former marriages Joyce - 10 Ronald 6
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names. Same
27. Are you supporting them and are you complying with all Court orders issued for their support? Yes.
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Homer William Kivett deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant H. W. Kivett

H. W. Kivett

Subscribed and sworn to before me, this 17th day of June, 1950

Arah M Johnson Clerk Hendricks Circuit Court

Certificate No. A327511

Application is hereby made for a license for the marriage of

FEMALE

Virginia Pauline Phillips to Homer William Kivett

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Virginia Pauline Phillips
2. Color wh. 3. Where born Attica Ohio (Town, County, State or Country) 4. When born May 28-1927 (Day, Month, Year)
5. Present residence 510 E 10th St apt 12 Indpls.
6. Present occupation Clerk Typist 7. Full christian and surname of father J. Perkins
8. His color wh. 9. His birthplace Ohio 10. His occupation Oilwelldriller 11. His residence Utica Ohio
12. Full christian and maiden name of mother Burgh Harlow 13. Her color wh. 14. Her occupation Cook
15. Her birthplace Macon W. Virginia 16. Her residence Mt. Vernon Ohio
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce Dec - 1947.
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Virginia Pauline Phillips deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Virginia Pauline Phillips

Virginia Pauline Phillips

Subscribed and sworn to before me, this 17th day of June, 1950

Arah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Homer William Kivett
To
Virginia Pauline Phillips

ss:

BE IT REMEMBERED, That on this 17th day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as ~~Husband~~ and Wife Homer William Kivett and Virginia Pauline Phillips and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Arah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 17th day of June, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 28th day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Homer William Kivett and Virginia Pauline Phillips on the 23rd day of June, 1950

Howard W. Stone, Minister
Indianapolis, Indiana

Marriage Record, No. 21, Hendricks County, Indiana

Application for Marriage License

MALE

Certificate No. A37382/

Application is hereby made for a license for the marriage of George Kenneth Carr, Jr. to Clara Jean Snepp

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is George Kenneth Carr, Jr.
2. Color W 3. Where born Plainfield Ind. (Town, County, State or Country) 4. When born Dec 12-1930 (Day, Month, Year)
5. Present residence Plainfield Ind.
6. Present occupation Order Clerk - Sears Roebuck 7. If no occupation, what means has the male contracting party to support a family? No
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin
9. Full christian and surname of father George Kenneth Carr, Sr. 10. His color W
11. His birthplace Lawrence, Kansas 12. His occupation Painter & Retired Bus Driver 13. His residence Plainfield Ind.
14. Full christian and maiden name of mother Berniece Geneva Smith 15. Her color W 16. Her occupation Housewife
17. Her birthplace Mooresville Ind. 18. Her residence Plainfield Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant George Kenneth Carr Jr.

Berniece G. Carr deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. Berniece G. Carr

Subscribed and sworn to before me, this 17th day of June, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A37382 Application is hereby made for a license for the marriage of Clara Jean Snepp to George Kenneth Carr Jr. FEMALE

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Clara Jean Snepp
2. Color W 3. Where born Edenburgh Ind. (Town, County, State or Country) 4. When born Aug 3-1931 (Day, Month, Year)
5. Present residence Plainfield Ind.
6. Present occupation Clerk Typist 7. Full christian and surname of father Ira B. Snepp
8. His color W 9. His birthplace Indiana 10. His occupation Plant Engr. 11. His residence Plainfield
12. Full christian and maiden name of mother Helen Marie Harrison 13. Her color W 14. Her occupation Housewife
15. Her birthplace Indiana 16. Her residence Plainfield Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Clara Jean Snepp

Clara Jean Snepp deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Clara Jean Snepp

Subscribed and sworn to before me, this 17th day of June, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

George Kenneth Carr Jr.
To
Clara Jean Snepp

BE IT REMEMBERED, That on this 17th day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife George Kenneth Carr Jr. and Clara Jean Snepp and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 17th day of June, 1950.

(SEAL)

BE IT FURTHER REMEMBERED, That on this 28th day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, George Kenneth Carr Jr. and Clara Jean Snepp on the 24th day of June, 1950

Robert Oldham Fife, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A25 1096

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Harry Allan Turaska to Mildred Kathleen Ellis

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Harry Allan Turaska
2. Color W 3. Where born Terre Haute Ind. (Town, County, State or Country) 4. When born June 27-1921 (Day, Month, Year)
5. Present residence 284 N. Center St. Plainfield Ind.
6. Present occupation Merchant (grocer) 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Edward Henry Turaska 10. His color W
11. His birthplace Nebraska, Ind. 12. His occupation Railroad Mstr. 13. His residence Deceased
14. Full christian and maiden name of mother Julia Bosler 15. Her color W 16. Her occupation Housewife
17. Her birthplace Verona, Ind. 18. Her residence 284 N. Center, Plainfield 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Harry Allan Turaska deposes and says that has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Harry Allan Turaska

Harry Allan Turaska

Subscribed and sworn to before me, this 22nd day of June, 1950

Eldah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A25 135-4

Application is hereby made for a license for the marriage of

FEMALE

Mildred Kathleen Ellis to Harry Turaska

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Mildred Kathleen Ellis
2. Color W 3. Where born Plainfield, Ind. (Town, County, State or Country) 4. When born Nov. 9-1925 (Day, Month, Year)
5. Present residence Avon Ave. Plainfield Ind. 6. Present occupation Secretary 7. Full christian and surname of father Dorsey D. Ellis
8. His color W 9. His birthplace Plainfield Ind. 10. His occupation Carpenter 11. His residence Plainfield
12. Full christian and maiden name of mother Claudia Campbell 13. Her color W 14. Her occupation Housewife
15. Her birthplace Connersville Ind. 16. Her residence Plainfield, Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Mildred Kathleen Ellis deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Mildred Kathleen Ellis

Mildred Kathleen Ellis

Subscribed and sworn to before me, this 22nd day of June, 1950

Eldah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Harry Allan Turaska
To
Mildred Kathleen Ellis

ss:

BE IT REMEMBERED, That on this 22nd day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Harry Allan Turaska and Mildred Kathleen Ellis and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Eldah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 22nd day of June, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 28th day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Harry Allan Turaska and Mildred Kathleen Ellis on the 25 day of June, 1950 Rev. F. L. Beisel

Marriage Record, No. 21, Hendricks County, Indiana

MALE

Certificate No. A 95520

Application for Marriage License

Application is hereby made for a license for the marriage of Warren Earl Koelling to Violet Mable Manion

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Warren Earl Koelling
2. Color Wh 3. Where born Indpls. Ind (Town, County, State or Country) 4. When born Apr. 8-1927 (Day, Month, Year)
5. Present residence 2520 Brookside Ave Indpls.
6. Present occupation Furnace man 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Wm Koelling 10. His color Wh.
11. His birthplace Indpls 12. His occupation Milk man 13. His residence Indpls.
14. Full christian and maiden name of mother Alice M. Williams 15. Her color wh 16. Her occupation Housewife
17. Her birthplace Indpls. 18. Her residence Indpls 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Warren Earl Koelling

Warren Earl Koelling deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Warren Earl Koelling

Subscribed and sworn to before me, this 23rd day of June 1950

Adah M Johnson Clerk Hendricks Circuit Court

FEMALE

Certificate No. A 406571 Application is hereby made for a license for the marriage of Violet Mable Manion to Warren Earl Koelling

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Violet Mable Manion
2. Color Wh. 3. Where born Bedford Ind. 4. When born Oct 17-1927 (Day, Month, Year)
5. Present residence 2858 McClure St Indpls.
6. Present occupation At Home 7. Full christian and surname of father Emmett Manion
8. His color Wh. 9. His birthplace Bedford 10. His occupation Farmer 11. His residence Crawfordsville
12. Full christian and maiden name of mother Edith Hillenburg 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Bedford Ind. 16. Her residence Dead
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Violet Mable Manion

Violet Mable Manion deposes and says that ~~She~~ has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Violet Mable Manion

Subscribed and sworn to before me, this 23rd day of June 1950

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Warren Earl Koelling
To
Violet Mable Manion

ss:

BE IT REMEMBERED, That on this 23rd day of June 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Warren Earl Koelling and Violet Mable Manion and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 23rd day of June 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 14th day of July 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Warren Earl Koelling and Violet Mable Manion on the 23rd day of June 1950

Rev. Van Ness Chappell

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A291340

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Joseph J. Kretzer to Eva D. Wall

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Joseph J. Kretzer
2. Color W 3. Where born Indianapolis Ind. (Town, County, State or Country) 4. When born Jan 17-1891 (Day, Month, Year)
5. Present residence 445 East Morris St., Indianapolis
6. Present occupation Machinist 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Peter Kretzer 10. His color W
11. His birthplace Germany 12. His occupation Dye maker 13. His residence Deceased
14. Full christian and maiden name of mother Mary Sebuk 15. Her color W 16. Her occupation Housekeeper
17. Her birthplace Indianapolis 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Death - 1918
25. Give the names and ages of any minor children of the male applicant from all former marriages No
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Joseph J. Kretzer deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Joseph J Kretzer

Joseph J Kretzer

Subscribed and sworn to before me, this 26 day of June, 1950

Cedah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A291276

Application for Marriage License

FEMALE

Application is hereby made for a license for the marriage of Eva D. Wall to Joseph J. Kretzer

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Eva D. Wall
2. Color W 3. Where born Indianapolis 4. When born June 1 - 1894 (Day, Month, Year)
5. Present residence 695 So. Rybolt (Town, County, State or Country)
6. Present occupation Housekeeper 7. Full christian and surname of father Herbert Wall
8. His color W 9. His birthplace Indiana 10. His occupation Factory 11. His residence Deceased
12. Full christian and maiden name of mother Susie L. Parris 13. Her color W 14. Her occupation Housewife
15. Her birthplace Medora, Ind. 16. Her residence Deceased
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce - 1944
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Eva D. Wall deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Eva D. Wall

Eva D. Wall

Subscribed and sworn to before me, this 24 day of June, 1950

Cedah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Joseph J. Kretzer
To
Eva D Wall

ss:

BE IT REMEMBERED, That on this 24th day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Joseph J Kretzer and Eva D. Wall and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Cedah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 24th day of June, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 7th day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Joseph Kretzer and Eva Wall on the 26th day of June, 1950

REV. CARL L. WILBERDING - Carl L. Wilberding

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A315150

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Royal G. Fites to Leona M. Glaze

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Royal G. Fites
2. Color W 3. Where born Deeds, Indiana (Town, County, State or Country) 4. When born Nov 27-1905 (Day, Month, Year)
5. Present residence 1026 South Illinois St. Indianapolis
6. Present occupation Packing House Worker. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Thomas Edward Fites 10. His color W
11. His birthplace Ohio 12. His occupation Jeweler 13. His residence Deceased
14. Full christian and maiden name of mother Harriet Fite 15. Her color W 16. Her occupation Housewife
17. Her birthplace Deeds, Indiana 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? Twice 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce 1927 & 1947
25. Give the names and ages of any minor children of the male applicant from all former marriages No
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Royal G. Fites

Royal G. Fites deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Royal G. Fites

Subscribed and sworn to before me, this 24th day of June, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A315151

Application is hereby made for a license for the marriage of

FEMALE

Leona M. Glaze to Royal G. Fites

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Leona M. Glaze
2. Color W 3. Where born St. Petersburg, Florida (Town, County, State or Country) 4. When born Dec 19-1907 (Day, Month, Year)
5. Present residence 1026 So. Illinois St. Indianapolis
6. Present occupation R. N. 7. Full christian and surname of father Otto Harbit
8. His color W 9. His birthplace Indiana 10. His occupation Retired Farmer 11. His residence Mapleton
12. Full christian and maiden name of mother Elizabeth E. Morrow 13. Her color W 14. Her occupation Housewife
15. Her birthplace Illinois - Centralia 16. Her residence Lafayette
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? Twice 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Death - 1925 Divorce - 1946
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Leona M. Glaze

Leona M. Glaze deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Leona M Glaze

Subscribed and sworn to before me, this 24th day of June, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Royal G. Fites
To
Leona M. Glaze

Indiana, to-wit: Hendricks County, ss:

BE IT REMEMBERED, That on this 24th day of June, 1950, the following Marriage License was issued, to-wit:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Royal G. Fites and Leona M. Glaze and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 24th day of June, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 27th day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Royal G Fites and Leona M. Glaze on the 24 day of June, 1950

Raymond L. Albes

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 251408

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Maynard L. Fisher to Eloise Mason

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Maynard L. Fisher
2. Color White 3. Where born Clayton, Ind., R. R. 2 (Town, County, State or Country) 4. When born April 15-1909 (Day, Month, Year)
5. Present residence Clayton, Ind., R. R. 2
6. Present occupation Laborer 7. If no occupation, what means has the male contracting party to support a family? —
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Nathan Harrison Fisher 10. His color White
11. His birthplace Clayton, Ind. R. R. 12. His occupation Deceased 13. His residence Deceased
14. Full christian and maiden name of mother Corona Adeline Mildabarger 15. Her color White 16. Her occupation Housewife
17. Her birthplace Clinton, Ind. R. R. 18. Her residence Clayton, Ind., R. R. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce February 8-1947
25. Give the names and ages of any minor children of the male applicant from all former marriages Kenneth Lee Fisher, age 19 and Barbara Ann Fisher, age 15.
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names Barbara Ann Fisher
27. Are you supporting them and are you complying with all Court orders issued for their support? Yes.
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Maynard L. Fisher

Maynard L. Fisher deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Maynard L. Fisher

Subscribed and sworn to before me, this 24th day of June, 1950

Adah M. Johnson, Clerk Hendricks Circuit Court

Certificate No. A 251409

Application is hereby made for a license for the marriage of

FEMALE

Eloise Mason to Maynard L. Fisher

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Eloise Mason
2. Color White 3. Where born ~~Ky~~ Morocco Ind. (Town, County, State or Country) 4. When born June 6-1919 (Day, Month, Year)
5. Present residence Clayton, Indiana.
6. Present occupation Operator in Cleaning and Pressing Shop 7. Full christian and surname of father Cody B. Penrod
8. His color White 9. His birthplace Lexington, Ky. 10. His occupation Farmer 11. His residence Deceased
12. Full christian and maiden name of mother Sadra Lillian Kupsell 13. Her color White 14. Her occupation ~~Housewife~~ Keeper
15. Her birthplace Morocco, Ind. 16. Her residence Morocco, Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Death December 26-1948.
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Eloise Mason

Eloise Mason deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Eloise Mason

Subscribed and sworn to before me, this 24th day of June, 1950.

Adah M. Johnson, Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Maynard L. Fisher
To
Eloise Mason

BE IT REMEMBERED, That on this 24th day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Maynard L. Fisher and Eloise Mason and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 24th day of June, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 18th day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Maynard L. Fisher and Eloise Mason on the 30th day of June, 1950

Claus Studebaker
1214 S. Mich. St. South Bend Ind.

Marriage Record, No. 21, Hendricks County, Indiana

Application for Marriage License

MALE

Certificate No. A251126

Application is hereby made for a license for the marriage of Earl Percival Pepper to Hazel Vernadette Schneider

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Earl Percival Pepper
2. Color wh. 3. Where born Butler Ind. (Town, County, State or Country) 4. When born July 10-1903 (Day, Month, Year)
5. Present residence Rt 3 Danville Ind.
6. Present occupation Tree Trimber 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Byron J. Pepper 10. His color wh.
11. His birthplace Butler Ind. 12. His occupation Tool designer 13. His residence Detroit Mich.
14. Full christian and maiden name of mother Louisa Durham 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Indiana 18. Her residence Died 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorced - May 27- 1950
25. Give the names and ages of any minor children of the male applicant from all former marriages Robert - 16 Inventory of this affidavit
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant × Carl P. Pepper

Carl Percival Pepper deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. × Carl P. Pepper

Subscribed and sworn to before me, this 26 th day of June, 1950

Isaak M. Johnson Clerk Hendricks Circuit Court

FEMALE

Certificate No. A53335

Application is hereby made for a license for the marriage of Hazel Vernadette Schneider to Earl Percival Pepper

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Hazel Vernadette Schneider
2. Color wh. 3. Where born Antenday Ohio (Town, County, State or Country) 4. When born Apr 15- 1904 (Day, Month, Year)
5. Present residence Rt 3 Danville
6. Present occupation Housekeeper 7. Full christian and surname of father W. Z. Rogers
8. His color wh. 9. His birthplace Missouri 10. His occupation School Teacher 11. His residence Died
12. Full christian and maiden name of mother Ella Collins 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Ohio. 16. Her residence Fort Wayne Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorced - 1944.
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Hazel V. Schneider +

Hazel Vernadette Schneider deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Hazel V. Schneider ×

Subscribed and sworn to before me, this 26 th day of June, 1950

Isaak M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Earl Percival Pepper
To
Hazel Vernadette Schneider

ss:

BE IT REMEMBERED, That on this 26 th day of June, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Earl Percival Pepper and Hazel Vernadette and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Isaak M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 26th day of June, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 30 th day of June, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Earl Percival Pepper and Hazel Vernadette Schneider on the 28 th day of June, 1950

Thomas P. Dinsey J. P. (Seal)

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A315487 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

Chase Evans Brown Jr. to Marilou Trippet

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Chase Evans Brown Jr.
2. Color wh. 3. Where born Indpls. (Town, County, State or Country) 4. When born July 26-1927 (Day, Month, Year)
5. Present residence 1110 N. Bosart Ave Indianapolis
6. Present occupation Mould Press Operator 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Chas Evans Brown L. 10. His color wh.
11. His birthplace Frankfort Ind. 12. His occupation Railroad conductor 13. His residence Same
14. Full christian and maiden name of mother Helen A. Thatcher 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Mattoon Ill. 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Chas E Brown Jr

Chase Evans Brown Jr. deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Chas E. Brown Jr

Subscribed and sworn to before me, this 30th day of June, 1950

Carl W. Johnson Clerk Hendricks Circuit Court

No. A315486

Application for Marriage License—Female

OFFICIAL FORM OF APPLICATION FOR MARRIAGE LICENSE AS DETERMINED BY THE STATE BOARD OF HEALTH, ACCORDING TO CHAPTER 126, OF THE ACTS OF THE SIXTY-FOURTH GENERAL ASSEMBLY, CHAPTER 31 OF THE ACTS OF THE EIGHTY-SECOND GENERAL ASSEMBLY. (MUST BE FILLED OUT IN INK.)

Application is hereby made for a license for the marriage of Certificate No.

X Marilou Trippet to Chase Evans Brown Jr

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES

1. *The full christian and surname of the woman is* X Marilou Trippet
2. *Color* White *3. Where born* Petersburg Pike, Indiana (Town, County, State or Country)
4. *When born* Sept 30, 1924 (Day, Month and Year)
5. *Present residence* 1320 N. Delaware #60, Indianapolis, Ind
6. *Present occupation* Bookkeeper & Cashier
7. *Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years?* No
8. *Is this your first marriage?* No *9. If not, how often have you been married?* Once
10. *Has such prior marriage, or marriages, been dissolved?* Yes
11. *If so, how and when and where?* Divorced, Indianapolis, Ind March 25, 1949
12. *Is the female contracting party afflicted with epilepsy, tuberculosis, venereal, or any other contagious or transmissible disease?* No
13. *Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind?* No
14. *Full christian and surname of father* Everett Glenn Trippet
15. *His color* White *16. His birthplace* Hazelton, Ind
17. *His occupation* *18. His residence* deceased
19. *Full christian and maiden name of mother* Mabel Gertrude Gladish
20. *Her color* White *21. Her occupation* Housekeeper
22. *Her birthplace* Petersburg, Ind *23. Her residence* 1320 N Del. #60 Indpls, Ind

Name in full of Applicant X Marilou Trippet

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. B39209 ✓

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Ila Walker, Jr. to Shirley Ann Herrin

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Ila Roscoe Walker, Jr.
2. Color W 3. Where born East Chicago, Ind - Lake (Town, County, State or Country) 4. When born 20 - May - 1926 (Day, Month, Year)
5. Present residence 4547 Towle Ave, Hammond, Ind
6. Present occupation Turret Lathe Operator 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Ila Roscoe Walker, Sr. 10. His color W
11. His birthplace Decatur, Ill 12. His occupation Truck driver 13. His residence 4547 Towle Ave.
14. Full christian and maiden name of mother ~~Ethel~~ Lillian Papke 15. Her color W 16. Her occupation housewife
17. Her birthplace Hammond, Ind. 18. Her residence 4547 Towle Ave. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? no. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? no.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? no.

State of Indiana, Hendricks County, ss:

Ila Roscoe Walker Jr. deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant × Ila Roscoe Walker, Jr.

Subscribed and sworn to before me, this 30th day of June 19 50

× Ila Roscoe Walker, Jr.

Adah M Johnson Clerk Hendricks Circuit Court

Certificate No. B 29446

Application is hereby made for a license for the marriage of

FEMALE

Shirley Ann Herrin to Ila Walker, Jr.

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Shirley Ann Herrin
2. Color W 3. Where born Danville, Indiana (Town, County, State or Country) 4. When born October 25-31 (Day, Month, Year)
5. Present residence R.R. #1 Box 186 Danville
6. Present occupation None 7. Full christian and surname of father Eugene E. Herrin
8. His color W 9. His birthplace Lawrence, Ill. 10. His occupation Farmer 11. His residence Jesse
12. Full christian and maiden name of mother Geneva E. Herrin 13. Her color W. 14. Her occupation housewife
15. Her birthplace Spencer, Indiana 16. Her residence Lane.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Shirley Ann Herrin deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Shirley Ann Herrin

Subscribed and sworn to before me, this 30th day of June, 19 50

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Ila Roscoe Walker Jr. To Shirley Ann Herrin

Indiana, to-wit: Hendricks County, ss:

ss: BE IT REMEMBERED, That on this 30th day of June, 19 50, the following Marriage License was issued, to-wit:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Ila Roscoe Walker Jr. and Shirley Ann Herrin and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 30th day of June, 19 50

(SEAL)

BE IT FURTHER REMEMBERED, That on this 3rd day of July, 19 50, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Ila Roscoe Walker Jr. and Shirley Ann Herrin on the First day of July, 19 50

Raymond L. Alber

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A294423

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Clifford Lee Chase to Mary Eileen Brunton

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Clifford Lee Chase
2. Color W 3. Where born Lawrenceburg Ind. (Town, County, State or Country) 4. When born July 11-1920 (Day, Month, Year)
5. Present residence 54 So. Warman, Indianapolis
6. Present occupation Telephone Co. 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Malan Chase 10. His color W
11. His birthplace Indiana 12. His occupation Fruit Dispatcher 13. His residence 10300 E. Colfax, Aurora Col.
14. Full christian and maiden name of mother Eunice Puckett 15. Her color W 16. Her occupation Housewife
17. Her birthplace Indiana 18. Her residence Aurora, Col. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce - 1950 - Feb.
25. Give the names and ages of any minor children of the male applicant from all former marriages None
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Clifford Lee Chase

Clifford Lee Chase deposes and says that has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Clifford Lee Chase

Subscribed and sworn to before me, this 1st day of July, 1950

Ledah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A294422

FEMALE

Application is hereby made for a license for the marriage of Mary Eileen Brunton to Clifford Lee Chase

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Mary Eileen Brunton
2. Color W 3. Where born Indianapolis (Town, County, State or Country) 4. When born Jan 19-1922 (Day, Month, Year)
5. Present residence 353 West Ray Indianapolis
6. Present occupation Financial Clerk 7. Full christian and surname of father Herbert Brunton
8. His color W 9. His birthplace Kentucky 10. His occupation Retired 11. His residence 353 W. Ray, Indpls
12. Full christian and maiden name of mother Edna Batten 13. Her color W 14. Her occupation Housewife
15. Her birthplace Kentucky 16. Her residence deceased
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Mary Eileen Brunton

Mary Eileen Brunton deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Mary Eileen Brunton

Subscribed and sworn to before me, this 1st day of July, 1950

Ledah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Clifford Lee Chase
To
Mary Eileen Brunton

ss:

BE IT REMEMBERED, That on this 1st day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Clifford Lee Chase and Mary Eileen Brunton and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Ledah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 1st day of July, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 5th day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Clifford Lee Chase and Mary Eileen Brunton on the first day of July, 1950

Miles S. Winkle

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 255620

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Harold B. Smith to Gladys Maxine Dukes

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Harold B. Smith
2. Color wh. 3. Where born North Salem Ind (Town, County, State or Country) 4. When born Mar 29 - 24 (Day, Month, Year)
5. Present residence 2157 No. Temple Indpls.
6. Present occupation Model Maker 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Clarence R. Smith 10. His color wh.
11. His birthplace Pittsburg Ind. 12. His occupation Dead 13. His residence Dead
14. Full christian and maiden name of mother Edna F. Gray 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace No. Salem Ind. 18. Her residence Indpls. Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Harold B Smith deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant + Harold B. Smith

+ Harold B. Smith

Subscribed and sworn to before me, this 1st day of July, 1950

Arah M Johnson Clerk Hendricks Circuit Court

Certificate No. A 255619

Application is hereby made for a license for the marriage of

FEMALE

Gladys Maxine Dukes to Harold B. Smith

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Gladys Maxine Dukes
2. Color wh. 3. Where born Indpls. Ind (Town, County, State or Country) 4. When born Nov 26 - 1920 (Day, Month, Year)
5. Present residence 4955 W. 12th Indpls.
6. Present occupation File Clerk 7. Full christian and surname of father Russell Dukes
8. His color wh. 9. His birthplace Frankfort Ind. 10. His occupation Machinist 11. His residence Same
12. Full christian and maiden name of mother Marguerite Fox 13. Her color wh. 14. Her occupation Teamstress
15. Her birthplace Indpls. Ind. 16. Her residence Indpls.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes. 21. If so, how and when? Divorce June 22 - 1948.
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Gladys M. Dukes deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant + Gladys Dukes

+ Gladys Dukes

Subscribed and sworn to before me, this 1st day of July, 1950

Arah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Harold B. Smith
To
Gladys M. Dukes

ss:

BE IT REMEMBERED, That on this 1st day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Harold B. Smith and Gladys M. Dukes and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Arah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 1st day of July, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 3rd day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Harold B. Smith and Gladys M. Dukes on the First day of July, 1950

Raymond L. Alber

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A256749 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

Dale Edward Chalfant to Janet Gayle Ayers

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Dale Edward Chalfant
2. Color W 3. Where born Muncie, Delaware Co. Ind. (Town, County, State or Country) 4. When born Apr. 2-1931 (Day, Month, Year)
5. Present residence Danville, Ind.
6. Present occupation Furnace Installer 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Lemmie D. Chalfant 10. His color W
11. His birthplace Delaware Co. Ind. 12. His occupation Contractor - Plumbing & Heating 13. His residence Danville Ind.
14. Full christian and maiden name of mother Violet G. Fahrenbach 15. Her color W 16. Her occupation Housewife
17. Her birthplace Terre Haute, Ind. 18. Her residence Danville Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Dale Edward Chalfant

Lemmie D. Chalfant deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives his consent to the issuance of this license. Lemmie D. Chalfant, Father

Subscribed and sworn to before me, this 3rd day of July, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A256750 Application is hereby made for a license for the marriage of **FEMALE**

Janet Gayle Ayers to Dale Edward Chalfant

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Janet Gayle Ayers
2. Color W 3. Where born Hendricks Co. Ind. (Town, County, State or Country) 4. When born July 3-1934 (Day, Month, Year)
5. Present residence Putnamboro Ind.
6. Present occupation Not employed 7. Full christian and surname of father Morton Ayers
8. His color W 9. His birthplace Clinton Co. Ind. 10. His occupation Truck driver 11. His residence Danville, R.R.
12. Full christian and maiden name of mother Velda Russell 13. Her color W 14. Her occupation Housewife
15. Her birthplace Hendricks Co. Ind. 16. Her residence Putnamboro Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Janet Gayle Ayers

Velda F. Dugan deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. Velda F. Dugan, Mother

Subscribed and sworn to before me, this 3rd day of July, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Dale Edward Chalfant
To
Janet Gayle Ayers

ss:

BE IT REMEMBERED, That on this 3rd day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Dale Edward Chalfant and Janet Gayle Ayers and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 3rd day of July, 1950.

(SEAL)

BE IT FURTHER REMEMBERED, That on this 12th day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Dale Edward Chalfant and Janet Gayle Ayers on the 9th day of July, 1950

John Carl Jones, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Application for Marriage License

MALE

Certificate No. A255890

Application is hereby made for a license for the marriage of Hayden Bennett, Jr. to Phyllis Carol Barnhart

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Hayden Bennett, Jr.
2. Color W 3. Where born Greene Co. Linton, Ind. (Town, County, State or Country) 4. When born June 16-1927 (Day, Month, Year)
5. Present residence North Salem, Ind.
6. Present occupation Farmer 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Hayden Bennett 10. His color W
11. His birthplace Greene Co. Ind. 12. His occupation Miner 13. His residence Linton, Ind. R#2
14. Full christian and maiden name of mother Mary T.E. Weaver 15. Her color W 16. Her occupation Housewife
17. Her birthplace Greene Co. Ind. 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages.
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names.
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Hayden Bennett Jr.

Hayden Bennett Jr. deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Hayden Bennett Jr.

Subscribed and sworn to before me, this 3rd day of July, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A255984

Application is hereby made for a license for the marriage of Phyllis Carol Barnhart to Hayden Bennett, Jr.

FEMALE

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Phyllis Carol Barnhart
2. Color W 3. Where born Hendricks Co. Ind. North Salem (Town, County, State or Country) 4. When born Aug 31- 1933 (Day, Month, Year)
5. Present residence North Salem, Ind.
6. Present occupation Not Employed 7. Full christian and surname of father Frank Barnhart
8. His color W 9. His birthplace Crawfordsville Ind. 10. His occupation Farmer 11. His residence North Salem
12. Full christian and maiden name of mother Opal Broach 13. Her color W 14. Her occupation Housewife
15. Her birthplace Crawfordsville, Ind. 16. Her residence North Salem Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Phyllis Carol Barnhart

Opal B. Barnhart deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. Mrs. Opal Barnhart, mother of Phyllis

Subscribed and sworn to before me, this 3rd day of July, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Hayden Bennett Jr.
To
Phyllis Carol Barnhart

ss:

BE IT REMEMBERED, That on this 3rd day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Hayden Bennett Jr. and Phyllis Carol Barnhart and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 3rd day of July, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 5th day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Hayden Bennett Jr. and Phyllis Carol Barnhart on the 3rd day of July, 1950

Rev. David E. Noland

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A373877

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Fred Warner Lawrence to Fern D. Greenlee

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Fred Warner Lawrence
2. Color W 3. Where born Eldorado, Ark. (Town, County, State or Country) 4. When born Sept. 12 - 1902 (Day, Month, Year)
5. Present residence Coatesville Ind.
6. Present occupation Laborer 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Frank W. Lawrence 10. His color W
11. His birthplace Arkansas 12. His occupation Farmer 13. His residence Eldorado Ark
14. Full christian and maiden name of mother Martha E. Mellard 15. Her color W 16. Her occupation Housewife
17. Her birthplace Arkansas 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Death
25. Give the names and ages of any minor children of the male applicant from all former marriages Annetta, 11; Julia Clare - 9
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names yes - as above
27. Are you supporting them and are you complying with all Court orders issued for their support? Yes
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Fred W. Lawrence

Fred Warner Lawrence deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Fred W Lawrence

Subscribed and sworn to before me, this 7th day of July, 1950

Adda M. Johnson Clerk Hendricks Circuit Court

Certificate No. A373878

Application is hereby made for a license for the marriage of

FEMALE

Fern D Greenlee to Fred Warner Lawrence

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Fern D. Greenlee
2. Color W 3. Where born Hendricks Co. Ind. (Town, County, State or Country) 4. When born Nov 9 - 1928 (Day, Month, Year)
5. Present residence Coatesville Ind.
6. Present occupation Clerk 7. Full christian and surname of father Dan Warmoth
8. His color W 9. His birthplace Indiana 10. His occupation Farmer 11. His residence Stilesville Ind.
12. Full christian and maiden name of mother Daisy McElmore 13. Her color W 14. Her occupation Housewife
15. Her birthplace Indiana 16. Her residence Stilesville, Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Death
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Fern D. Greenlee

Fern D. Greenlee deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Fern D. Greenlee

Subscribed and sworn to before me, this 7th day of July, 1950

Adda M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Fred Warner Lawrence
To
Fern D. Greenlee

ss:

BE IT REMEMBERED, That on this 7th day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Fred Warner Lawrence and Fern D. Greenlee and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adda M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 7th day of July, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 17th day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Fred Warner Lawrence and Fern D. Greenlee on the 9th day of July, 1950

Carlyle Yates, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A255507 Application for Marriage License — MALE

Application is hereby made for a license for the marriage of James Dallas Wesley to Francina Edna Pemberton

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is James Dallas Wesley
2. Color wh 3. Where born Yosemite Kentucky (Town, County, State or Country) 4. When born Aug 17-1920 (Day, Month, Year)
5. Present residence Fillmore Indiana
6. Present occupation L. & Layer Co. 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin no.
9. Full christian and surname of father Richard Wesley 10. His color wh.
11. His birthplace Kentucky 12. His occupation Store owner 13. His residence Yosemite Ky
14. Full christian and maiden name of mother Bertha Judd 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Ky. 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? no. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant James Dallas Wesley

James Dallas Wesley deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. James Dallas Wesley

Subscribed and sworn to before me, this 7th day of July, 1950 Cash M Johnson Clerk Hendricks Circuit Court

Certificate No. A25550 Application is hereby made for a license for the marriage of — FEMALE

Francina Edna Pemberton to James Dallas Wesley

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Francina Edna Pemberton
2. Color wh. 3. Where born Liberty Ky. (Town, County, State or Country) 4. When born Dec 29-1931 (Day, Month, Year)
5. Present residence Fillmore Ind.
6. Present occupation None 7. Full christian and surname of father Dave Pemberton
8. His color wh. 9. His birthplace Liberty Ky. 10. His occupation Farmer 11. His residence Dead
12. Full christian and maiden name of mother Maie Clemens 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Liberty Ky. 16. Her residence Liberty Ky.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Francina Edna Pemberton

Francina Edna Pemberton deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Francina Edna Pemberton

Subscribed and sworn to before me, this 7th day of July, 1950 Cash M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

James Dallas Wesley
To
Francina Edna Pemberton

ss:

BE IT REMEMBERED, That on this 7th day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife James Dallas Wesley and Francina Edna Pemberton and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Cash M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 7th day of July, 1950 (SEAL)

BE IT FURTHER REMEMBERED, That on this 8th day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, James Dallas Wesley and Francina Edna Pemberton on the 7th day of July, 1950 John Paul Jones Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A76560

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Ray Breedlove to Virginia Dale Gillaspy

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Ray Breedlove
2. Color Wh. 3. Where born Bellerville Ind. (Town, County, State or Country) 4. When born Apr 5-1922 (Day, Month, Year)
5. Present residence Clayton Ind.
6. Present occupation Painter 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Harley Ray Breedlove 10. His color wh
11. His birthplace Bellerville 12. His occupation Painter 13. His residence Clayton Ind.
14. Full christian and maiden name of mother Dallas M. Longmire 15. Her color wh 16. Her occupation Housewife
17. Her birthplace Monrovia Ind. 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce 1947.
25. Give the names and ages of any minor children of the male applicant from all former marriages One - Phyllis Maine 3
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names No.
27. Are you supporting them and are you complying with all Court orders issued for their support? No court order
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Ray Breedlove deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant X Ray Breedlove

Subscribed and sworn to before me, this 8th day of July, 1950

X Ray Breedlove

Ceah M Johnson Clerk Hendricks Circuit Court

Certificate No A76562

Application is hereby made for a license for the marriage of

FEMALE

Virginia Dale Gillaspy to Ray Breedlove

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Virginia Dale Gillaspy
2. Color wh. 3. Where born Vigo Co Ind. (Town, County, State or Country) 4. When born Sept 29-1921 (Day, Month, Year)
5. Present residence Clayton Ind
6. Present occupation None. 7. Full christian and surname of father James M. Campbell
8. His color wh. 9. His birthplace Vigo Co. 10. His occupation U.S. Marshall 11. His residence Indpls.
12. Full christian and maiden name of mother Lois Longfellow 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Vigo Co. Ind. 16. Her residence Indpls.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce March 30-1950
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Virginia Dale Gillaspy deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Virginia Gillaspy

Subscribed and sworn to before me, this 8th day of July, 1950

Virginia Gillaspy

Ceah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Ray Breedlove
To
Virginia Dale Gillaspy

ss:

BE IT REMEMBERED, That on this 8th day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Ray Breedlove and Virginia Dale Gillaspy and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Ceah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 8th day of July, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 8th day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Ray Breedlove and Virginia Dale Gillaspy on the 8th day of July, 1950

John Paul Jones, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Application for Marriage License

MALE

Certificate No. A76563

Application is hereby made for a license for the marriage of Jack Phillip Chase to Alice Marie Breedlove

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Jack Phillip Chase
2. Color Wh 3. Where born Bloomington Ind. (Town, County, State or Country) 4. When born Sept 7- 1928 (Day, Month, Year)
5. Present residence 1050 So. Whitcomb Indpls.
6. Present occupation Allison's 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Glenn R. Chase 10. His color Wh.
11. His birthplace Bloomington Ind. 12. His occupation Allison's 13. His residence Same
14. Full christian and maiden name of mother Mary Peterson 15. Her color Wh. 16. Her occupation Housewife
17. Her birthplace Bloomington 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce July 16-1949.
25. Give the names and ages of any minor children of the male applicant from all former marriages No.
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Jack Phillip Chase

Jack Phillip Chase deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Jack Phillip Chase

Subscribed and sworn to before me, this 8th day of July, 1950

Ceah M Johnson Clerk Hendricks Circuit Court

Application for Marriage License

FEMALE

Certificate No. A76561

Application is hereby made for a license for the marriage of Alice Marie Breedlove to Jack Phillip Chase

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Alice Marie Breedlove
2. Color Wh. 3. Where born Indpls. (Town, County, State or Country) 4. When born Jan 7- 1932 (Day, Month, Year)
5. Present residence Clayton
6. Present occupation Public Service 7. Full christian and surname of father Harlie Breedlove
8. His color Wh. 9. His birthplace Belleville 10. His occupation Painter 11. His residence Clayton
12. Full christian and maiden name of mother Dalley M. Longmire 13. Her color Wh. 14. Her occupation Housewife
15. Her birthplace Monrovia Ind. 16. Her residence Clayton
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes. 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Alice Breedlove

Alice Marie Breedlove deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Alice Breedlove

Subscribed and sworn to before me, this 8th day of July, 1950

Ceah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Jack Phillip Chase
and
Alice Marie Breedlove

ss:

BE IT REMEMBERED, That on this 8th day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Jack Phillip Chase and Alice Marie Breedlove and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Ceah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 8th day of July, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 17th day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Jack Phillip Chase and Alice Marie Breedlove on the 14th day of July, 1950

John Paul Jones Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. 9765-43

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Charles Bishop to Irene Bertha VanDer Heyden

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Charles Bishop
2. Color wh. 3. Where born Chicago Ill. (Town, County, State or Country) 4. When born June 9-1925 (Day, Month, Year)
5. Present residence Plainfield Ind.
6. Present occupation Credit investigator 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Fred Bishop 10. His color wh
11. His birthplace Brooklyn Ind. 12. His occupation Deid 13. His residence Deid
14. Full christian and maiden name of mother Erna Lyon 15. Her color wh. 16. Her occupation Clerk
17. Her birthplace Upland Ind. 18. Her residence Plainfield 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Charles O Bishop

Charles Bishop deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Charles O Bishop

Subscribed and sworn to before me, this 8th day of July, 1950.

Carl M Johnson Clerk Hendricks Circuit Court

Certificate No. A76542

FEMALE

Application is hereby made for a license for the marriage of Irene Bertha Van Der Heyden to Charles Bishop.

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Irene Bertha Van Der Heyden
2. Color wh. 3. Where born Mishawaka Ind. (Town, County, State or Country) 4. When born Oct 26-1929 (Day, Month, Year)
5. Present residence Mishawaka Ind.
6. Present occupation None 7. Full christian and surname of father Arthur Van Der Heyden
8. His color wh. 9. His birthplace Belgium 10. His occupation Plumber 11. His residence Same
12. Full christian and maiden name of mother Julia Shetaker (?) 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Belgium 16. Her residence Same
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes. 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Irene VanDer Heyden

Irene Bertha VanDer Heyden deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Irene VanDer Heyden

Subscribed and sworn to before me, this 8th day of July, 1950.

Carl M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Charles Bishop
To
Irene Bertha VanDer Heyden

BE IT REMEMBERED, That on this 8th day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Charles Bishop and Irene Bertha VanDer Heyden and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Carl M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 8th day of July, 1950.

(SEAL)

BE IT FURTHER REMEMBERED, That on this 11th day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Charles Bishop and Irene Bertha VanDer Heyden on the 8th day of July, 1950

Glenn A. Reece
Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A256561

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Billy Gordon Adamson to Shirley Lee Stephenson

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Billy Gordon Adamson
2. Color wh. 3. Where born Indiana (Town, County, State or Country) 4. When born Feb 26-1930 (Day, Month, Year)
5. Present residence Rt 3 Danville Ind.
6. Present occupation Pattern maker 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin
9. Full christian and surname of father Grover Adamson 10. His color wh.
11. His birthplace Tennessee 12. His occupation Butcher 13. His residence Same
14. Full christian and maiden name of mother Irene Taylor 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Kentucky 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Bill D. Adamson

Grover Adamson deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives his consent to the issuance of this license. Grover Adamson

Subscribed and sworn to before me, this 10th day of July, 1950

Frank M Johnson Clerk Hendricks Circuit Court

Certificate No. A256560

Application is hereby made for a license for the marriage of

FEMALE

Shirley Lee Stephenson to Billy Gordon Adamson

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Shirley Lee Stephenson
2. Color wh. 3. Where born Indiana (Town, County, State or Country) 4. When born Feb 25. 1931. (Day, Month, Year)
5. Present residence Plainfield
6. Present occupation Public Service 7. Full christian and surname of father Elmer Stephenson
8. His color wh. 9. His birthplace Indiana 10. His occupation Unemployed 11. His residence Same
12. Full christian and maiden name of mother Sylvia Boffo 13. Her color wh. 14. Her occupation Factory worker
15. Her birthplace Indiana 16. Her residence Same
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Shirley Lee Stephenson

Shirley Lee Stephenson deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Shirley Lee Stephenson

Subscribed and sworn to before me, this 10th day of July, 1950

Frank M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Billy Gordon Adamson
To
Shirley Lee Stephenson

ss:

BE IT REMEMBERED, That on this 10th day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Billy Gordon Adamson and Shirley Lee Stephenson and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Frank M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 10th day of July, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 2nd day of August, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Billy Adamson and Shirley Stephenson on the 11 day of July, 1950

Edd H B Eaton

Marriage Record, No. 21, Hendricks County, Indiana

CERTIFICATE No. .....

OFFICIAL FORM OF APPLICATION FOR MARRIAGE LICENSE AS DETERMINED BY THE STATE BOARD OF HEALTH, ACCORDING TO CHAPTER 126, OF THE ACTS OF THE SIXTY-FOURTH GENERAL ASSEMBLY; CHAPTER 31, OF THE ACTS OF THE EIGHTY-SECOND GENERAL ASSEMBLY.

APPLICATION FOR MARRIAGE LICENSE—MALE

Application is hereby made for a license for the marriage of

Charles Clifford Higgins to Ethel Josephine Saunders

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES

1. The full christian and surname of the man is Charles Clifford Higgins
2. Color Wh. 3. Where born Danville Ind (Town, County, State or Country.)
4. When born April 27-1928. (Day, month and year)
5. Present residence RR 2 Danville Ind.
6. Present occupation Engineer
7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin? No
9. Full christian and surname of father Harvey Higgins
10. His color Wh. 11. His birthplace Danville Ind
12. His occupation Farmer 13. His residence Same
14. Full christian and maiden name of mother Jennie Elsie McClain
15. Her color Wh. 16. Her occupation Housewife
17. Her birthplace Danville 18. Her residence Same
19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes
22. If not, how often has he been married?
23. Has such prior marriage, or marriages, been dissolved?
24. If so, how? 25. When?
26. Gives the names and ages of any minor children of the male applicant from all former marriages
27. Are any or all of these children either wholly or partially dependent upon you for support?
State their names:
28. Are you supporting them and are you complying with all Court Orders issued for their support?
29. Is the male contracting party afflicted with epilepsy, tuberculosis, venereal, or any other contagious or transmissible disease? No
30. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

Signature of Applicant Charles Clifford Higgins

State of Indiana, Hendricks County, ss:

Charles Clifford Higgins deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true.

Charles Clifford Higgins

Subscribed and sworn to before me, this 20th day of June 1950

Merle M Johnson

Hendricks Clerk Circuit Court

BE IT FURTHER REMEMBERED, That on this 18th day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Charles Clifford Higgins and Ethel Josephine Saunders on the 15 day of July, 1950

Raymond L. Alber

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A76530

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Robert Marshall Roe to Joyce Nadine McMullen

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Robert Marshall Roe
2. Color Wh. 3. Where born Montgomery Ind. (Town, County, State or Country) 4. When born Feb 20 1919 (Day, Month, Year)
5. Present residence Roachdale Ind.
6. Present occupation Operating Engr. 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father W. J. Roe 10. His color Wh.
11. His birthplace Indiana 12. His occupation Railroader 13. His residence Dec.
14. Full christian and maiden name of mother Forest Rose Mason 15. Her color Wh. 16. Her occupation Housewife
17. Her birthplace Montgomery Co Ind. 18. Her residence Putnam Co. Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Twice 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce 1950.
25. Give the names and ages of any minor children of the male applicant from all former marriages No.
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Robert Marshall Roe deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant x R. M. Roe

x R. M. Roe

Subscribed and sworn to before me, this 12th day of July, 1950

Asah M Johnson Clerk Hendricks Circuit Court

Certificate No. A76529

Application for Marriage License

FEMALE

Application is hereby made for a license for the marriage of Joyce Nadine McMullen to Robert Marshall Roe

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Joyce Nadine McMullen
2. Color Wh. 3. Where born Louisville Ky. (Town, County, State or Country) 4. When born June 12 1927 (Day, Month, Year)
5. Present residence Roachdale
6. Present occupation Housekeeper 7. Full christian and surname of father Frank McMullen
8. His color Wh. 9. His birthplace Indiana 10. His occupation Dec. 11. His residence Dec.
12. Full christian and maiden name of mother Vera Hayes 13. Her color Wh. 14. Her occupation Housewife
15. Her birthplace Indiana 16. Her residence Whitestown Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Twice 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce 1950
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Joyce Nadine McMullen deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Joyce McMullen

Joyce McMullen

Subscribed and sworn to before me, this 12th day of July, 1950

Asah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Robert Marshall Roe
To
Joyce Nadine McMullen

ss:

BE IT REMEMBERED, That on this 12th day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Robert Marshall Roe and Joyce Nadine McMullen and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Asah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 12th day of July, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 12th day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Robert Marshall Roe and Joyce Nadine McMullen on the 12 day of July, 1950

Thomas V. Sweeney
(J. P. Ind.)

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A373885

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

John Isaac Springer to Marjorie Louise Harlan

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is John Isaac Springer
2. Color W 3. Where born New Maysville Ind. (Town, County, State or Country) 4. When born May 29-1923 (Day, Month, Year)
5. Present residence Danville, RR3
6. Present occupation Mechanic 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father John Springer 10. His color W.
11. His birthplace Paoli, Orange Co. 12. His occupation Carpenter 13. His residence Danville RR3
14. Full christian and maiden name of mother Ida Hartwell 15. Her color W 16. Her occupation Housewife
17. Her birthplace Cloverdale, Putnam Co. 18. Her residence RR3 Danville 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

John Isaac Springer deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant John Isaac Springer

John Isaac Springer

Subscribed and sworn to before me, this 13th day of July, 1950

Eddie M. Johnson Clerk Hendricks Circuit Court

Certificate No. A373882

Application is hereby made for a license for the marriage of

FEMALE

Marjorie Louise Harlan to John Isaac Springer

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Marjorie Louise Harlan
2. Color W 3. Where born Hadley, Hendricks Co. (Town, County, State or Country) 4. When born Jan 30-1923 (Day, Month, Year)
5. Present residence RR3 Danville
6. Present occupation Typist 7. Full christian and surname of father Otho Harlan
8. His color W 9. His birthplace Luna, Ind. 10. His occupation Retired 11. His residence RR3 Danville
12. Full christian and maiden name of mother Maggie Berry 13. Her color W 14. Her occupation Housewife
15. Her birthplace Illinois 16. Her residence RR3 Danville
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Marjorie Louise Harlan deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Marjorie Louise Harlan

Marjorie Louise Harlan

Subscribed and sworn to before me, this 13th day of July, 1950

Eddie M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

John Isaac Springer
To
Marjorie Louise Harlan

BE IT REMEMBERED, That on this 13th day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife John Isaac Springer and Marjorie Louise Harlan and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Eddie M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 13th day of July, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 18th day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, John Isaac Springer and Marjorie Louise Harlan on the 15th day of July, 1950

Forest A. Reed

Marriage Record, No. 21, Hendricks County, Indiana

MALE

Certificate No. A245974

Application for Marriage License

Application is hereby made for a license for the marriage of Ernest Burley Parsley Jr. to Claire Helena Abell

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Ernest Burley Parsley Jr. 4. When born Sept 12-1925 (Day, Month, Year)
2. Color wh. 3. Where born Indpls. (Town, County, State or Country)
5. Present residence 3046 Lafayette Rd. Indpls.
6. Present occupation Setupman Eli Lilly + Co. 7. If no occupation, what means has the male contracting party to support a family? No.
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Ernest B. Parsley Sr. 10. His color wh.
11. His birthplace Brown Co Ind. 12. His occupation Allison Div Gm C 13. His residence Same
14. Full christian and maiden name of mother Edna Dotamore 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Illinois 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Ernest Burley Parsley Jr.

Ernest Burley Parsley Jr. deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Ernest Burley Parsley Jr.

Subscribed and sworn to before me, this 14th day of July, 1950

Asahel M Johnson Clerk Hendricks Circuit Court

FEMALE

Certificate No. A245975

Application is hereby made for a license for the marriage of Claire Helena Abell to Ernest Burley Parsley Jr.

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Claire Helena Abell
2. Color wh. 3. Where born Sullivan Co. Ind. (Town, County, State or Country) 4. When born June 19-1924 (Day, Month, Year)
5. Present residence 3016 W Jackson Indpls.
6. Present occupation Dept. Eli Lilly 7. Full christian and surname of father Russell J. Abell
8. His color wh. 9. His birthplace Sullivan Co. 10. His occupation Farmer 11. His residence Sullivan Co.
12. Full christian and maiden name of mother Mary V. Dutton 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Sullivan Co. 16. Her residence Same
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes. 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Claire Helena Abell

Claire Helena Abell deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Claire Helena Abell

Subscribed and sworn to before me, this 14th day of July, 1950

Asahel M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Ernest Burley Parsley Jr. To Claire Helena Abell

BE IT REMEMBERED, That on this 14th day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Ernest Burley Parsley Jr. and Claire Helena Abell and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Asahel M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 14th day of July, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 17th day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Ernest Burley Parsley and Claire Helena Abell on the 15th day of July, 1950

Pharay N. Plummer

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A22536

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Harvey Opal Coffey to Anna May Lewis

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Harvey Opal Coffey
2. Color W 3. Where born Bloomington Ind. (Town, County, State or Country) 4. When born Oct 1-1928 (Day, Month, Year)
5. Present residence 419 N. East St. Plainfield, Indiana.
6. Present occupation Steel worker 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Herman Coffey 10. His color W.
11. His birthplace Edwardsport, Ind. 12. His occupation Steel Worker 13. His residence Indianapolis
14. Full christian and maiden name of mother Vera Epperson 15. Her color W 16. Her occupation Housewife
17. Her birthplace Dayton, Ohio 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes No 22. If not, how often has he been married? once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce - 1950
25. Give the names and ages of any minor children of the male applicant from all former marriages No
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Harvey Opal Coffey deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Harvey Opal Coffey

Subscribed and sworn to before me, this 15th day of July, 19 50

Edna M. Johnson Clerk Hendricks Circuit Court

Certificate No. A12930

Application is hereby made for a license for the marriage of

FEMALE

Anna May Lewis to Harvey Opal Coffey

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Anna May Lewis
2. Color W 3. Where born Indianapolis (Town, County, State or Country) 4. When born July 27-1929 (Day, Month, Year)
5. Present residence 419 N. East St., Plainfield Ind.
6. Present occupation Not employed 7. Full christian and surname of father Samuel Lewis
8. His color W 9. His birthplace Martinsville Ind 10. His occupation Not employed 11. His residence Indianapolis
12. Full christian and maiden name of mother Anna Douglas 13. Her color W 14. Her occupation Housewife
15. Her birthplace Kansas City, Kansas 16. Her residence Indianapolis (Central Hospital)
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Anna May Lewis deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Anna May Lewis

Subscribed and sworn to before me, this 15th day of July, 1950

Edna M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Harvey Opal Coffey
To
Anna May Lewis

ss:

BE IT REMEMBERED, That on this 15th day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Harvey Opal Coffey and Anna May Lewis and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edna M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 15th day of July, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 17th day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Harvey Opal Coffey and Anna May Lewis on the 15 day of July, 1950

Ethel Reynolds (J. P. Seal)

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A335150

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Jack Edwin Coatin to Betty Lou McCammack

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Jack Edwin Coatin
2. Color W 3. Where born Morgan Co. Indiana (Town, County, State or Country) 4. When born Aug 17-1928 (Day, Month, Year)
5. Present residence Coatesville Ind.
6. Present occupation Works at fuel store 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Asa Franklin Coatin 10. His color W
11. His birthplace Hendricks Co. Ind. 12. His occupation State Highway 13. His residence Coatesville RR 1
14. Full christian and maiden name of mother Flora Edristine Starr 15. Her color W 16. Her occupation Housewife
17. Her birthplace Hendricks Co. Ind. 18. Her residence Coatesville RR 1 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Jack Edwin Coatin

Jack Edwin Coatin deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Jack Edwin Coatin

Subscribed and sworn to before me, this 15th day of July, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A335149

Application is hereby made for a license for the marriage of

FEMALE

Betty Lou McCammack to Jack Edwin Coatin

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Betty Lou McCammack
2. Color W 3. Where born Fellmore, Putnam Co Ind 4. When born Feb 26-1931 (Day, Month, Year)
5. Present residence Coatesville, Ind. (Town, County, State or Country)
6. Present occupation Billing Clerk 7. Full christian and surname of father Homer Pleasant McCammack
8. His color W 9. His birthplace Muskogee Okla 10. His occupation Merchant 11. His residence Coatesville
12. Full christian and maiden name of mother Helen Irene Hunter 13. Her color W 14. Her occupation Housewife
15. Her birthplace Putnam Co. Ind. 16. Her residence Coatesville
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Betty Lou McCammack

Betty Lou McCammack deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Betty Lou McCammack

Subscribed and sworn to before me, this 15th day of July, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Jack Edwin Coatin
To
Betty Lou McCammack

ss:

BE IT REMEMBERED, That on this 15th day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Jack Edwin Coatin and Betty Lou McCammack and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 15th day of July, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 25th day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Jack Edwin Coatin and Betty Lou McCammack on the 22nd day of July, 1950

Eugene McFarland
AB

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 339234 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of Mearle R. Donica to Betty Jean Dickey

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Mearle R. Donica
2. Color White 3. Where born Columbus, Ind. (Town, County, State or Country) 4. When born Jan 1 - 1932 (Day, Month, Year)
5. Present residence Brownsburg, Indiana
6. Present occupation Works at Allison's 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Clifford Dewin Donica 10. His color White
11. His birthplace Columbus, Ind. 12. His occupation Tool Maker 13. His residence Brownsburg, Ind.
14. Full christian and maiden name of mother Violet May Rodman 15. Her color White 16. Her occupation Housewife
17. Her birthplace Columbus, Ind. 18. Her residence Brownsburg, Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? — 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages —
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names —
27. Are you supporting them and are you complying with all Court orders issued for their support? —
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Mearle R. Donica

Violet May Donica deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives Her consent to the issuance of this license. Violet Mae Donica

Subscribed and sworn to before me, this 21st day of July, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A 339333 Application is hereby made for a license for the marriage of **FEMALE**

Betty Jean Dickey to Mearle R. Donica

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Betty Jean Dickey
2. Color White 3. Where born Hendricks County, Ind. (Town, County, State or Country) 4. When born May 2-1932 (Day, Month, Year)
5. Present residence Indianapolis, Indiana, R.R. 2
6. Present occupation Works at Eli Lilly's 7. Full christian and surname of father Frank Dickey
8. His color White 9. His birthplace Glenwood, Ind. 10. His occupation Farmer 11. His residence Indianapolis R.R. 2
12. Full christian and maiden name of mother Stella Adams 13. Her color White 14. Her occupation Housewife
15. Her birthplace Davis County, Ind. 16. Her residence Indianapolis, Ind., R.R. 2
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? — 20. Has such prior marriage, or marriages been dissolved? — 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Betty Jean Dickey

Betty Jean Dickey deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Betty Jean Dickey

Subscribed and sworn to before me, this 21st day of July, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Mearle R. Donica
To
Betty Jean Dickey

ss: BE IT REMEMBERED, That on this 21st day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Mearle R. Donica and Betty Jean Dickey and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 21st day of July, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 25th day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Mearle R. Donica and Betty Jean Dickey on the 22nd day of July, 1950

Clyde F. Peck, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A-249189 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

Charles Lloyd Wade to Alice Jean Sheets

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Charles Lloyd Wade
2. Color White 3. Where born Sullivan Ind. (Town, County, State or Country) 4. When born Jan 13-1931 (Day, Month, Year)
5. Present residence Clayton, Indiana, R.R.2
6. Present occupation Laborer 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Charles William Wade 10. His color White
11. His birthplace Crawford County, Illinois 12. His occupation Farmer 13. His residence Fairbanks, Ind. R.1.
14. Full christian and maiden name of mother Gertrude Adeline Ryland 15. Her color White 16. Her occupation Housewife
17. Her birthplace Sullivan County, Ind. 18. Her residence Fairbanks, Ind. R.1. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? — 23. Has such prior marriage or marriages, been dissolved? — 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages —
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names —
27. Are you supporting them and are you complying with all Court orders issued for their support? —
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Gertrude Adeline Wade deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license.

Signature of Applicant Charles Lloyd Wade

Gertrude Adeline Wade.

Subscribed and sworn to before me, this 22nd day of July, 1950

Adah M. Johnson, Clerk Hendricks Circuit Court

Certificate No. A 249190 Application is hereby made for a license for the marriage of **FEMALE**

Alice Jean Sheets to Charles L. Wade.

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Alice Jean Sheets
2. Color White Where born Morgan County, Ind. 4. When born July 11-1933 (Town, County, State or Country) (Day, Month, Year)
5. Present residence Clayton, Ind., R.R.2
6. Present occupation Waitress in Restaurant 7. Full christian and surname of father James Howard Sheets
8. His color White 9. His birthplace Switzerland Co. Ind. 10. His occupation Laborer 11. His residence Clayton, Ind. R.2
12. Full christian and maiden name of mother Zula Mae Shane 13. Her color White 14. Her occupation Housewife
15. Her birthplace Morgan County, Ind. 16. Her residence Clayton, Ind., R.2
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? — 20. Has such prior marriage, or marriages been dissolved? — 21. If so, how and when? —
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Zula Mae Sheets deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license.

Signature of Applicant Alice Jean Sheets

Zula Mae Sheets

Subscribed and sworn to before me, this 22nd day of July, 1950

Adah M. Johnson, Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Charles Lloyd Wade
To
Alice Jean Sheets

ss:

BE IT REMEMBERED, That on this 22nd day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Charles Lloyd Wade and Alice Jean Sheets and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 22nd day of July, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 25th day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Charles Lloyd Wade and Alice Jean Sheets on the 22nd day of July, 1950

Robert E. Mann

Marriage Record, No. 21, Hendricks County, Indiana

MALE

Certificate No. A221948

Application for Marriage License

Application is hereby made for a license for the marriage of Victor Gilbert Peacock to Joanne Lee Frazier

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Victor Gilbert Peacock
2. Color wh 3. Where born Hendricks Co Ind. (Town, County, State or Country) 4. When born July 27 - 1930 (Day, Month, Year)
5. Present residence Rt 2 Mooresville Ind
6. Present occupation Contractor - Masonry 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Harry Peacock 10. His color wh
11. His birthplace Plainfield Ind. 12. His occupation Farmer 13. His residence Same
14. Full christian and maiden name of mother Lois Hall 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Pittsburgh Penna 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Victor Gilbert Peacock

Lois Peacock deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Lois J. Peacock

Subscribed and sworn to before me, this 22nd day of July, 1950

Sarah M. Johnson Clerk Hendricks Circuit Court

FEMALE

Certificate No. A221541

Application is hereby made for a license for the marriage of Joanne Lee Frazier to Victor Gilbert Peacock

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Joanne Lee Frazier
2. Color wh. 3. Where born Marion Co. Ind. (Town, County, State or Country) 4. When born Jan 11 - 1931 (Day, Month, Year)
5. Present residence 7580 Westfield Blvd Indpls. Ind.
6. Present occupation Office clerk 7. Full christian and surname of father Theodore C Frazier
8. His color wh. 9. His birthplace Marion Co. 10. His occupation Contractor 11. His residence Same
12. Full christian and maiden name of mother Bertha E. Greer 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Marion Co. Ind 16. Her residence Same
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Joanne L. Frazier

Joanne Lee Frazier deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Joanne L. Frazier

Subscribed and sworn to before me, this 22nd day of July, 1950

Sarah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Victor Gilbert Peacock
To
Joanne Lee Frazier

Indiana, to-wit: Hendricks County, ss:

BE IT REMEMBERED, That on this 22nd day of July, 1950 the following Marriage License was issued, to-wit:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Victor Gilbert Peacock and Joanne Lee Frazier and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Sarah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 22nd day of July, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 31st day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Victor Gilbert Peacock and Joanne Lee Frazier on the 29th day of July A.D., 1950

Rev. Duane E. Schroeder

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A406671

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Herschel Leon Hammond to Madonna May Grimes

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Herschel Leon Hammond
2. Color W 3. Where born Greencastle Ind. (Town, County, State or Country) 4. When born July 7-1927 (Day, Month, Year)
5. Present residence Greencastle Ind.
6. Present occupation Bar Tender 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Glen Hammond 10. His color W
11. His birthplace Jellicoe Ind. 12. His occupation 13. His residence deceased
14. Full christian and maiden name of mother Ina May Davis 15. Her color W 16. Her occupation Grocery store
17. Her birthplace Jellicoe Ind. 18. Her residence RR 3 Greencastle 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Herschel Leon Hammond deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Herschel Leon Hammond

Herschel Leon Hammond

Subscribed and sworn to before me, this 24 day of July, 19 50

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. 406672

Application is hereby made for a license for the marriage of

FEMALE

Madonna May Grimes to Herschel Leon Hammond

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Madonna May Grimes
2. Color W 3. Where born Greencastle Ind (Town, County, State or Country) 4. When born Jan 13-1914 (Day, Month, Year)
5. Present residence Greencastle, Ind.
6. Present occupation Bank teeler 7. Full christian and surname of father Clyde Grimes
8. His color W 9. His birthplace Putnam Co. 10. His occupation Farmer 11. His residence RF Greencastle
12. Full christian and maiden name of mother Maud E Crawley 13. Her color W 14. Her occupation Housewife
15. Her birthplace Putnam Co. Ind. 16. Her residence RR 4 Greencastle Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Madonna May Grimes deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Madonna May Grimes

Madonna May Grimes

Subscribed and sworn to before me, this 24 day of July, 19 50

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Herschel Leon Hammond
To
Madonna May Grimes

ss:

BE IT REMEMBERED, That on this 24th day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as ~~Husband~~ and Wife Herschel Leon Hammond and Madonna May Grimes and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 24th day of July, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 2nd day of August, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Herschel Leon Hammond and Madonna May Grimes on the 24th day of July A.D., 1950

Rev. Elmer L. Harvey

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. 85756

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

William Arthur Blaco to Rose Estella Wilson

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is William Arthur Blaco
2. Color Wh. 3. Where born Cincinnati Ohio (Town, County, State or Country) 4. When born July 2 1887 (Day, Month, Year)
5. Present residence 1540 Kappis St Indpls.
6. Present occupation Car Inspector - R.R. 7. If no occupation, what means has the male contracting party to support a family? No.
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Robert Blaco 10. His color wh.
11. His birthplace U.S.A. 12. His occupation Dead 13. His residence Dead.
14. Full christian and maiden name of mother Maude Hoover 15. Her color Wh 16. Her occupation Dead
17. Her birthplace Penna. 18. Her residence Dead 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes. 24. If so, how and when? Deceased 1945.
25. Give the names and ages of any minor children of the male applicant from all former marriages No.
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

William Arthur Blaco deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant William A Blaco

Subscribed and sworn to before me, this 25th day of July, 1950

Adah M Johnson Clerk Hendricks Circuit Court

Certificate No. A85757. Application is hereby made for a license for the marriage of

FEMALE

Rose Estella Wilson to William Arthur Blaco

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Rose Estella Wilson
2. Color wh 3. Where born Wolcott Indiana (Town, County, State or Country) 4. When born Aug 13-1881 (Day, Month, Year)
5. Present residence RR 2 Box 43. Indpls.
6. Present occupation None 7. Full christian and surname of father George Doctus
8. His color wh. 9. His birthplace Illinois 10. His occupation Dead 11. His residence Dead
12. Full christian and maiden name of mother Anna Cromwell 13. Her color Wh. 14. Her occupation Dead
15. Her birthplace New York 16. Her residence Dead
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Twice 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Death - Death - 1930. - 1943
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Rose Estella Wilson deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Rose E Wilson

Subscribed and sworn to before me, this 25th day of July, 1950

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

William A. Blaco
To
Rose E. Wilson

BE IT REMEMBERED, That on this 25th day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife William A. Blaco and Rose E. Wilson and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 25th day of July, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 29th day of July, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, William A. Blaco and Rose E. Wilson on the 25th day of July A.D. 1950

Thomas F. Kinsey (J.P. Seal)

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 303704 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of Lynn Dale Noe to Evelyn Holycross

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Lynn Dale Noe
2. Color White 3. Where born Indianapolis Ind. (Town, County, State or Country) 4. When born August 17-1908 (Day, Month, Year)
5. Present residence 278 N. Exeter St., Indianapolis, Ind.
6. Present occupation Metal Pattern Maker 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father John O. Noe 10. His color White
11. His birthplace Jackson Twp., Ind. 12. His occupation Carpenter 13. His residence Deceased
14. Full christian and maiden name of mother Orpha H. McPherson 15. Her color White 16. Her occupation Housewife
17. Her birthplace Indiana 18. Her residence Indianapolis Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue? —
21. Is this his first marriage? Yes 22. If not, how often has he been married? — 23. Has such prior marriage or marriages, been dissolved? — 24. If so, how and when? —
25. Give the names and ages of any minor children of the male applicant from all former marriages —
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names —
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Lynn Dale Noe

Lynn Dale Noe deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Lynn Dale Noe

Subscribed and sworn to before me, this 25th day of July, 1950

Adah M. Johnson, Clerk Hendricks Circuit Court

Certificate No. A 303705 Application is hereby made for a license for the marriage of **FEMALE**

Evelyn Holycross to Lynn Dale Noe

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Evelyn Holycross
2. Color White 3. Where born Danville, Illinois (Town, County, State or Country) 4. When born August 11-1915 (Day, Month, Year)
5. Present residence 1317 E. Michigan St., Indianapolis, Ind.
6. Present occupation Buyer at Dime Store 7. Full christian and surname of father Albert Holycross
8. His color White 9. His birthplace Danville, Ill. 10. His occupation Storage Man 11. His residence Indianapolis, Ind.
12. Full christian and maiden name of mother Rosetta Elam 13. Her color White 14. Her occupation Housekeeper
15. Her birthplace Illinois 16. Her residence Indianapolis, Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? — 20. Has such prior marriage, or marriages been dissolved? — 21. If so, how and when? —
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Evelyn Holycross

Evelyn Holycross deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Evelyn Holycross

Subscribed and sworn to before me, this 25th day of July, 1950

Adah M. Johnson, Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Lynn Dale Noe
To
Evelyn Holycross

ss:

BE IT REMEMBERED, That on this 25th day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Lynn Dale Noe and Evelyn Holycross and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 25th day of July, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 25th day of August, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Lynn Dale Noe and Evelyn Holycross on the 18th day of August, 1950 Rev. John W. Douglas

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A406663

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Audrey Keith Walton to Elnora Jean Walters

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Audrey Keith Walton
2. Color W 3. Where born New Winchester Ind. (Town, County, State or Country) 4. When born Nov. 8-1931 (Day, Month, Year)
5. Present residence Stilesville Ind.
6. Present occupation Roadman - Highway dept. 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father William V. Walton 10. His color W
11. His birthplace Putnam Co. Ind. 12. His occupation State Highway Dept 13. His residence Stilesville Ind.
14. Full christian and maiden name of mother Goldie E. Fields 15. Her color W 16. Her occupation Housewife
17. Her birthplace Hendricks Co. Ind. 18. Her residence Stilesville 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Audrey Keith Walton

William V. Walton deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives his consent to the issuance of this license.

William V. Walton

Subscribed and sworn to before me, this 29th day of July, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A406662

Application is hereby made for a license for the marriage of

FEMALE

Elnora Jean Walters to Audrey Keith Walton

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Elnora Jean Walters
2. Color W 3. Where born Stilesville Hendricks Co (Town, County, State or Country) 4. When born Dec 10-1932 (Day, Month, Year)
5. Present residence Stilesville, Ind.
6. Present occupation Public Service Co. 7. Full christian and surname of father Carl Preston Walters
8. His color W 9. His birthplace Morgan Co Ind. 10. His occupation Electrician 11. His residence Stilesville
12. Full christian and maiden name of mother Flossie M. Hanlon 13. Her color W 14. Her occupation Housewife
15. Her birthplace Putnam Co. Ind. 16. Her residence Stilesville
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Elnora Jean Walters

Carl Preston Walters deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives his consent to the issuance of this license.

Carl Preston Walters

Subscribed and sworn to before me, this 29th day of July, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Audrey Keith Walton
To
Elnora Jean Walters

ss:

BE IT REMEMBERED, That on this 29th day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Audrey Keith Walton and Elnora Jean Walters and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 29th day of July, 1950.

(SEAL)

BE IT FURTHER REMEMBERED, That on this 7th day of August, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Audrey Keith Walton and Elnora Jean Walters on the sixth day of August, 1950

Rev. Robert H. Mitchell
Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 22645 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

Harry L. Bevins to Helen L. Heaton

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Harry L. Bevins
2. Color White 3. Where born Indianapolis, Ind. (Town, County, State or Country) 4. When born Jan 18-1907 (Day, Month, Year)
5. Present residence 2538 N. Talbot, Indianapolis Ind.
6. Present occupation Mechanic 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Charles L. Bevins 10. His color White
11. His birthplace Virginia 12. His occupation Contractor 13. His residence Deceased
14. Full christian and maiden name of mother Minnie J. Fields 15. Her color White 16. Her occupation Housewife
17. Her birthplace Virginia 18. Her residence R.F.D. Morgantown, Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? Twice 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce - 1938 1947
25. Give the names and ages of any minor children of the male applicant from all former marriages None
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease?
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind?

State of Indiana, Hendricks County, ss:

Harry L. Bevins deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Harry L Bevins

Harry L Bevins

Subscribed and sworn to before me, this 29th day of July, 1950

Adah M. Johnson, Clerk Hendricks Circuit Court

Certificate No. A 76827 Application is hereby made for a license for the marriage of **FEMALE**

Helen L. Heaton to Harry L. Bevins

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Helen L. Heaton
2. Color White Where born Linton, Ind. (Town, County, State or Country) 4. When born May 4-1909 (Day, Month, Year)
5. Present residence 1131 Lord St., Indianapolis Ind.
6. Present occupation Parts Control Clerk 7. Full christian and surname of father Unknown
8. His color White 9. His birthplace Unknown 10. His occupation Unknown 11. His residence Unknown
12. Full christian and maiden name of mother Emma Cathryn Strietelmeier 13. Her color White 14. Her occupation Deceased
15. Her birthplace Linton, Indiana 16. Her residence Deceased
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce 1944
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Helen L. Heaton deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Helen L. Heaton

Helen L. Heaton

Subscribed and sworn to before me, this 29th day of July, 1950

Adah M. Johnson, Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Harry L. Bevins
To
Helen L. Heaton

ss:

BE IT REMEMBERED, That on this 29th day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Harry L. Bevins and Helen L. Heaton and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 29th day of July, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 4th day of August, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Harry L. Bevins and Helen L. Heaton on the 30th day of July, 1950

Robert H. Heine

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A93057 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

Fred Lloyd Peacock to Juanita Berniece Neff

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Fred Lloyd Peacock
2. Color W 3. Where born Terre Haute, Indiana (Town, County, State or Country) 4. When born April 29-1929 (Day, Month, Year)
5. Present residence 2155 Central Ave., Indianapolis, Indiana
6. Present occupation Student 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father James Peacock 10. His color W
11. His birthplace Davenport, Iowa 12. His occupation Body & Fender Man 13. His residence 175 N. Bryant, Denver Apt.
14. Full christian and maiden name of mother Anna Alson J 15. Her color W 16. Her occupation Housewife
17. Her birthplace Laurel Lee 18. Her residence South Gate, Calif. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved?
24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Fred Lloyd Peacock deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Signature of Applicant Fred Lloyd Peacock

Subscribed and sworn to before me, this 29th day of July, 1950

Fred Lloyd Peacock

Edah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A88615 Application is hereby made for a license for the marriage of **FEMALE**

Juanita Berniece Neff to Fred Lloyd Peacock

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Juanita Berniece Neff
2. Color W 3. Where born Indianapolis (Town, County, State or Country) 4. When born June 22-1930 (Day, Month, Year)
5. Present residence 908 Harlan, Apt 4
6. Present occupation Clerk 7. Full christian and surname of father Henry T. Neff
8. His color W 9. His birthplace North Salem Ind. 10. His occupation Unemployed 11. His residence 908 Harlan Apt 4
12. Full christian and maiden name of mother Gertrude D. Dale 13. Her color W 14. Her occupation Glove factory
15. Her birthplace Jamestown Ind. 16. Her residence 90 8 Harlan, Indianapolis
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Juanita Berniece Neff deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Signature of Applicant Juanita Berniece Neff

Subscribed and sworn to before me, this 29th day of July, 1950

Juanita Berniece Neff

Edah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Fred Lloyd Peacock
To
Juanita Berniece Neff

ss:

BE IT REMEMBERED, That on this 29th day of July, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Fred Lloyd Peacock and Juanita Berniece Neff and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 29th day of July 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 10th day of August, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Fred Lloyd Peacock and Juanita Berniece Neff on the 6th day of August, 1950

Rev. L. A. Haddleston

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A410734

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Harold Eugene Rogers to Janice Nancy Hobson

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Harold Eugene Rogers
2. Color W 3. Where born Clayton, Ind. (Town, County, State or Country) 4. When born Apr. 30 - 1927 (Day, Month, Year)
5. Present residence Mooresville, R.R. 1
6. Present occupation Farming 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Otis Cecil Rogers 10. His color W
11. His birthplace Hendricks Co. 12. His occupation Farming 13. His residence Deceased
14. Full christian and maiden name of mother Zelma I. Harrison 15. Her color W 16. Her occupation Housewife
17. Her birthplace Hendricks Co. Ind. 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Harold E. Rogers

Harold Eugene Rogers deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Harold E. Rogers

Subscribed and sworn to before me, this 31st day of July, 1950

Addah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A410733

FEMALE

Application is hereby made for a license for the marriage of Janice Nancy Hobson to Harold Eugene Rogers

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Janice Nancy Hobson
2. Color W 3. Where born Hendricks Co. Indiana (Town, County, State or Country) 4. When born Jan 6 - 1933 (Day, Month, Year)
5. Present residence Mooresville, Ind. R.R. 1
6. Present occupation At Home 7. Full christian and surname of father Cecil Hobson
8. His color W 9. His birthplace Morgan Co. Ind. 10. His occupation Farming 11. His residence Mooresville R.R. 1
12. Full christian and maiden name of mother Grace Ferguson 13. Her color W 14. Her occupation Housework
15. Her birthplace Morgan Co. Ind. 16. Her residence Mooresville R.R. 1
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Janice Nancy Hobson

Grace Hobson deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. Grace Hobson

Subscribed and sworn to before me, this 31st day of July, 1950

Addah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Harold Eugene Rogers
To
Janice Nancy Hobson

ss:

BE IT REMEMBERED, That on this 31st day of July, 1950 the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Harold Eugene Rogers and Janice Nancy Hobson and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Addah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 31st day of July, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 7th day of August, 1950 the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Harold Eugene Rogers and Janice Nancy Hobson on the 31 day of July, 1950.

Thomas T. Alsney (Seal)

Marriage Record, No. 21, Hendricks County, Indiana

MALE

Application for Marriage License

Certificate No. A235432

Application is hereby made for a license for the marriage of Jimmie George Kiritsis to Jean High

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Jimmie George Kiritsis
2. Color W 3. Where born Indianapolis Ind. (Town, County, State or Country) 4. When born June 17-1929 (Day, Month, Year)
5. Present residence 5353 West Vermont St. Indianapolis
6. Present occupation Drill Press Operator 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father George Kiritsis 10. His color W
11. His birthplace Greece 12. His occupation Retired 13. His residence 5353 N. Vermont St.
14. Full christian and maiden name of mother Magdalene Pappas 15. Her color W 16. Her occupation Housewife
17. Her birthplace Greece 18. Her residence 5353 W. Vermont 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved?
24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Jimmie G. Kiritsis

Jimmie George Kiritsis deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Jimmie G Kiritsis

Subscribed and sworn to before me, this 2nd day of August, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

FEMALE

Certificate No. A93431

Application is hereby made for a license for the marriage of Jean High to Jimmie George Kiritsis

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Jean High
2. Color W 3. Where born Indianapolis Ind. 4. When born June 2-1932 (Day, Month, Year)
5. Present residence Indianapolis, RR 2 - Box 362 6. Present occupation Not employed 7. Full christian and surname of father Chester High
8. His color W 9. His birthplace North Salem Ind. 10. His occupation Installer Bell Tel Co. 11. His residence Indpls.
12. Full christian and maiden name of mother Isabella Kilpatrick 13. Her color W 14. Her occupation Housewife
15. Her birthplace Scotland 16. Her residence Indpls - RR 2 - Box 362
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved?
21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Jean High

Jean High deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Jean High

Subscribed and sworn to before me, this 2nd day of August, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Jimmie George Kiritsis
To
Jean High

ss:

BE IT REMEMBERED, That on this 2nd day of August, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Jimmie George Kiritsis and Jean High and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 2nd day of August, 1950.

(SEAL)

BE IT FURTHER REMEMBERED, That on this 5th day of August, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Jimmie George Kiritsis and Jean High on the 2nd day of August, 1950

(Seal) Wm. K. Ellington - Jr.

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 37392 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

J. Robert Leak to Betty Nan Cox

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is J. Robert Leak
2. Color White Where born Lizton, Ind. (Town, County, State or Country) 4. When born July 12 1923 (Day, Month, Year)
5. Present residence Lizton, Indiana
6. Present occupation Farming 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Roscoe Leak 10. His color White
11. His birthplace Lizton Ind. 12. His occupation Farming 13. His residence Lizton Ind.
14. Full christian and maiden name of mother Minnie Noe 15. Her color White 16. Her occupation Housewife.
17. Her birthplace Charlestown, Ind. 18. Her residence Lizton, Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? — 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages —
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names —
27. Are you supporting them and are you complying with all Court orders issued for their support? —
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

J. Robert Leak deposes and says that has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant J. Robert Leak

J. Robert Leak

Subscribed and sworn to before me, this 3rd day of August, 1950

Adah M. Johnson, Clerk Hendricks Circuit Court

Certificate No. A 373973 Application is hereby made for a license for the marriage of **FEMALE**

Betty Nan Cox to J. Robert Leak

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Betty Nan Cox
2. Color White 3. Where born Indianapolis, Ind. (Town, County, State or Country) 4. When born April 21-1927 (Day, Month, Year)
5. Present residence Indianapolis, Ind.
6. Present occupation Teaching 7. Full christian and surname of father John C. Cox
8. His color White 9. His birthplace Hazelwood, Ky. 10. His occupation Brick Mason 11. His residence Indianapolis Ind.
12. Full christian and maiden name of mother Bernice Campbell 13. Her color White 14. Her occupation Housewife.
15. Her birthplace Seymour, Indiana 16. Her residence Indianapolis, Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? — 20. Has such prior marriage, or marriages been dissolved? — 21. If so, how and when? —
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Betty Nan Cox deposes and says that has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Betty Nan Cox

Betty Nan Cox

Subscribed and sworn to before me, this 3rd day of August, 1950.

Adah M. Johnson, Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

J. Robert Leak
To
Betty Nan Cox

ss:

BE IT REMEMBERED, That on this 5th day of August, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife J. Robert Leak and Betty Nan Cox and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 5th day of August 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 8th day of August, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, J. Robert Leak and Betty Nan Cox on the 5th day of August, 1950 Robert Lewis, Minister

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MALE

Certificate No. [illegible]

Application for Marriage License

Application is hereby made for a license for the marriage of

Helton Eugene Michael to Ruth Eileen [illegible]

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Helton Eugene Michael
2. Color W 3. Where born Indianapolis Ind. (Town, County, State or Country) 4. When born June 5 - 1930 (Day, Month, Year)
5. Present residence 1863 Howard St. Indianapolis
6. Present occupation Machine Operator 7. If no occupation, what means has the male contracting party to support a family? [illegible]
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father James J. Michael 10. His color W
11. His birthplace Indiana 12. His occupation Hotel Manager 13. His residence Deceased
14. Full christian and maiden name of mother Alice E. Carlile 15. Her color W 16. Her occupation Housewife
17. Her birthplace Indiana 18. Her residence R6 - Tampa Fla. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue? [illegible] 23. Has such prior marriage or
21. Is this his first marriage? Yes 22. If not, how often has he been married? [illegible]
marriages, been dissolved? [illegible] 24. If so, how and when? [illegible]
25. Give the names and ages of any minor children of the male applicant from all former marriages [illegible]
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names [illegible]
27. Are you supporting them and are you complying with all Court orders issued for their support? [illegible]
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Helton Eugene Michael

Helton Eugene Michael deposes and says that has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Helton Eugene Michael

Subscribed and sworn to before me, this 5th day of August, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A22454

FEMALE

Application is hereby made for a license for the marriage of

Ruth Eileen Cline to Helton Eugene Michael

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Ruth Eileen Cline
2. Color W 3. Where born Cloverdale, Ind. (Town, County, State or Country) 4. When born Dec. 17 1932 (Day, Month, Year)
5. Present residence 1863 Howard St, Indianapolis
6. Present occupation Not employed 7. Full christian and surname of father Morris Cline
8. His color W 9. His birthplace Indiana 10. His occupation Unknown 11. His residence Unknown
12. Full christian and maiden name of mother Julia Sutherlin 13. Her color W 14. Her occupation Restaurant
15. Her birthplace Greencastle 16. Her residence Indianapolis,
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? [illegible] 20. Has such prior marriage, or marriages been dissolved? [illegible] 21. If so, how and when? [illegible]
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Ruth Eileen Cline

Ruth Eileen Cline deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Ruth Eileen Cline

Subscribed and sworn to before me, this 5th day of August, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Helton Eugene Michael
To
Ruth Eileen Cline

ss:

BE IT REMEMBERED, That on this 5th day of August, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Helton Eugene Michael and Ruth Eileen Cline and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 5th day of August, 1950.

(SEAL)

BE IT FURTHER REMEMBERED, That on this 14th day of August, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Helton Eugene Michael and Ruth Eileen Cline on the fifth day of August, 1950

Ralph N. Saunders, Minister

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STATE OF FLORIDA,
COUNTY OF HILLSBOROUGH.

Before me, the undersigned authority, personally appeared ALICE E. LEWIS who being first duly sworn, deposes and says that she is the parent of HILTON EUGENE MICHAEL who is 20 years of age, that his father is deceased, and that she does hereby consent to the marriage of the said HILTON EUGENE MICHAEL to EILEEN CLINE.

Alice E. Lewis.

Subscribed and sworn to before me this, the 1st day of July, A. D. 1950.

Ethel S. Roberts
Notary Public State of Florida at Large.
My Commission expires: April 7, 1951

ETHEL S. ROBERTS NOTARY PUBLIC STATE OF FLORIDA AT LARGE

STATE OF FLORIDA
County of Hillsborough

I, CHAS. H. PENT, Clerk of the Circuit Court in and for the County of Hillsborough, State of Florida, the same being a Court of Record of the aforesaid County, having by law a seal, do hereby certify that

Ethel S. Roberts

whose name is subscribed to the attached certificate of acknowledgment, proof, or affidavit was at the time of taking said acknowledgment, proof or affidavit, a Notary Public duly commissioned and sworn and residing in said County, and was, as such an officer of said State, duly authorized by the laws thereof to take and certify the same, as well as to take and certify the proof and acknowledgment of deeds and other instruments in writing to be recorded in said State, and that full faith and credit are and ought to be given to her official act; and verily believe that the signature to the attached certificate is her genuine signature. and further that I am well acquainted with her signature

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal this 1st day of July, 19 50.

Chas H Pent
Clerk of the Circuit Court Hillsborough County, Florida

FLORIDA LABOR ADVOCATE

Ruth Eileen Cline deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Ruth Eileen Cline

Subscribed and sworn to before me, this 5-th day of August, 19 50

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Hilton Eugene Michael
To
Ruth Eileen Cline

ss:

BE IT REMEMBERED, That on this 5th day of August, 19 50, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Hilton Eugene Michael and Ruth Eileen Cline and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 5th day of August, 19 50.

(SEAL)

BE IT FURTHER REMEMBERED, That on this 14th day of August, 19 50, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Hilton Eugene Michael and Ruth Eileen Cline on the fifth day of August, 19 50

Ralph N. Saunders, Minister

State Of Indiana
county Of Marion

Before me the undersigned authority personally appeared Julia,Cline who being first duly ~~x~~ sworn ~~deposed~~ deposes and says that she is the parent of Ruth,Eileen,Cline. who is 17years of age and that her father where about unknown and that she does herby consent to th marriage of the said Ruth,Eileen,Cline to Hilton Eugene MiChael

NOTARY PUBLIC SEAL INDIANA

Julia Cline

Subscribed and sworn to before me this the 7th day of July,A,D,1950

Ben Richardson
Notary Public State of Indiana
Coubty Of Marion
My Commission Expires May/3/1951

State of Indiana, Hendricks County, ss:

Hilton Eugene Michael
To
Ruth Eileen Cline

ss:

BE IT REMEMBERED, That on this 5th day of August, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Hilton Eugene Michael and Ruth Eileen Cline and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 5th day of August, 1950.

(SEAL)

BE IT FURTHER REMEMBERED, That on this 14th day of August, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Hilton Eugene Michael and Ruth Eileen Cline on the fifth day of August, 1950

Ralph N. Saunders, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 25713

Application for Marriage License — MALE

Application is hereby made for a license for the marriage of

John Edward Archer to Barbara Jean Kindle

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is John Edward Archer
2. Color White 3. Where born Clayton, Ind. U. S. (Town, County, State or Country) 4. When born Aug 22-1928 (Day, Month, Year)
5. Present residence Plainfield, Ind.
6. Present occupation Truck Driver 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Albert Archer 10. His color White
11. His birthplace Ky. 12. His occupation Works at Prestolite 13. His residence Plainfield, Ind.
14. Full christian and maiden name of mother Edythe Crawer 15. Her color White 16. Her occupation Housewife
17. Her birthplace Indiana 18. Her residence Plainfield, Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? — 23. Has such prior marriage or marriages, been dissolved? — 24. If so, how and when? — —
25. Give the names and ages of any minor children of the male applicant from all former marriages —
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names —
27. Are you supporting them and are you complying with all Court orders issued for their support? —
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No. John E archer
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No. John E archer

State of Indiana, Hendricks County, ss:

John Edward Archer deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Signature of Applicant

Subscribed and sworn to before me, this 5th day of August, 1950

Adah M. Johnson, Clerk Hendricks Circuit Court

Certificate No. A-25713

Application is hereby made for a license for the marriage of — FEMALE

Barbara Jean Kindle to John Edward Archer

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Barbara Jean Kindle
2. Color White 3. Where born Indianapolis, Ind. (Town County, State or Country) 4. When born June 16th, 1934. (Day, Month, Year)
5. Present residence Martinsville, Indiana.
6. Present occupation Operator 7. Full christian and surname of father William Chester Kindle
8. His color White 9. His birthplace Bedford, Ky. 10. His occupation Truck Driver 11. His residence Martinsville, Ind.
12. Full christian and maiden name of mother Gladys Irene Gard 13. Her color White 14. Her occupation Housewife
15. Her birthplace Indianapolis, Ind. 16. Her residence Martinsville, Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? — 20. Has such prior marriage, or marriages been dissolved? — 21. If so, how and when? —
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

William Chester Kindle deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives his consent to the issuance of this license. Signature of Applicant Barbara Jean Kindle / William Chester Kindle

Subscribed and sworn to before me, this 5th day of August, 1950

Adah M. Johnson, Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

John Edward Archer
To
Barbara Jean Kindle

ss:

BE IT REMEMBERED, That on this 5th day of August, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife John Edward Archer and Barbara Jean Kindle and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 5th day of August, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 8th day of August, 1950 the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, John Edward Archer and Barbara Jean Kindle on the 5th day of August A.D., 1950

Rev. Donald J. Dunkin

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A339421

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Charles F. Wood to Pauline Pickelsimer

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Charles F. Wood
2. Color W 3. Where born Hendricks Co. Ind. (Town, County, State or Country) 4. When born Nov. 18-1911 (Day, Month, Year)
5. Present residence 81 South Whetmont Indianapolis
6. Present occupation Supervisor 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father John H. Wood 10. His color W
11. His birthplace Virginia 12. His occupation Farmer 13. His residence Deceased
14. Full christian and maiden name of mother Hattie Tidemore 15. Her color W 16. Her occupation Housewife
17. Her birthplace Unknown 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Charles F. Wood

Charles F. Wood deposes and says that has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Charles F. Wood

Subscribed and sworn to before me, this 7th day of August, 1950

Adah M. Johnson, Clerk Hendricks Circuit Court

Certificate No. 339422

Application is hereby made for a license for the marriage of

FEMALE

Pauline Pickelsimer to Charles F. Wood

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Pauline Pickelsimer
2. Color W 3. Where born Johnson Co. Ky (Town, County, State or Country) 4. When born June 1-1925 (Day, Month, Year)
5. Present residence 3863 College Ave Indianapolis Ind
6. Present occupation Secretary 7. Full christian and surname of father Wm. Pickelsimer
8. His color W 9. His birthplace Ky. 10. His occupation Farmer 11. His residence Deceased
12. Full christian and maiden name of mother Ida Howard 13. Her color W 14. Her occupation Housewife
15. Her birthplace Kentucky 16. Her residence Paxtonville, Ky
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Pauline Pickelsimer

Pauline Pickelsimer deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Pauline Pickelsimer

Subscribed and sworn to before me, this 7th day of August, 1950

Adah M Johnson, Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Charles F. Wood
To
Pauline Pickelsimer

ss:

BE IT REMEMBERED, That on this 7th day of August, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Charles F. Wood and Pauline Pickelsimer and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 7th day of August, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 7th day of August, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Charles F. Wood and Pauline Pickelsimer on the 7th day of August, 1950

John Paul Jones, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Barbara Ann Hart Lee

Certificate No. A 230454 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

Joseph H. Williams to Mary L. Bragg

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Joseph H. Williams
2. Color White 3. Where born Indianapolis, Ind (Town, County, State or Country) 4. When born July 18-1919 (Day, Month, Year)
5. Present residence 910 E. Wash. St., Indianapolis Ind.
6. Present occupation Railroad 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Ira Williams 10. His color White
11. His birthplace Henderson Ky 12. His occupation Deceased 13. His residence Deceased
14. Full christian and maiden name of mother Helen Irene Murphy 15. Her color White 16. Her occupation Housewife
17. Her birthplace Indianapolis, Ind 18. Her residence Indianapolis, Ind 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Three 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce & Annulment Mar. 22-1946 - Mar. 20-47 - (annulment) Apr. 1-1948
25. Give the names and ages of any minor children of the male applicant from all former marriages. Yes Joseph Francis Williams Jr. & Donald Lee Williams
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names. partially Joseph & Donald
27. Are you supporting them and are you complying with all Court orders issued for their support? Yes
28. Is the male contracting party afflicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Joseph H Williams

Joseph H. Williams deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Joseph H Williams

Subscribed and sworn to before me, this 9th day of August, 1950

Edith M. Johnson, Clerk Hendricks Circuit Court

Certificate No. A 230453 Application is hereby made for a license for the marriage of **FEMALE**

Mary L. Bragg to Joseph H. Williams

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Mary L. Bragg
2. Color White 3. Where born Brownsburg, Ind (Town, County, State or Country) 4. When born July 26-1926 (Day, Month, Year)
5. Present residence 324 E. 23rd St., Indianapolis, Ind.
6. Present occupation Works at G.E. 7. Full christian and surname of father Ray Bragg
8. His color White 9. His birthplace Detrick Ill. 10. His occupation Welder 11. His residence Brownsburg, Ind.
12. Full christian and maiden name of mother Ethel Faulk 13. Her color White 14. Her occupation Housewife
15. Her birthplace Brownsburg, Ind 16. Her residence Brownsburg, Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce Dec 19-1949
22. Is the female contracting party afflicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Mary L. Bragg

Mary L. Bragg deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Mary L. Bragg

Subscribed and sworn to before me, this 9th day of August, 1950

Edith M. Johnson, Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Joseph H. Williams
To
Mary L. Bragg

Indiana, to-wit: Hendricks County, ss:

BE IT REMEMBERED, That on this 9th day of August, 1950, the following Marriage License was issued, to-wit:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Joseph H Williams and Mary L. Bragg and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edith M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 9th day of August, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 15th day of August, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Joseph H Williams and Mary L. Bragg on the 12th day of August, 1950

Meed W. Reynolds, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A373957

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Manford Stuart Mitchell to Bonnie Kathryn Gross

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Manford Stuart Mitchell
2. Color w 3. Where born Indianapolis (Town, County, State or Country) 4. When born April 1-1926 (Day, Month, Year)
5. Present residence RR3 Danville Ind.
6. Present occupation Brick Mason 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Nygart Mitchell 10. His color W
11. His birthplace Hendricks Co. Ind. 12. His occupation Brick Mason 13. His residence RR3 Danville Ind.
14. Full christian and maiden name of mother Margaret Dori Jones 15. Her color W 16. Her occupation Housewife
17. Her birthplace Hendricks Co. Ind. 18. Her residence RR3 Danville 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Manford Stuart Mitchell

Manford Stuart Mitchell deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Manford Stuart Mitchell

Subscribed and sworn to before me, this 10th day of August, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A373950

Application is hereby made for a license for the marriage of FEMALE

Bonnie Kathryn Gross to Manford Stuart Mitchell

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Bonnie Kathryn Gross
2. Color w 3. Where born Howard Co. Ind. (Town, County, State or Country) 4. When born Apr. 29-1927 (Day, Month, Year)
5. Present residence RR1 Russiaville, Indiana
6. Present occupation School teacher 7. Full christian and surname of father Hebert Gross
8. His color w 9. His birthplace Tipton Co. Ind. 10. His occupation Farmer 11. His residence RR1 Russiaville
12. Full christian and maiden name of mother Sarah Cardwell 13. Her color w 14. Her occupation Housewife
15. Her birthplace Tipton Co. Ind. 16. Her residence RR1 Russiaville
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Bonnie Kathryn Gross

Bonnie Kathryn Gross deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Bonnie Kathryn Gross

Subscribed and sworn to before me, this 10th day of August, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Manford Stuart Mitchell
To
Bonnie Kathryn Gross

ss:

BE IT REMEMBERED, That on this 10th day of August, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Manford Stuart Mitchell and Bonnie Kathryn Gross and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 10th day of August, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 14th day of August, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Manford Stuart Mitchell and Bonnie Kathryn Gross on the 13th day of August, 1950

Raymond L. Alley

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No A 230352 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

Donald Kenworthy to Della Mundy

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Donald Kenworthy
2. Color White 3. Where born Hazelwood, Ind. (Town, County, State or Country) 4. When born April 29-1929 (Day, Month, Year)
5. Present residence 134 West St., Plainfield, Ind.
6. Present occupation Truck Driver 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Wesley Kenworthy 10. His color White
11. His birthplace Martinsville, Ind. 12. His occupation Farmer 13. His residence Plainfield, Ind.
14. Full christian and maiden name of mother Mary Pruskin 15. Her color White 16. Her occupation Housewife
17. Her birthplace Hazelwood, Ind. 18. Her residence Plainfield, Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? — 23. Has such prior marriage or marriages, been dissolved? — 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages —
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names —
27. Are you supporting them and are you complying with all Court orders issued for their support? —
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Donald Kenworthy deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Donald Kenworthy

Subscribed and sworn to before me, this 11-th day of August, 19 50

Adah M. Johnson, Clerk Hendricks Circuit Court

Certificate No. A 76995 Application is hereby made for a license for the marriage of **FEMALE**

Della Mundy to Donald Kenworthy

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Della Munday
2. Color White 3. Where born Canby, Ind. (Town, County, State or Country) 4. When born Nov. 2-2-1931 (Day, Month, Year)
5. Present residence Canby, Ind.
6. Present occupation None 7. Full christian and surname of father John W. Munday
8. His color White 9. His birthplace Canby, Ind. 10. His occupation Oyster 11. His residence Canby, Ind.
12. Full christian and maiden name of mother Pearl E. Butterworth 13. Her color White 14. Her occupation Works at Western Union Indianapolis.
15. Her birthplace Bridgeport, Conn. 16. Her residence Canby, Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? — 20. Has such prior marriage, or marriages been dissolved? — 21. If so, how and when? —
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Della Mundy deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Della Mundy

Subscribed and sworn to before me, this 11th day of August, 19 50

Adah M. Johnson, Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Donald Kenworthy
To
Della Mundy

ss:

BE IT REMEMBERED, That on this 11th day of August, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Donald Kenworthy and Della Mundy and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 11th day of August, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 15th day of August, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Daniel Kenworthy and Della Mundy on the 12 day of August, 1950 Rev. Robert N. Miller

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A406655 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

Ora P. Hines to Chloe Maine

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Ora Preston Hines
2. Color W 3. Where born Clinton Co. Ind. (Town, County, State or Country) 4. When born Oct. 14-1877 (Day, Month, Year)
5. Present residence Lyton Ind.
6. Present occupation Farmer 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father David Hines 10. His color W
11. His birthplace Hamilton Co. Ind. 12. His occupation Carpenter 13. His residence Deceased
14. Full christian and maiden name of mother Sarah J. Sheely 15. Her color C 16. Her occupation Housewife
17. Her birthplace Hamilton Co Ind. 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Death -
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party afflicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Ora Preston Hines

Ora Preston Hines deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Ora Preston Hines

Subscribed and sworn to before me, this 12th day of August, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A406656 Application is hereby made for a license for the marriage of **FEMALE**

Chloe Ethel Maine to Ora Preston Hines

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Chloe Ethel Maine
2. Color W 3. Where born Hamilton Co. Ind. (Town, County, State or Country) 4. When born March 5-1876 (Day, Month, Year)
5. Present residence Noblesville Ind.
6. Present occupation Housewife 7. Full christian and surname of father James Barker
8. His color W 9. His birthplace North Carolina 10. His occupation Farmer 11. His residence Deceased.
12. Full christian and maiden name of mother Mary E Russell 13. Her color W 14. Her occupation Housewife
15. Her birthplace Indiana 16. Her residence Deceased
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? twice 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Death
22. Is the female contracting party afflicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No Chloe E Maine

State of Indiana, Hendricks County, ss:

Signature of Applicant

Chloe Ethel Maine deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Chloe E Maine

Subscribed and sworn to before me, this 12th day of August, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Ora Preston Hines
To
Chloe Ethel Maine

ss:

BE IT REMEMBERED, That on this 12th day of August, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Ora Preston Hines and Chloe Ethel Maine and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 12th day of August, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 14th day of September, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Ora Preston Hines and Chloe Ethel Maine on the 11th day of September, 1950

Rev. Williams Sharp

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A349527

Application for Marriage License — MALE

Application is hereby made for a license for the marriage of

Aubrey Ray Montgomery to Ethel Johnson

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Aubrey Ray Montgomery
2. Color W 3. Where born Terre Haute Ind (Town, County, State or Country) 4. When born Nov 13-1923 (Day, Month, Year)
5. Present residence RR 2 - Roseville Ind.
6. Present occupation Coal Miner 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Everett Montgomery 10. His color W
11. His birthplace Fountaineet Ind 12. His occupation Coal Miner 13. His residence Roseville R 2
14. Full christian and maiden name of mother Lela Edwards 15. Her color W 16. Her occupation Housewife
17. Her birthplace Vigo Co Ind 18. Her residence Roseville R 2 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce - 1945
25. Give the names and ages of any minor children of the male applicant from all former marriages none
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Aubrey Ray Montgomery

Aubrey Ray Montgomery deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Aubrey Ray Montgomery

Subscribed and sworn to before me, this 12th day of August, 1950

Edna M Johnson Clerk Hendricks Circuit Court

Certificate No. A349526

Application is hereby made for a license for the marriage of — FEMALE

Ethel Johnson to Aubrey Ray Montgomery

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Ethel Johnson
2. Color W 3. Where born Coal Bluff Ind (Town, County, State or Country) 4. When born July 29-1926 (Day, Month, Year)
5. Present residence Coal Bluff Ind.
6. Present occupation Not employed 7. Full christian and surname of father Leon Johnson
8. His color W 9. His birthplace Indiana 10. His occupation Coal Miner 11. His residence Brazil Ind.
12. Full christian and maiden name of mother Mary Hoffman 13. Her color W 14. Her occupation Housewife
15. Her birthplace Brazil Ind. 16. Her residence Coal Bluff Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce - 1947
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Ethel Johnson

Ethel Johnson deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Ethel Johnson

Subscribed and sworn to before me, this 12th day of August, 1950

Edna M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Aubrey Ray Montgomery
To
Ethel Johnson

ss:

BE IT REMEMBERED, That on this 12th day of August, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Aubrey Ray Montgomery and Ethel Johnson and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edna M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 12th day of August, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 15th day of August, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Aubrey Ray Montgomery and Ethel Johnson on the 12th day of August, 1950

Thomas P. Mooney (Seal)

Marriage Record, No. 21, Hendricks County, Indiana

MALE

Certificate No. A324800

Application for Marriage License

Application is hereby made for a license for the marriage of Edwin Ray Miller to Mildred Irene Morrow

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Edwin Ray Miller
2. Color W 3. Where born Monticello, Ky (Town, County, State or Country) 4. When born Sept 30 - 1921 (Day, Month, Year)
5. Present residence Monticello, Ky
6. Present occupation Disassembler - 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father John Perry Miller 10. His color W
11. His birthplace Monticello, Ky 12. His occupation Merchant 13. His residence Monticello Ky
14. Full christian and maiden name of mother Lemon Crain 15. Her color W 16. Her occupation Housewife
17. Her birthplace Lebanon, Ky 18. Her residence Monticello Ky 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Edwin Ray Miller

Edwin Ray Miller deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives Edwin Ray Miller consent to the issuance of this license.

Subscribed and sworn to before me, this 12th day of August, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

FEMALE

Certificate No A324799

Application is hereby made for a license for the marriage of Mildred Irene Morrow to Edwin Ray Miller

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Mildred Irene Morrow
2. Color W 3. Where born Monticello, Ky (Town, County, State or Country) 4. When born Aug 22-1929 (Day, Month, Year)
5. Present residence Monticello, Ky
6. Present occupation Not employed 7. Full christian and surname of father Claudie Morrow
8. His color W 9. His birthplace Monticello Ky 10. His occupation Farming 11. His residence Monticello Ky
12. Full christian and maiden name of mother Hattie Baker 13. Her color W 14. Her occupation Housewife
15. Her birthplace Monticello Ky 16. Her residence Monticello Ky
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Mildred Irene Morrow

Mildred Irene Morrow deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives Mildred Irene Morrow consent to the issuance of this license.

Subscribed and sworn to before me, this 12th day of August, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Edwin Ray Miller
To
Mildred Irene Morrow

ss:

BE IT REMEMBERED, That on this 12th day of August, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Edwin Ray Miller and Mildred Irene Morrow and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 12th day of August, 1950.

(SEAL)

BE IT FURTHER REMEMBERED, That on this 14th day of August, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Edwin Ray Miller and Mildred Irene Morrow on the 12th day of August, 1950

Witness: Mary S. Atwater

Carleton W. Atwater
Pastor - First Baptist Church
Indianapolis

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A230315

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Harold Thomas Boswell, to Phyllis Ann Ronk

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Harold Thomas Boswell
2. Color wh. 3. Where born Cayuga Ind. (Town, County, State or Country) 4. When born March 25-1930 (Day, Month, Year)
5. Present residence Pittsboro, Ind. Rt 1.
6. Present occupation Farmer 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Walter Chas. Boswell 10. His color wh.
11. His birthplace Fountain Co. 12. His occupation Farmer 13. His residence Same
14. Full christian and maiden name of mother Hazel Tharp 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Vermillion Co. Ind 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Harold T. Boswell

Hazel Boswell deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives she consent to the issuance of this license. Hazel Boswell

Subscribed and sworn to before me, this 15th day of August, 1950

Sarah M Johnson Clerk Hendricks Circuit Court

Certificate No A226543

Application is hereby made for a license for the marriage of

FEMALE

Phyllis Ann Ronk to Harold Thomas Boswell

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Phyllis Ann Ronk
2. Color wh. 3. Where born Hendricks Co. Ind. (Town, County, State or Country) 4. When born July 28-1932 (Day, Month, Year)
5. Present residence Rt 2 Danville Ind.
6. Present occupation at home. 7. Full christian and surname of father Amos Ronk
8. His color wh. 9. His birthplace Montgomery Co. 10. His occupation Carpenter 11. His residence Same
12. Full christian and maiden name of mother Bernice Mabel Davidson 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Montgomery Co. Ind. 16. Her residence Same
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Phyllis Ronk

Phyllis Ann Ronk deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Phyllis Ronk

Subscribed and sworn to before me, this 15th day of August, 1950

Sarah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Harold Thomas Boswell
To
Phyllis Ann Ronk

ss:

BE IT REMEMBERED, That on this 15th day of August, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Harold Thomas Boswell and Phyllis Ann Ronk and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Sarah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 15th day of August, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 2nd day of September, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Harold Thomas Boswell and Phyllis Ann Ronk on the 20th day of August, 1950

Edgar L. Byrum Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A373979

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Guy Downing, Jr. to Hanson Marie Kinder

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Guy Downing, Jr.
2. Color W 3. Where born Roko'mo, Ind. (Town, County, State or Country) 4. When born June 16-1921 (Day, Month, Year)
5. Present residence Rt-1-Box 172. - Brownsburg, Ind.
6. Present occupation Painter 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Guy Henry Downing 10. His color W
11. His birthplace Missouri 12. His occupation Painter 13. His residence Not known
14. Full christian and maiden name of mother Katy Dellon 15. Her color W 16. Her occupation Housekeeper
17. Her birthplace Vincennes 18. Her residence 508 Bacon, Indpls. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Guy Downing, Jr. deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Guy Downing Jr

Subscribed and sworn to before me, this 19th day of August, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A373977

Application is hereby made for a license for the marriage of

FEMALE

Hanson Marie Kinder to Guy Downing, Jr.

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Hanson Marie Kinder
2. Color W 3. Where born Cicero, Ind. (Town, County, State or Country) 4. When born Aug 23-1915 (Day, Month, Year)
5. Present residence Rt 1 - Box 172 - Brownsburg
6. Present occupation At Home 7. Full christian and surname of father Hezzie Kinder
8. His color W 9. His birthplace Indiana 10. His occupation Auto Salesman 11. His residence deceased
12. Full christian and maiden name of mother Mabel Morgan 13. Her color W 14. Her occupation Housekeeper
15. Her birthplace Fortville, Ind. 16. Her residence Rt 1 - Box 172 - Brownsburg
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years?
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Hanson Marie Kinder deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Hanson M. Kinder

Subscribed and sworn to before me, this 19th day of August, 1950

Hanson M. Kinder

Adah M Johnson Clerk, Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Guy C Downing Jr.
To
Hanson Marie Kinder

ss:

BE IT REMEMBERED, That on this 19th day of August, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Guy C Downing Jr. and Hanson Marie Kinder and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 19th day of August, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 22nd day of August, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Guy C Downing Jr. and Hanson Marie Kinder on the 19th day of August, 1950

Rev. Arthur Howell

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 291424

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Paul Reynolds Kinney to Era Nadine Franklin

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Paul Reynolds Kinney
2. Color Wh. 3. Where born Indpls. (Town, County, State or Country) 4. When born Sept 23-1928 (Day, Month, Year)
5. Present residence 514 N. Alabama - Indpls.
6. Present occupation R. C. A. 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Emmett Lee Kinney 10. His color wh.
11. His birthplace Indpls 12. His occupation Laborer 13. His residence Indpls.
14. Full christian and maiden name of mother Mabel E. Strawsburg 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Indpls. 18. Her residence Indpls. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Paul R. Kinney

Paul Reynolds Kinney deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Paul R. Kinney

Subscribed and sworn to before me, this 19th day of August, 19 50

(Seal) Arch M Johnson Clerk Hendricks Circuit Court

Certificate No. A 291877

FEMALE

Application is hereby made for a license for the marriage of Era Nadine Franklin to Paul Reynolds Kinney

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Era Nadine Franklin
2. Color wh. 3. Where born Bowling Green, Ky. (Town, County, State or Country) 4. When born Nov 20-1933 (Day, Month, Year)
5. Present residence 514 No. Alabama Apt 1 - Indpls.
6. Present occupation None 7. Full christian and surname of father Clarence E. Franklin
8. His color wh. 9. His birthplace Allen Co. Ky. 10. His occupation Laborer 11. His residence Same
12. Full christian and maiden name of mother Minnie B. Crowder 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Lafayette, Tenn. 16. Her residence Same.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes. 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Era Nadine Franklin

Minnie Bessie Franklin deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. Bessie Franklin

Subscribed and sworn to before me, this 19th day of August, 19 50

(Seal) Arch M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Paul Reynolds Kinney
To
Era Nadine Franklin

ss:

BE IT REMEMBERED, That on this 19th day of August, 19 50, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Paul Reynolds Kinney and Era Nadine Franklin and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Arch M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 19th day of August, 19 50

(SEAL)

BE IT FURTHER REMEMBERED, That on this 22nd day of August, 19 50, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Paul Reynolds Kinney and Era Nadine Franklin on the 19 day of August, 19 50

Thomas P. Kinney
(L. P. Seal)

Marriage Record, No. 21, Hendricks County, Indiana

MALE

Certificate No. A363237

Application for Marriage License

Application is hereby made for a license for the marriage of Glen Robert Hovermale to Priscilla Elaine Pittenger

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Glen Robert Hovermale
2. Color W 3. Where born Danville Ind. (Town, County, State or Country) 4. When born Nov 4-1928 (Day, Month, Year)
5. Present residence 520 Eagle St. Terre Haute Ind.
6. Present occupation Student 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Glen Robert Hovermale 10. His color W. 11. His birthplace Layton Ind. 12. His occupation Stat Rep. for Finance Co 13. His residence Danville Ind.
14. Full christian and maiden name of mother Gladys Jackson 15. Her color W 16. Her occupation Housewife
17. Her birthplace Indiana. 18. Her residence Danville Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Glen Robert Hovermale jr.

Glen Robert Hovermale deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Glen Robert Hovermale Jr.

Subscribed and sworn to before me, this 19th day of August, 19 50

Adah M. Johnson Clerk Hendricks Circuit Court

FEMALE

Certificate No. A257250

Application is hereby made for a license for the marriage of Priscilla Elaine Pittenger to Glen Robert Hovermale

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Priscilla Elaine Pittenger
2. Color W 3. Where born Desoto Indiana (Town, County, State or Country) 4. When born May 29-1930 (Day, Month, Year)
5. Present residence 915 Indiana Ave. Anderson Ind.
6. Present occupation Student 7. Full christian and surname of father Ronald J Pittenger
8. His color W 9. His birthplace Desoto Ind. 10. His occupation Salesman 11. His residence 915 Ind. Ave. Anderson
12. Full christian and maiden name of mother Elizabeth Holt 13. Her color W 14. Her occupation Housewife
15. Her birthplace Benton Harbor, Mich. 16. Her residence 915 Ind. Ave. Anderson
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Priscilla Elaine Pittenger

Priscilla Elaine Pittenger deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Priscilla Elaine Pittenger

Subscribed and sworn to before me, this 19th day of August, 19 50

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Glen Robert Hovermale
To
Priscilla Elaine Pittenger

ss:

BE IT REMEMBERED, That on this 19th day of August, 19 50, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife, Glen Robert Hovermale and Priscilla Elaine Pittenger and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 19th day of August, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 29th day of August, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Glen Robert Hovermale and Priscilla Elaine Pittenger on the 26th day of August, 1950.

Wesley W. Bradford, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A286908

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Maurice Eugene Bombei to Peggy Jo Thompson

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Maurice Eugene Bombei
2. Color W 3. Where born Plainfield Ind. (Town, County, State or Country) 4. When born Aug 17-1931 (Day, Month, Year)
5. Present residence Danville Rt 2
6. Present occupation Farmer 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father John N. Bombei 10. His color W
11. His birthplace Indianapolis 12. His occupation Farmer 13. His residence Danville, Rt 2
14. Full christian and maiden name of mother Rose E Colbert 15. Her color W 16. Her occupation Housewife
17. Her birthplace Plainfield 18. Her residence Danville, Rt 2 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages.
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names.
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

John H. Bombei deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives his consent to the issuance of this license.

Signature of Applicant Maurice Eugene Bombei

John H. Bombei

Subscribed and sworn to before me, this 19th day of August, 1950

Edith M. Johnson Clerk Hendricks Circuit Court

Certificate No. A287904

Application is hereby made for a license for the marriage of

FEMALE

Peggy Jo Thompson to Maurice Eugene Bombei

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Peggy Jo Thompson
2. Color W 3. Where born Gustavus Ill. (Town, County, State or Country) 4. When born Feb. 12-1931 (Day, Month, Year)
5. Present residence 518 Spruce St. Plainfield
6. Present occupation Clerk-Typist 7. Full christian and surname of father Robert E. Thompson
8. His color W 9. His birthplace Illinois 10. His occupation Cabinet Maker 11. His residence 518 Spruce St. Plainfield
12. Full christian and maiden name of mother Grace Oakley 13. Her color W 14. Her occupation Housewife
15. Her birthplace Illinois 16. Her residence 518 Spruce St. Plainfield
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Peggy Jo Thompson deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Peggy Jo Thompson

Peggy Jo Thompson

Subscribed and sworn to before me, this 19th day of August, 1950

Edith M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Maurice Eugene Bombei
To
Peggy Jo Thompson

BE IT REMEMBERED, That on this 19th day of August, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Maurice Eugene Bombei and Peggy Jo Thompson and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edith M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 19th day of August, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 29th day of August, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Maurice Eugene Bombei and Peggy Jo Thompson on the 27th day of August, 1950

John S. Drollinger

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 251277

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of David Peter Silvestri to Donna Rose Pogue

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is David Peter Silvestri
2. Color White 3. Where born Lynn, Mass. (Town, County, State or Country) 4. When born Jan. 25-1927 (Day, Month, Year)
5. Present residence Lynn, Mass
6. Present occupation Student 7. If no occupation, what means has the male contracting party to support a family? —
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin — No.
9. Full christian and surname of father Albert Silvestri 10. His color White
11. His birthplace Italy 12. His occupation Dipper 13. His residence Lynn, Mass.
14. Full christian and maiden name of mother Mary Manchino 15. Her color White 16. Her occupation Housewife
17. Her birthplace Italy 18. Her residence Lynn, Mass. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
20. If so, is he now able to support a family and likely to so continue? —
21. Is this his first marriage? Yes 22. If not, how often has he been married? — 23. Has such prior marriage or marriages, been dissolved? — 24. If so, how and when? —
25. Give the names and ages of any minor children of the male applicant from all former marriages —
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names —
27. Are you supporting them and are you complying with all Court orders issued for their support? —
28. Is the male contracting party afflicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

David Peter Silvestri deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant David Peter Silvestri

Subscribed and sworn to before me, this 24th day of August, 1950

Adah M. Johnson, Clerk Hendricks Circuit Court

Certificate No. A 251276

Application is hereby made for a license for the marriage of

FEMALE

Donna Rose Pogue to David Silvester

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Donna Rose Pogue
2. Color White 3. Where born Indianapolis, Indiana (Town, County, State or Country) 4. When born July 15-1928 (Day, Month, Year)
5. Present residence Danville, Indiana
6. Present occupation At Home 7. Full christian and surname of father Edward W. Pogue
8. His color White 9. His birthplace Brooklyn, Ind. 10. His occupation Carpenter 11. His residence Danville, Ind.
12. Full christian and maiden name of mother Edeta Tardy 13. Her color White 14. Her occupation Deceased
15. Her birthplace Indianapolis, Ind. 16. Her residence Deceased
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? — 20. Has such prior marriage, or marriages been dissolved? — 21. If so, how and when? —
22. Is the female contracting party afflicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Donna Rose Pogue deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Donna Rose Pogue

Subscribed and sworn to before me, this 24th day of August, 1950

Adah M. Johnson, Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

David Peter Silvestri
To
Donna Rose Pogue

ss:

Indiana, to-wit: Hendricks County, ss:

BE IT REMEMBERED, That on this 24th day of August, 1950, the following Marriage License was issued, to-wit:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife David Peter Silvestri and Donna Rose Pogue and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 24th day of August 1950.

(SEAL)

BE IT FURTHER REMEMBERED, That on this 31st day of August, 1950 the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, David Peter Silvestri and Donna Rose Pogue on the 26th day of August, 1950

Anthony L. McLaughlin

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A374515

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Robert Lee Dunaway to Betty Jane Keneipp

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Robert Lee Dunaway
2. Color wh. 3. Where born Indpls. (Town, County, State or Country) 4. When born July 9-1921 (Day, Month, Year)
5. Present residence 831 Eastern Ave Indpls.
6. Present occupation Tool maker 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Raymond Dunaway 10. His color wh
11. His birthplace Carrollton Ky. 12. His occupation Tool Maker 13. His residence Madison Ind.
14. Full christian and maiden name of mother Anna A. Morgan 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Madison Ind. 18. Her residence Indpls-same-above 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce 1946.
25. Give the names and ages of any minor children of the male applicant from all former marriages 1 - Robert Lee Jr. 7 yrs.
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names Same - wholly
27. Are you supporting them and are you complying with all Court orders issued for their support? Yes
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Robert Lee Dunaway deposes and says that he Signature of Applicant Robert L Dunaway has personal knowledge of the facts above stated and that they and each of them are true, and gives Robert L Dunaway consent to the issuance of this license.

Subscribed and sworn to before me, this 26th day of August, 1950

Ward M Johnson Clerk Hendricks Circuit Court

Certificate No. A374514

Application is hereby made for a license for the marriage of

FEMALE

Betty Jane Keneipp to Robert Lee Dunaway

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Betty Jane Keneipp
2. Color wh. 3. Where born Terre Haute Ind. (Town, County, State or Country) 4. When born Jan 9-1930 (Day, Month, Year)
5. Present residence 1127 Loy - Indpls.
6. Present occupation Typist 7. Full christian and surname of father Kenneth N. Keneipp
8. His color wh. 9. His birthplace W. Terre Haute Ind. 10. His occupation Shipper Inspector 11. His residence Same
12. Full christian and maiden name of mother Bessie P. Grimm 13. Her color wh. 14. Her occupation Clerk
15. Her birthplace Brazil Ind. 16. Her residence Same
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? no.
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? no.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? no.

State of Indiana, Hendricks County, ss:

Betty Jane Keneipp deposes and says that she Signature of Applicant Betty Jane Keneipp has personal knowledge of the facts above stated and that they and each of them are true, and gives Betty Jane Keneipp consent to the issuance of this license.

Subscribed and sworn to before me, this 26th day of August, 1950

Ward M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Robert Lee Dunaway
To
Betty Jane Keneipp

ss:

BE IT REMEMBERED, That on this 26th day of August, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Robert Lee Dunaway and Betty Jane Keneipp and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Ward M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 26th day of September, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 6th day of September, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Robert Lee Dunaway and Betty Jane Keneipp on the 2nd day of Sept, 1950

Rev. K. E. Thorne

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A234554

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Charles Thomas Reed to Barbara May Williams

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Charles Thomas Reed
2. Color wh. 3. Where born Pittsboro Ind. (Town, County, State or Country) 4. When born Feb 25-1931 (Day, Month, Year)
5. Present residence Rt. 1 Pittsboro Ind
6. Present occupation Truck Driver 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Charles Richard Reed 10. His color wh.
11. His birthplace Boone Co. Ind 12. His occupation Farmer 13. His residence Pittsboro Ind
14. Full christian and maiden name of mother Ruby Doris Ayers 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Hendricks Co. 18. Her residence Dead 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Walter T. Reed, Guardian deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Charles Thomas Reed

+ Walter T. Reed Guardian

Subscribed and sworn to before me, this 26th day of August, 1950

Cash M Johnson Clerk Hendricks Circuit Court

Certificate No. A234555

Application is hereby made for a license for the marriage of

FEMALE

Barbara May Williams to Charles Thomas Reed

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Barbara May Williams
2. Color wh. 3. Where born Marion Co. Ind. (Town, County, State or Country) 4. When born Jan 28-1932 (Day, Month, Year)
5. Present residence Rt 3 Danville Ind
6. Present occupation File Clerk. 7. Full christian and surname of father Herman Thomas Williams
8. His color wh. 9. His birthplace Marion Co 10. His occupation Garageman 11. His residence Dead
12. Full christian and maiden name of mother Jenna MacIrwin 13. Her color wh. 14. Her occupation Storekeeper
15. Her birthplace Parke Co. Ind. 16. Her residence Rt 3 Danville Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes. 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Barbara May Williams deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Barbara May Williams

Barbara May Williams

Subscribed and sworn to before me, this 26th day of August, 1950

Cash M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Charles Thomas Reed
To
Barbara May Williams

ss:

BE IT REMEMBERED, That on this 26th day of August, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Charles Thomas Reed and Barbara May Williams and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Cash M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 26th day of August, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 2nd day of September, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Charles Thomas Reed and Barbara May Williams on the 31 day of August, 1950

Gaylord L. Hankins, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 1749

Application for Marriage License — MALE

Application is hereby made for a license for the marriage of

Donald Benton Rock to Janith Gwynne Davids

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Donald Benton Rock
2. Color Wh. 3. Where born W. Palm Beach Fla (Town, County, State or Country) 4. When born Aug 12 - 1926 (Day, Month, Year)
5. Present residence 396 N. Indiana - Danville Ind.
6. Present occupation Student 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Rolla Dayton Rock 10. His color wh.
11. His birthplace Kansas 12. His occupation C. P. A. 13. His residence Dec'd
14. Full christian and maiden name of mother Gertrude DuRocher 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Missouri 18. Her residence W. Palm Beach. Fla. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Donald Benton Rock deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Donald B. Rock

Donald B. Rock

Subscribed and sworn to before me, this 26 th day of August, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A 1748

Application is hereby made for a license for the marriage of — FEMALE

Janith Gwynne Davids to Donald Benton Rock

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Janith Gwynne Davids
2. Color wh. 3. Where born New York City (Town, County, State or Country) 4. When born Jan 6 - 1925 (Day, Month, Year)
5. Present residence Bronxville N.Y. 6. Present occupation Secretary 7. Full christian and surname of father Walter Irving Davids
8. His color wh. 9. His birthplace New Rochelle N.Y. 10. His occupation Mfg. 11. His residence Same
12. Full christian and maiden name of mother Hazel Tallmant 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace New York City 16. Her residence Same
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes. 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Janith Gwynne Davids deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Janith Gwynne Davids

Janith Gwynne Davids

Subscribed and sworn to before me, this 26 th day of August, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Donald Benton Rock
To
Janith Gwynne Davids

ss:

BE IT REMEMBERED, That on this 26 th day of August, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Donald Benton Rock and Janith Gwynne Davids and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 26 th day of August, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 30 th day of August, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Donald Benton Rock and Janith Gwynne Davids on the 27 th day of August, 1950 Rev. Douglas R. MacLaury

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 259911

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Melvin Newell Wray to Helen Shaw Giffin

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Melvin Newell Wray
2. Color wh. 3. Where born Danville Ind. (Town, County, State or Country) 4. When born April 17-1921 (Day, Month, Year)
5. Present residence Danville Ind.
6. Present occupation Allison 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Harland W. Wray 10. His color wh.
11. His birthplace Zippicanoe Co. 12. His occupation Proprietor Oil Co. 13. His residence Danville
14. Full christian and maiden name of mother Lillian Stigleman Mary Elizabeth 15. Her color wh 16. Her occupation Dead
17. Her birthplace Unknown 18. Her residence Dead 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Melvin Newell Wray deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Melvin N. Wray

Subscribed and sworn to before me, this 31 st day of August, 1950

Arah M Johnson Clerk Hendricks Circuit Court

Certificate No. A 25 9913

Application is hereby made for a license for the marriage of FEMALE

Helen Shaw Giffin to Melvin Newell Wray

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Helen Shaw Giffin
2. Color wh. 3. Where born Mooresville Ind. (Town, County, State or Country) 4. When born Dec 31-1918 (Day, Month, Year)
5. Present residence Danville Ind.
6. Present occupation Silver Counselor 7. Full christian and surname of father Enver L. Shaw
8. His color wh 9. His birthplace Hendricks Co. 10. His occupation Salesman 11. His residence Same
12. Full christian and maiden name of mother V. Fern Rogers 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Alaska Ind. 16. Her residence Same.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce Sept. 1947.
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Helen Shaw Giffin deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Helen Shaw Giffin

Subscribed and sworn to before me, this 31 st day of August, 1950

Arah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Melvin Newell Wray
To
Helen Shaw Giffin

ss:

Indiana, to-wit: Hendricks County, ss:

BE IT REMEMBERED, That on this 31 st day of August, 1950, the following Marriage License was issued, to-wit:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Melvin Newell Wray and Helen Shaw Giffin and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Arah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 31 st day of August, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 13th day of September, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Melvin Newell Wray and Helen Shaw Giffin on the 1st day of September, 1950

Rev. Ira B. Stock

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No A 196188 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

Garie Jackson to Alice K. Basch

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Garie Jackson
2. Color White 3. Where born Franklin, Ky. (Town, County, State or Country) 4. When born Oct. 2-1902 (Day, Month, Year)
5. Present residence 5250 E. 9th St., Indianapolis, Ind.
6. Present occupation Dispatcher 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Fletcher B. Jackson 10. His color White
11. His birthplace Franklin, Ky. 12. His occupation Carpenter 13. His residence Indianapolis, Ind.
14. Full christian and maiden name of mother Fannie Faulkner 15. Her color White 16. Her occupation Housewife
17. Her birthplace Franklin, Ky. 18. Her residence Indianapolis 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Twice 23. Has such prior marriage or marriages, been dissolved? Yes Divorce 24. If so, how and when? Divorce 1930 - Sept. 1945
25. Give the names and ages of any minor children of the male applicant from all former marriages None
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names —
27. Are you supporting them and are you complying with all Court orders issued for their support? —
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Garie K Jackson

Garie Jackson deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Garie K Jackson

Subscribed and sworn to before me, this 1st day of Sept. August, 1950

Adah M. Johnson, Clerk Hendricks Circuit Court

Certificate No A 196189 Application is hereby made for a license for the marriage of **FEMALE**

Alice K. Basch to Garie Jackson

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Alice K. Basch
2. Color White 3. Where born Kansas City, No. (Town, County, State or Country) 4. When born Oct 11-1905 (Day, Month, Year)
5. Present residence 1641 Crist Draper Lane, Speedway, Ind.
6. Present occupation Housewife 7. Full christian and surname of father Anthony Bertapelle 8. His color White 9. His birthplace Austria 10. His occupation Janitor 11. His residence 9442 E. Holmes Indianapolis Ind
12. Full christian and maiden name of mother Elene McCammadder 13. Her color White 14. Her occupation Deceased
15. Her birthplace Brownsburg, Ind. 16. Her residence Deceased.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce January 1946
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Alice K. Basch

Alice K Basch deposes and says that has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Alice K Basch

Subscribed and sworn to before me, this 1st day of September, 1950

Adah M. Johnson, Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Garie Jackson
To
Alice K. Basch

ss:

BE IT REMEMBERED, That on this 1st day of September, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Garie Jackson and Alice K. Basch and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 1st day of September, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 2nd day of September, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Garie Jackson and Alice Basch on the 1 day of Sept, 1950

Thomas P. Heaney
(J. P. Seal)

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 1840

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of William Wayne Burch to Marjorie Delores Stone

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is William Wayne Burch
2. Color White 3. Where born Terre Haute (Town, County, State or Country) Ind. 4. When born Mar. 28-1930 (Day, Month, Year)
5. Present residence R.R. 1 Box 1775, Danville, Ind.
6. Present occupation Service Man for Coca Cola 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Ivan A. Burch 10. His color White
11. His birthplace Davis Co., Ind. 12. His occupation Carpenter 13. His residence Danville Ind. R.F.D.
14. Full christian and maiden name of mother Josephine Albright 15. Her color White 16. Her occupation Housewife
17. Her birthplace Riley Ind. 18. Her residence Danville, Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? — 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages —
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names —
27. Are you supporting them and are you complying with all Court orders issued for their support? —
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant William Wayne Burch

Josephine C. Burch deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. Josephine C. Burch

Subscribed and sworn to before me, this 2nd day of September, 1950 William Wayne Burch

Edith M. Johnson, Clerk Hendricks Circuit Court

Certificate No. A 1839

Application is hereby made for a license for the marriage of

FEMALE

Marjorie Delores Stone to William Wayne Burch

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Marjorie Delores Stone
2. Color White 3. Where born Indianapolis (Town, County, State or Country) Ind. 4. When born Nov. 3-1929 (Day, Month, Year)
5. Present residence R.R. 1 Box 1775 Danville Ind.
6. Present occupation Machine Worker 7. Full christian and surname of father Alton Ira Stone
8. His color White 9. His birthplace Indianapolis Ind. 10. His occupation Bus Driver 11. His residence Indianapolis Ind.
12. Full christian and ~~maiden~~ name of mother Thelma Odell Goodner 13. Her color White 14. Her occupation Housewife
15. Her birthplace Madison, Ind. 16. Her residence 847 Biltmore Ave., Indpls. Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? — 20. Has such prior marriage, or marriages been dissolved? — 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Marjorie Delores Stone

Marjorie Delores Stone deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Marjorie Delores Stone

Subscribed and sworn to before me, this 2nd day of September, 1950.

Edith M. Johnson, Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

William Wayne Burch
To
Marjorie Delores Stone

ss:

Indiana, to-wit: Hendricks County, ss:

BE IT REMEMBERED, That on this 2nd day of September, 1950, the following Marriage License was issued, to-wit:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife William Wayne Burch and Marjorie Delores Stone and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edith M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 2nd day of September, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 6th day of September, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, William Wayne Burch and Marjorie Delores Stone on the 2nd day of September, 1950

(Rev.) Donald J. Durkin

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 231397 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

Earl William Gass to Mary Lucille Biggs

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Earl William Gass
2. Color wh. 3. Where born New Augusta Ind (Town, County, State or Country) 4. When born Dec 19-1913 (Day, Month, Year)
5. Present residence New Augusta Ind.
6. Present occupation Truck Driver-J.C.Penny 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Lewis Gass 10. His color wh.
11. His birthplace New Augusta 12. His occupation Blacksmith 13. His residence Dead
14. Full christian and maiden name of mother Grace Power 15. Her color Wh. 16. Her occupation Housewife
17. Her birthplace New Augusta Ind 18. Her residence Dead
19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once. 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce 1945
25. Give the names and ages of any minor children of the male applicant from all former marriages No.
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Earl William Gass deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Earl William Gass +

Earl William Gass +

Subscribed and sworn to before me, this 2nd day of September, 1950

Arah M Johnson Clerk Hendricks Circuit Court

Certificate No. A 231395. Application is hereby made for a license for the marriage of **FEMALE**

Mary Lucille Biggs to Earl William Gass

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Mary Lucille Biggs
2. Color wh. 3. Where born Logansport Ind (Town, County, State or Country) 4. When born July 9-1923 (Day, Month, Year)
5. Present residence 742 No. Bellefleur - Peoples.
6. Present occupation Factory worker. 7. Full christian and surname of father Charles D. Biggs
8. His color wh. 9. His birthplace Logansport. 10. His occupation Engineer 11. His residence Same
12. Full christian and maiden name of mother Lucille Owen 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Flora Ind. 16. Her residence Same.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Twice 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce - 1945 - 1950.
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Mary Lucille Biggs deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Mary Lucille Biggs +

Mary Lucille Biggs +

Subscribed and sworn to before me, this 2nd day of September, 1950

Arah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Earl William Gass
To
Mary Lucille Biggs

ss:

BE IT REMEMBERED, That on this 2nd day of September, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Earl William Gass and Mary Lucille Biggs and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Arah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 2nd day of September, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 5th day of September, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Earl William Gass and Mary Lucille Biggs on the 2nd day of September, 1950

Rev. Lester N. Abel

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A1687

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Robert Wayne Kidd to Juanita Ruth Lee

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Robert Wayne Kidd
2. Color wh. 3. Where born Metcalf Co Ky (Town, County, State or Country) 4. When born Aug 22-1929 (Day, Month, Year)
5. Present residence Jamestown Ind.
6. Present occupation Farmer 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father James Garnett Kidd 10. His color Wh.
11. His birthplace Greene Co. Ky 12. His occupation Farmer 13. His residence Peachdale Ind.
14. Full christian and maiden name of mother Minnie B. Davis 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Metcalf Co. Ky 18. Her residence Peachdale 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

James Robert Wayne Kidd deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives he consent to the issuance of this license. Signature of Applicant Robert Wayne Kidd.

Subscribed and sworn to before me, this 2nd day of September, 1950 J E Kidd

Arch M Johnson Clerk Hendricks Circuit Court

Certificate No. A1685

Application for Marriage License

FEMALE

Application is hereby made for a license for the marriage of Juanita Ruth Lee to Robert Wayne Kidd

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Juanita Ruth Lee
2. Color wh. 3. Where born Putnam Co. Ind. (Town, County, State or Country) 4. When born Dec 21-1932 (Day, Month, Year)
5. Present residence North Salem
6. Present occupation Home 7. Full christian and surname of father Roy Lee Sr.
8. His color wh. 9. His birthplace Greencastle 10. His occupation Farmer 11. His residence Jayne
12. Full christian and maiden name of mother Ethel Josephine Powers 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Putnam Co. Ind. 16. Her residence Jayne.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes. 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Roy Lee Sr. deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives he consent to the issuance of this license. Signature of Applicant Juanita Ruth Lee

Subscribed and sworn to before me, this 2nd day of September, 1950 Roy Lee Sr

Arch M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Robert Wayne Kidd
To
Juanita Ruth Lee

ss:

BE IT REMEMBERED, That on this 2nd day of September, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Robert Wayne Kidd and Juanita Ruth Lee and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Arch M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 2nd day of September, 1950 (SEAL)

BE IT FURTHER REMEMBERED, That on this 11th day of September, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Robert Wayne Kidd and Juanita Ruth Lee on the 9th day of September, 1950

Rowe N. Dampier

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 235486

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Lawrence Martin Anderson to Laura Belle McKinney

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Lawrence Martin Anderson
2. Color Wh. 3. Where born Indpls. (Town, County, State or Country) 4. When born Sept 4-1909 (Day, Month, Year)
5. Present residence 1408 Shepard - Indpls.
6. Present occupation Cement Finisher 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Martin L. Anderson 10. His color Wh.
11. His birthplace Campbellsville Ky 12. His occupation Cement finisher 13. His residence Decd.
14. Full christian and maiden name of mother Bertha Miller 15. Her color C 16. Her occupation Housewife
17. Her birthplace Lawrenceburg Ky. 18. Her residence Decd 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce August 1950.
25. Give the names and ages of any minor children of the male applicant from all former marriages No.
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Lawrence Martin Anderson deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Lawrence M Anderson X

Lawrence M Anderson X

Subscribed and sworn to before me, this 2nd day of September, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A 257140

Application is hereby made for a license for the marriage of

FEMALE

Laura Belle McKinney to Lawrence Martin Anderson

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Laura Belle McKinney
2. Color Wh. 3. Where born Owenton Ky. (Town, County, State or Country) 4. When born Sept 9-1921 (Day, Month, Year)
5. Present residence 1408 Shepherd Indpls.
6. Present occupation None 7. Full christian and surname of father William Gross
8. His color C. 9. His birthplace Owenton Ky. 10. His occupation Retired 11. His residence Muncie Ind.
12. Full christian and maiden name of mother Kate DeJarnett 13. Her color C. 14. Her occupation Housewife
15. Her birthplace Owenton Ky. 16. Her residence Muncie Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? 1946 Divorce
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Laura Belle McKinney deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Laura Bell McKinney X

Laura Bell McKinney X

Subscribed and sworn to before me, this 2nd day of September, 1950

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Lawrence Martin Anderson
To
Laura Belle McKinney

ss:

Indiana, to-wit: Hendricks County, ss:

BE IT REMEMBERED, That on this 2nd day of September, 1950, the following Marriage License was issued, to-wit:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Lawrence Martin Anderson and Laura Belle McKinney and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 2nd day of September, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 4th day of September, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Lawrence Martin Anderson and Laura Belle McKinney on the 2nd day of September, 1950

Thomas P. Heaney J.P. (Seal)

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A39142 7 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of Gordon Alan Hobbs to Martha Jane Blake

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Gordon Alan Hobbs
2. Color W 3. Where born Indianapolis Ind. (Town, County, State or Country) 4. When born May 13-1927 (Day, Month, Year)
5. Present residence Plainfield Ind.
6. Present occupation Nurserymen 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Fredrick Robert Hobbs 10. His color W
11. His birthplace Hendricks Co. Ind. 12. His occupation Nurserymen 13. His residence Plainfield
14. Full christian and maiden name of mother Helen Jones 15. Her color W 16. Her occupation Housewife
17. Her birthplace Plainfield Ind. 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Gordon Alan Hobbs

Gordon Alan Hobbs deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Gordon Alan Hobbs

Subscribed and sworn to before me, this 4th day of September, 1950

Eddah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A287549 Application is hereby made for a license for the marriage of **FEMALE**

Martha Jane Blake to Gordon Alan Hobbs

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Martha Jane Blake
2. Color ww 3. Where born Detroit Michigan (Town, County, State or Country) 4. When born Dec. 16-1931 (Day, Month, Year)
5. Present residence E. Jefferson St. Franklin Ind.
6. Present occupation Not Employed 7. Full christian and surname of father George Blake
8. His color ww 9. His birthplace New Jersey 10. His occupation College Prof. 11. His residence Franklin
12. Full christian and maiden name of mother Grace Kleyer (Kleyer) 13. Her color ww 14. Her occupation Housewife
15. Her birthplace New York 16. Her residence Franklin Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Martha Jane Blake

Martha Jane Blake deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Martha Jane Blake

Subscribed and sworn to before me, this 4th day of September, 1950

Eddah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Gordon Alan Hobbs
To
Martha Jane Blake

ss:

BE IT REMEMBERED, That on this 4th day of September, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Gordon Alan Hobbs and Martha Jane Blake and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Eddah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 4th day of September, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 15th day of September, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Gordon Alan Hobbs and Martha Jane Blake on the tenth day of September, 1950

Harold W. Richardson

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A1698

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Dewey Wilbur Witcher to Ruth Alberta Weggans

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Dewey Wilbur Witcher
2. Color Wh. 3. Where born Kentucky (Town, County, State or Country) 4. When born Sept 7 - 1922 (Day, Month, Year)
5. Present residence Brownsburg Ind.
6. Present occupation Farmer 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father James Thomas Witcher 10. His color wh.
11. His birthplace Ky. 12. His occupation Farmer 13. His residence Same
14. Full christian and maiden name of mother Lee Walker 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Ky. 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Dewey Wilbur Witcher deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Signature of Applicant Dewey Wilbur Witcher x

Subscribed and sworn to before me, this 7th day of September, 1950

Asah W Johnson Clerk Hendricks Circuit Court

Certificate No. A23730

Application is hereby made for a license for the marriage of

FEMALE

Ruth Alberta Weggans to Dewey Wilbur Witcher

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Ruth Alberta Weggans
2. Color wh. 3. Where born Indianapolis (Town, County, State or Country) 4. When born Jan. 16 - 1932 (Day, Month, Year)
5. Present residence Brownsburg Ind.
6. Present occupation Salesgirl 7. Full christian and surname of father Rufus Weggans
8. His color wh. 9. His birthplace Montana 10. His occupation Farmer 11. His residence Same
12. Full christian and maiden name of mother Molley Mosley 13. Her color Wh. 14. Her occupation Housewife
15. Her birthplace Montana 16. Her residence Same.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes. 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Ruth Alberta Wiggins deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Signature of Applicant Ruth alberta Wiggins x

Subscribed and sworn to before me, this 7th day of September, 1950

Asah W Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Dewey Wilbur Witcher
To
Ruth Alberta Wiggins

ss:

BE IT REMEMBERED, That on this 7th day of September, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Dewey Wilbur Witcher and Ruth Alberta Weggans and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Asah W Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 7th day of September, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 9th day of September, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Dewey Wilbur Witcher and Ruth Alberta Weggans on the 7 day of Sept. 1950. Rev. James D Shockley

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A20925 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

Thomas Edwin Jessup to Mary Lou Atkins

UPON THE FOLLOWING STATEMENT OF FACTS, RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Thomas Edwin Jessup
2. Color W 3. Where born Plainfield Hendricks Co (Town, County, State or Country) 4. When born July 14-1926 (Day, Month, Year)
5. Present residence Plainfield R.R. 2 Ind.
6. Present occupation Cabinet Maker 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Clifford Lee Jessup 10. His color W
11. His birthplace Hendricks Co Ind. 12. His occupation Farmer 13. ~~His~~ residence Plainfield Ind R.R.
14. Full christian and maiden name of mother Hazel Owen 15. Her color W 16. Her occupation Housewife
17. Her birthplace Hamilton Co Ind. 18. Her residence Plainfield R.R. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Thomas Ed Jessup

Thomas Edwin Jessup deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Thomas Ed Jessup

Subscribed and sworn to before me, this 8th day of September 1950

Edah M. Johnson Clerk Hendricks Circuit Court

Certificate No A20924 Application is hereby made for a license for the marriage of **FEMALE**

Mary Lou Atkins to Thomas Edwin Jessup

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Mary Lou Atkins
2. Color W 3. Where born Indianapolis Ind. (Town, County, State or Country) 4. When born Nov 2-1929 (Day, Month, Year)
5. Present residence Indianapolis R.R. 1 Box 2 6. Present occupation Clerk-Metropolitan Life Ins Co 7. Full christian and surname of father Charles Amos Atkins
8. His color W 9. His birthplace Petersburg Ind. 10. His occupation U.S. Rubber Co. 11. His residence Lapel R.R.
12. Full christian and maiden name of mother Mildred Arbeth Tucker 13. Her color W 14. Her occupation Housewife
15. Her birthplace Petersburg, Ind. 16. Her residence Indianapolis Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Mary Lou Atkins

Mary Lou Atkins deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Mary Lou Atkins

Subscribed and sworn to before me, this 8th day of September, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Thomas Edwin Jessup
To
Mary Lou Atkins

ss:

BE IT REMEMBERED, That on this 8th day of September, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Thomas Edwin Jessup and Mary Lou Atkins and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 8th day of September, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 13th day of September, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Thomas Edwin Jessup and Mary Lou Atkins on the 10th day of September, 1950

Robert O. Fife, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A237396 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

Robert Wathen to Leona Margaret Heiston

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Robert Napoleon Wathen
2. Color W 3. Where born Clementsville Ky (Town, County, State or Country) 4. When born June 30-1922 (Day, Month, Year)
5. Present residence 1230 South Belmont, Indpls
6. Present occupation Laborer - Kingan's 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin no
9. Full christian and surname of father Linus Wathen 10. His color W
11. His birthplace Kentucky 12. His occupation Farmer 13. His residence Clementsville Ky
14. Full christian and maiden name of mother Annabelle Ewing 15. Her color W 16. Her occupation Housewife
17. Her birthplace Kentucky 18. Her residence Clementsville Ky 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? no 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? no
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? no

State of Indiana, Hendricks County, ss:

Signature of Applicant Robert Napoleon Wathen

Robert Napoleon Wathen deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Robert Napoleon Wathen

Subscribed and sworn to before me, this 9th day of September, 19 50

Adah M Johnson Clerk Hendricks Circuit Court

Certificate No. A237394 Application is hereby made for a license for the marriage of **FEMALE**

Leona Margaret Heiston to Robert Napoleon Wathen

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Leona Margaret Heiston
2. Color W 3. Where born Petersburg Ind (Town, County, State or Country) 4. When born Dec 4-1931 (Day, Month, Year)
5. Present residence Linton Ind. 6. Present occupation Cocoplotomete Operator 7. Full christian and surname of father Clement Heiston
8. His color W 9. His birthplace Clementsville Ky 10. His occupation Farmer 11. His residence Linton Ind.
12. Full christian and maiden name of mother Pearl Vaughn 13. Her color W 14. Her occupation Housewife
15. Her birthplace Clementsville Ky 16. Her residence Linton Ind
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Leona Margaret Heiston

Leona Margaret Heiston deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Leona Margaret Heiston

Subscribed and sworn to before me, this 9th day of September, 19 50

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Robert Wathen
To
Leona Margaret Heiston

ss:

BE IT REMEMBERED, That on this 9th day of September, 19 50, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Robert Wathen and Leona Margaret Heiston and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court hereunto subscribe my name, and affix the seal of said Court, at Danville, this 9th day of September, 19 50 (SEAL)

BE IT FURTHER REMEMBERED, That on this 18th day of September, 19 50, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Robert Napoleon Wathen and Leona Margaret Heiston on the 11th day of September, 19 50

Carl L. Wilderding
REV. CARL L. WILDERDING

Marriage Record, No. 21, Hendricks County, Indiana

MALE

Certificate No. A343864

Application for Marriage License

Application is hereby made for a license for the marriage of Daniel Monroe Mowery to Zelma Mae Mowery

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Daniel Monroe Mowery
2. Color wh. 3. Where born Bloomfield Ind. (Town, County, State or Country) 4. When born Nov. 22 1906 (Day, Month, Year)
5. Present residence Brownsburg Rt 1
6. Present occupation Electrical plater 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Monroe Mowery 10. His color wh.
11. His birthplace Bloomfield Ind. 12. His occupation Farmer 13. His residence Dec'd
14. Full christian and maiden name of mother Mary Dove 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Bloomfield Ind 18. Her residence Jeffersonville Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce June 10. 1950
25. Give the names and ages of any minor children of the male applicant from all former marriages Yes - Marrying ex-wife and will support children as before divorce.
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Daniel Monroe Mowery deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Daniel M Mowery

Daniel M Mowery

Subscribed and sworn to before me, this 9th day of September, 1950

Asah M. Johnson Clerk Hendricks Circuit Court

FEMALE

Certificate No. A343863

Application is hereby made for a license for the marriage of Zelma Mae Mowery to Daniel Monroe Mowery

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Zelma Mae Mowery
2. Color wh. 3. Where born Jeffersonville Ind. (Town, County, State or Country) 4. When born Jan 7-1910 (Day, Month, Year)
5. Present residence Brownsburg Ind.
6. Present occupation Housekeeper 7. Full christian and surname of father Claude Rumple
8. His color wh. 9. His birthplace Jeffersonville Ind 10. His occupation Coal mines 11. His residence Dec'd
12. Full christian and maiden name of mother Anna Landon 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Jeffersonville 16. Her residence Jeffersonville Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? June 10-1950. Divorce
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Zelma Mae Mowery deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Zelma Mae Mowery

Zelma Mae Mowery.

Subscribed and sworn to before me, this 9th day of September, 1950

Asah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Daniel Monroe Mowery
To
Zelma Mae Mowery

ss:

BE IT REMEMBERED, That on this 9th day of September, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Daniel Monroe Mowery and Zelma Mae Mowery and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Asah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 9th day of September, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 12th day of September, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Daniel Monroe Mowery and Zelma Mae Mowery on the 9th day of September, 1950

Thomas R. Denney (Seal)

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 54362 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

James H. Ross Jr. to Betty Lou Ross

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is James H. Ross Jr.
2. Color Wh. 3. Where born San Juan Porto Rico (Town, County, State or Country) 4. When born Feb 22 - 1927 (Day, Month, Year)
5. Present residence North Salem
6. Present occupation Air conditioning 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father James H Ross Sr. 10. His color Wh.
11. His birthplace Jamestown Ind. 12. His occupation Air Conditioning 13. His residence San Juan Porto Rico
14. Full christian and maiden name of mother unknown 15. Her color 16. Her occupation
17. Her birthplace 18. Her residence 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? March 3-1950 Divorce
25. Give the names and ages of any minor children of the male applicant from all former marriages. 1.- Marrying ex-wife and will support child as before
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant James H Ross Jr.

James H. Ross Jr. deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. James H. Ross Jr.

Subscribed and sworn to before me, this 9th day of Sept, 1950

Asah M. Johnson Clerk Hendricks Circuit Court

Certificate No A 54361 Application is hereby made for a license for the marriage of **FEMALE**

Betty Lou Ross to James H. Ross Jr

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Betty Lou Ross
2. Color wh. 3. Where born North Salem Ind (Town, County, State or Country) 4. When born Mar. 13 - 1929 (Day, Month, Year)
5. Present residence Clayton Ind.
6. Present occupation R.N.A. 7. Full christian and surname of father Earl Scott
8. His color wh. 9. His birthplace No. Salem 10. His occupation Dead 11. His residence Dead
12. Full christian and maiden name of mother Hazel Henry 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace No. Salem, Ind. 16. Her residence No. Salem.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce Mar. 3-1950.
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Betty S. Ross

Betty Lou Ross deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Betty S. Ross

Subscribed and sworn to before me, this 9th day of September, 1950.

Asah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

James H. Ross Jr
To
Betty Lou Ross

} ss:

BE IT REMEMBERED, That on this 9th day of September, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife James H Ross Jr. and Betty Lou Ross and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Asah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 9th day of September, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 11th day of September, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, James H. Ross Jr. and Betty Lou Ross on the 9" day of Sept. 1950

Rev. David E. Noland
Methodist Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 20878

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of John Willis Wood to June Arlene Rothrock

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is John Willis Wood
2. Color White 3. Where born Plainfield, Ind. (Town, County, State or Country) 4. When born Nov. 14-1930 (Day, Month, Year)
5. Present residence Plainfield, Ind. R.R.
6. Present occupation Farming 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father William Charlton Wood 10. His color White
11. His birthplace Plainfield, Ind. 12. His occupation Farming 13. His residence Plainfield, Ind. R.R.
14. Full christian and maiden name of mother Armeda Elizabeth Smith 15. Her color White 16. Her occupation Housewife
17. Her birthplace Greensburg, 18. Her residence Plainfield, Ind. R.R. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue? —
21. Is this his first marriage? Yes. 22. If not, how often has he been married? — 23. Has such prior marriage or marriages, been dissolved? — 24. If so, how and when? —
25. Give the names and ages of any minor children of the male applicant from all former marriages —
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names —
27. Are you supporting them and are you complying with all Court orders issued for their support? —
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant John W. Wood

William Charlton Wood deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives his consent to the issuance of this license. Wm. Charlton Wood

Subscribed and sworn to before me, this 9th day of September, 1950

Odal M. Johnson, Clerk Hendricks Circuit Court

Certificate No. A 20880

Application is hereby made for a license for the marriage of

FEMALE

June Arlene Rothrock to John Willis Wood

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is June Arlene Rothrock
2. Color White 3. Where born Indianapolis, Ind. (Town, County, State or Country) 4. When born June 9-1931 (Day, Month, Year)
5. Present residence R. 2 - Bridgeport, Ind.
6. Present occupation Works at Public Service Co. 7. Full christian and surname of father Roy R. Rothrock
8. His color White 9. His birthplace Centerton, Ind. 10. His occupation Farming 11. His residence R. 2 - Bridgeport, Ind.
12. Full christian and maiden name of mother Velma Ann Scott 13. Her color White 14. Her occupation Housewife
15. Her birthplace Valley Mills, Ind. 16. Her residence R. 2 - Bridgeport
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? — 20. Has such prior marriage, or marriages been dissolved? — 21. If so, how and when? —
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant June Arlene Rothrock

June Arlene Rothrock deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. June Arlene Rothrock

Subscribed and sworn to before me, this 9th day of September, 1950

Odal M. Johnson, Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

John William Wood
To
June Arlene Rothrock

ss:

BE IT REMEMBERED, That on this 9th day of September, 1950 the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife John William Wood and June Arlene Rothrock and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Odal M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 9th day of September, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 20th day of September, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, John William Wood and June Arlene Rothrock on the 15th day of September, 1950

Robert D. Fife, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A-5-2180

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Ora Otenburg to Dottie May

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Ora Otenburg
2. Color White 3. Where born Boone County Indiana (Town, County, State or Country) 4. When born March 27-1887 (Day, Month, Year)
5. Present residence Jamestown, Ind.
6. Present occupation Carpenter 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Daniel Wilson Otenburg 10. His color White
11. His birthplace Ohio 12. His occupation Deceased 13. His residence Deceased
14. Full christian and maiden name of mother Edna Allen Heller 15. Her color White 16. Her occupation Deceased
17. Her birthplace Rush County, Ind. 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Twice 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Death-1947 Divorce-1948
25. Give the names and ages of any minor children of the male applicant from all former marriages — —
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names —
27. Are you supporting them and are you complying with all Court orders issued for their support? —
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Ora Otenburg

Ora Otenburg deposes and says that has personal knowledge of the facts above stated and that they and each of them are true, and gives his consent to the issuance of this license. Ora Otenburg

Subscribed and sworn to before me, this 16th day of September, 19 50

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A-5-2179

Application is hereby made for a license for the marriage of

FEMALE

Dottie May to Ora Otenburg

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Dottie May
2. Color White 3. Where born Montgomery County Ind. 4. When born Feb. 11-1887 (Town, County, State or Country) (Day, Month, Year)
5. Present residence Near Jamestown, Ind. R. 7
6. Present occupation Housewife 7. Full christian and surname of father Asbury C. Thomas Scott
8. His color White 9. His birthplace Putnam County Ind. 10. His occupation Deceased 11. His residence Deceased
12. Full christian and maiden name of mother Margaret Sigler Scott 13. Her color White 14. Her occupation Deceased
15. Her birthplace Boone County, Ind. 16. Her residence Deceased
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Death - Feb. 18-1938.
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Dottie May.

Dottie May deposes and says that has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. Dottie May.

Subscribed and sworn to before me, this 16th day of September, 19 50

Adah M. Johnson, Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Ora Otenburg
To
Dottie May

ss:

BE IT REMEMBERED, That on this 16th day of September, 19 50, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Ora Otenburg and Dottie May and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 16th day of September, 19 50 (SEAL)

BE IT FURTHER REMEMBERED, That on this 20th day of September, 19 50, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Ora Otenburg and Dottie May on the 16th day of September, 19 50

Forrest E. Graves
Christian Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A230730 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of David M. Atteberry to Evelyn J. Kelsheimer

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is David M. Atteberry
2. Color W 3. Where born Decatur, Ill (Town, County, State or Country) 4. When born June 12 - 1914 (Day, Month, Year)
5. Present residence RR 3 Daniel
6. Present occupation Mechanic 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Thomas Atteberry 10. His color W
11. His birthplace Illinois 12. His occupation Contractor & Bldg 13. His residence Decatur Ill
14. Full christian and maiden name of mother Margaret L Carson 15. Her color W 16. Her occupation Housewife
17. Her birthplace Illinois 18. Her residence Decatur Ill 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce - Aug 1950
25. Give the names and ages of any minor children of the male applicant from all former marriages Sharon - 12 years
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names as above
27. Are you supporting them and are you complying with all Court orders issued for their support? Yes
28. Is the male contracting party afflicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant David M. Atteberry

David M. Atteberry deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. David M. Atteberry

Subscribed and sworn to before me, this 16th day of September, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A230733 Application is hereby made for a license for the marriage of **FEMALE**

Evelyn J. Kelsheimer to David M. Atteberry

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Evelyn J. Kelsheimer
2. Color W 3. Where born Attica Ind (Town, County, State or Country) 4. When born Oct 22 - 1912 (Day, Month, Year)
5. Present residence 307 E 8th St. Danville Ill
6. Present occupation Secretary 7. Full christian and surname of father Albert E. Julian
8. His color W 9. His birthplace Ohio 10. His occupation Grocer 11. His residence Deceased
12. Full christian and maiden name of mother Cora May Staver 13. Her color W 14. Her occupation Housewife
15. Her birthplace Indiana 16. Her residence 502 Harmon Ave. Danville Ill
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Death - July 1943
22. Is the female contracting party afflicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Evelyn J. Kelsheimer

Evelyn J. Kelsheimer deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Evelyn J. Kelsheimer

Subscribed and sworn to before me, this 16th day of September, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

David M. Atteberry
To
Evelyn J. Kelsheimer

ss:

BE IT REMEMBERED, That on this 16th day of September, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife David M. Atteberry and Evelyn J. Kelsheimer and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 16th day of September, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 19th day of September, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, David M. Atteberry and Evelyn J. Kelsheimer on the 16th day of Sept, 1950.

W. E. Essex

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A230780

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Billy Harrison Jones to Geraldine Catherine Williams

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Billy Harrison Jones
2. Color W 3. Where born Indianapolis (Town, County, State or Country) 4. When born May 10 - 1924 (Day, Month, Year)
5. Present residence Stilesville Ind.
6. Present occupation Laborer - Chevrolet 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Harry Jones 10. His color W
11. His birthplace Kentucky 12. His occupation Iron Molder 13. His residence Stilesville Ind.
14. Full christian and maiden name of mother Katie Hubble 15. Her color W 16. Her occupation Housewife
17. Her birthplace Indiana 18. Her residence Stilesville 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? 3 times 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce - 1942 - 49 - 50
25. Give the names and ages of any minor children of the male applicant from all former marriages Billie Lee Jones - 7
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names No
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Billy Harrison Jones deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Billy H Jones

Subscribed and sworn to before me, this 16th day of September, 1950

Adah M Johnson Clerk Hendricks Circuit Court

FEMALE

Certificate No 230779

Application is hereby made for a license for the marriage of

Geraldine Catherine Williams to Billy Harrison Jones

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Geraldine Catherine Williams
2. Color W 3. Where born Oklahoma (Town, County, State or Country) 4. When born June 5 - 1921 (Day, Month, Year)
5. Present residence Stilesville Ind.
6. Present occupation Teller 7. Full christian and surname of father Monroe Forrest Williams 8. His color W 9. His birthplace Texas 10. His occupation Dry Cleaning & Real Estate 11. His residence Childress Texas
12. Full christian and maiden name of mother Edna May Berry 13. Her color W 14. Her occupation Business Woman
15. Her birthplace Texas 16. Her residence Childress, Texas
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? Three 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? 1943 - 1946 - 1949
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Geraldine Catherine Williams deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Geraldine Williams

Subscribed and sworn to before me, this 16th day of September, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Billy Harrison Jones
To
Geraldine Catherine Williams

ss:

BE IT REMEMBERED, That on this 16th day of September, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Billy Harrison Jones and Geraldine Catherine Williams and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 16th day of September, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 26th day of September, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Billy Harrison Jones and Geraldine Catherine Williams on the 16th day of September, 1950 Eugene McFarland, A.B.

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A230675

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Frank R. Manera to Mary Phyllis Dill

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Frank R. Manera
2. Color W 3. Where born Ontario, Calif. (Town, County, State or Country) 4. When born Apr 3 - 1926 (Day, Month, Year)
5. Present residence Plainfield R.F.D.
6. Present occupation Draftsman 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father August C Manera 10. His color W
11. His birthplace Indiana 12. His occupation Tool maker 13. His residence Deceased
14. Full christian and maiden name of mother Eleanor Nagor 15. Her color W 16. Her occupation Housewife
17. Her birthplace Indianapolis 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how ~~and when~~? Divorce - May 1950
25. Give the names and ages of any minor children of the male applicant from all former marriages None
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Frank R. Manera deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Frank R. Manera

Subscribed and sworn to before me, this 16th day of September, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A230687

Application is hereby made for a license for the marriage of

FEMALE

Mary Phyllis Dill to Frank R. Manera

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Mary Phyllis Dill
2. Color W 3. Where born Indianapolis (Town, County, State or Country) 4. When born Oct 8 - 1926 (Day, Month, Year)
5. Present residence Bridgeport R.R.1, Ind. 6. Present occupation Secretary 7. Full christian and surname of father John F. Miel Jr.
8. His color W 9. His birthplace Hendricks Co 10. His occupation Farmer 11. His residence Bridgeport
12. Full christian and maiden name of mother Mabel Clare 13. Her color W 14. Her occupation Housewife
15. Her birthplace Morgan Co. Indiana 16. Her residence Bridgeport Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce - 1949 - June
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Mary Phyllis Dill deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Mary Phyllis Dill

Subscribed and sworn to before me, this 16th day of September, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Frank R. Manera
To
Mary Phyllis Dill

ss:

BE IT REMEMBERED, That on this 16th day of September, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Frank R. Manera and Mary Phyllis Dill and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 16th day of September, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 4th day of October, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Frank R. Manera and Mary Phyllis Dill on the 22nd day of September, 1950

Rev. Charles Jennings

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 9796

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Earl Burton to Elizabeth Jane Burton

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Earl Burton
2. Color W 3. Where born Lawrence Co. Ind. (Town, County, State or Country) 4. When born July 26 - 1879 (Day, Month, Year)
5. Present residence 533 Dorman, Indianapolis
6. Present occupation Carpenter 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father George W Burton 10. His color W
11. His birthplace Lawrence Co Ind. 12. His occupation Farmer 13. His residence Deceased
14. Full christian and maiden name of mother Mattie Hostetler 15. Her color W 16. Her occupation Housewife
17. Her birthplace Lawrence Co Ind. 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? 4 times 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? By death & divorce -
25. Give the names and ages of any minor children of the male applicant from all former marriages None
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Earl Burton

Earl Burton deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Earl Burton

Subscribed and sworn to before me, this 16th day of September, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A 9935

Application is hereby made for a license for the marriage of

FEMALE

Elizabeth Jane Burton to Earl Burton

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Elizabeth Jane Burton
2. Color W 3. Where born Sullivan Co. Ind. (Town, County, State or Country) 4. When born Oct 22 - 1912 (Day, Month, Year)
5. Present residence 539 Dorman St, Indianapolis
6. Present occupation Housewife 7. Full christian and surname of father Dan McCoskey
8. His color W 9. His birthplace Indiana 10. His occupation Farmer 11. His residence Deceased
12. Full christian and maiden name of mother Flora King 13. Her color W 14. Her occupation Housewife
15. Her birthplace Sullivan Co. Ind. 16. Her residence Deceased
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce - 1949
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Elizabeth J Burton

Elizabeth Jane Burton deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Elizabeth J Burton

Subscribed and sworn to before me, this 16th day of September, 1950

Edah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Earl Burton
To
Elizabeth Jane Burton

ss:

BE IT REMEMBERED, That on this 16th day of September, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Earl Burton and Elizabeth Jane Burton and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 16th day of September, 1950 (SEAL)

BE IT FURTHER REMEMBERED, That on this 19th day of September, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Earl Burton and Elizabeth Jane Burton on the 16th day of September, 1950

Thomas P. Heaney (J. P. Seal)

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. 3223

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Alva Grissmore to Marjorie Louise Pickens

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Alva Grissmore
2. Color wh. 3. Where born Kokomo Ind. (Town, County, State or Country) 4. When born Nov 1 — 1926 (Day, Month, Year)
5. Present residence 3014 Ralston - Indpls.
6. Present occupation US Rubber Co. 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Alva Grissmore 10. His color wh.
11. His birthplace Brown Co. Ind. 12. His occupation Dead 13. His residence Dead
14. Full christian and maiden name of mother Irene Knight 15. Her color wh 16. Her occupation Dead
17. Her birthplace Brown Co Ind. 18. Her residence Dead 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Alva Grissmore

Alva Grissmore deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Alva Grissmore

Subscribed and sworn to before me, this 23rd day of September, 1950

Adah M Johnson Clerk Hendricks Circuit Court

Certificate No. 5644

FEMALE

Application is hereby made for a license for the marriage of

Marjorie Louise Pickens to Alva Grissmore

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Marjorie Louise Pickens
2. Color wh. 3. Where born Heidelburg Ill. (Town, County, State or Country) 4. When born July 6 - 1929 (Day, Month, Year)
5. Present residence 344 So. La Salle Indpls.
6. Present occupation Typist 7. Full christian and surname of father Glee Pickens
8. His color wh. 9. His birthplace West York Ill. 10. His occupation Chemist. 11. His residence Same
12. Full christian and maiden name of mother Mary E Heidelbaugh 13. Her color wh 14. Her occupation Office worker
15. Her birthplace Heidelburg Ill. 16. Her residence Same.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes. 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Marjorie Louise Pickens

Marjorie Louise Pickens deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Marjorie Louise Pickens

Subscribed and sworn to before me, this 23rd day of September, 1950

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Alva Grissmore
To
Marjorie Louise Pickens

ss:

BE IT REMEMBERED, That on this 23rd day of September, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Alva Grissmore and Marjorie Louise Pickens and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 23rd day of September, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 30th day of September, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Alva Grissmore and Marjorie Louise Pickens on the 23 day of September, 1950

M D Wilson, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 30202

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Donald Eugene Chenoweth to Vivian Jewell Kincheon

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Donald Eugene Chenoweth
2. Color wh. 3. Where born Mooresville Ind. (Town, County, State or Country) 4. When born Oct 9 - 1928. (Day, Month, Year)
5. Present residence Mooresville Ind.
6. Present occupation Mechanic 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Roy Chenoweth 10. His color wh
11. His birthplace Indiana 12. His occupation Disabled 13. His residence Same
14. Full christian and maiden name of mother Ruby Carter 15. Her color wh. 16. Her occupation Factory worker
17. Her birthplace Indiana 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Donald Eugene Chenoweth

Donald Eugene Chenoweth deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Donald Eugene Chenoweth

Subscribed and sworn to before me, this 25th day of September, 1950

Asahel M. Johnson Clerk Hendricks Circuit Court

Certificate No. A 30203

Application for Marriage License

FEMALE

Application is hereby made for a license for the marriage of

Vivian Jewell Kincheon to Donald Eugene Chenoweth

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Vivian Jewell Kincheon
2. Color wh. 3. Where born Cairo Georgia (Town, County, State or Country) 4. When born July 30-1929 (Day, Month, Year)
5. Present residence Mooresville
6. Present occupation None 7. Full christian and surname of father J. D. Kincheon
8. His color wh. 9. His birthplace Cairo Ga. 10. His occupation Bookkeeper 11. His residence Palmetto Fla.
12. Full christian and maiden name of mother Vera Cone 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Cairo Ga. 16. Her residence Palmetto Fla.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Vivian Jewell Kincheon

Vivian Jewell Kincheon deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Vivian Jewell Kincheon

Subscribed and sworn to before me, this 25th day of September, 1950

Asahel M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Donald Eugene Chenoweth
To
Vivian Jewell Kincheon

ss:

BE IT REMEMBERED, That on this 25th day of September, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Donald Eugene Chenoweth and Vivian Jewell Kincheon and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Asahel M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 25th day of September, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 10th day of October, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Donald Eugene Chenoweth and Vivian Jewell Kincheon on the 7th day of October, 1950

Theron R. Castleman
Pastor, Meth. Church, Spencer, Indiana

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 374568 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of Leo M. Zerr to Louise G. Culkins

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Leo M. Zerr
2. Color White 3. Where born Yorkville, Ind. (Town, County, State or Country) 4. When born Jan. 31-1897 (Day, Month, Year)
5. Present residence Pittsboro, Indiana
6. Present occupation Poultry & Egg dealer 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Frank Zerr 10. His color White
11. His birthplace Yorkville Ind. His occupation Deceased 13. His residence Deceased.
14. Full christian and maiden name of mother Waldburger Zerr 15. Her color White 16. Her occupation Deceased
17. Her birthplace Dryridge Ohio. Deceased. 18. Her residence Deceased. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Death Dec. 18-1947
25. Give the names and ages of any minor children of the male applicant from all former marriages —
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names —
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Leo M Zerr

Leo M. Zerr deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives his consent to the issuance of this license. Leo M Zerr

Subscribed and sworn to before me, this 27th day of September, 1950

Edah M. Johnson, Clerk Hendricks Circuit Court

Certificate No. A 406801 Application is hereby made for a license for the marriage of **FEMALE**

Louise G. Culkins to Leo M. Zerr

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Louise G. Culkins
2. Color White 3. Where born Cincinnati Ohio (Town, County, State or Country) 4. When born Mar. 1-1898 (Day, Month, Year)
5. Present residence Jamestown, Indiana
6. Present occupation Secretary 7. Full christian and surname of father William F. Gray
8. His color White 9. His birthplace Germany 10. His occupation Deceased 11. His residence Deceased
12. Full christian and maiden name of mother Anna M. Fuchs 13. Her color White 14. Her occupation Deceased
15. Her birthplace Germany 16. Her residence Deceased.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Death Feb. 12, 1923
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Louise G. Culkins

Louise G. Culkins deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. Louise G. Culkins

Subscribed and sworn to before me, this 27th day of September, 1950

Edah M. Johnson, Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Leo M. Zerr To Louise G. Culkins

BE IT REMEMBERED, That on this 27th day of September, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Leo M. Zerr and Louise G. Culkins and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 27th day of September, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 3rd day of October, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Leo M Zerr and Louise G. Culkins on the 30 day of September, 1950

Anthony L. McLaughlin

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 231587

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of John Fredrick Burgreen to Sydney Patricia Yarick

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is John Fredrick Burgreen
2. Color W 3. Where born Lyons. N. Y. (Town, County, State or Country) 4. When born Aug. 5 - 1929 (Day, Month, Year)
5. Present residence Coy, North & Wayne St. Danville Ind.
6. Present occupation Stewart-Carey Flour Co. Shipt. 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Fredrick Eugene Burgreen 10. His color W
11. His birthplace Lyons. N. Y. 12. His occupation Advertising Mgr. 13. His residence Deceased
14. Full christian and maiden name of mother Marie V. Coleman 15. Her color W 16. Her occupation Housewife
17. Her birthplace Sodus. N. Y. 18. Her residence 216 Mulberry St. Newark N. Y. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

John Fredrick Burgreen deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant John F Burgreen

John F Burgreen

Subscribed and sworn to before me, this 28th day of September, 1950

Cedah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A23586

Application is hereby made for a license for the marriage of

FEMALE

Sydney Patricia Yarick to John Fredrick Burgreen

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Sydney Patricia Yarick
2. Color W 3. Where born Newark Ohio (Town, County, State or Country) 4. When born Mar 17 - 1930 (Day, Month, Year)
5. Present residence Poland Ohio
6. Present occupation Student 7. Full christian and surname of father Colonel Leo Gustelius Yarick
8. His color W 9. His birthplace Ashland O. 10. His occupation Atty 11. His residence Poland O.
12. Full christian and maiden name of mother Dorothy W. Phillips 13. Her color W 14. Her occupation Housewife
15. Her birthplace Texas 16. Her residence Poland Ohio
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Sydney Patricia Yarick deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Patricia Yarick

Patricia Yarick

Subscribed and sworn to before me, this 28th day of September, 1950

Cedah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

John Fredrick Burgreen
To
Patricia Yarick

ss:

BE IT REMEMBERED, That on this 28th day of September, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife John Fredrick Burgreen and Patricia Yarick and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Cedah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 28th day of September, 1950.

(SEAL)

BE IT FURTHER REMEMBERED, That on this 18th day of October, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, John Burgreen and Patricia Yarick on the 30th day of September, 1950

Douglas R. MacLaury

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A9976

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of James Lee Ellis to Alice Marie Daum

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is James Lee Ellis
2. Color W 3. Where born Indianapolis (Town, County, State or Country) 4. When born May 26 - 1930 (Day, Month, Year)
5. Present residence 164 N. West St. Plainfield Ind.
6. Present occupation Garage Mechanic 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Charles Ellis 10. His color W
11. His birthplace Plainfield 12. His occupation Carpenter & Painter 13. His residence Deceased
14. Full christian and maiden name of mother Claremonde Hutchens 15. Her color W 16. Her occupation Housewife
17. Her birthplace Hazelwood Ind. 18. Her residence Plainfield Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant James Lee Ellis

Claremonde Phillips deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. Claremonde Phillips

Subscribed and sworn to before me, this 29th day of September, 1950

Edah M Johnson Clerk Hendricks Circuit Court

Certificate No A9998

Application is hereby made for a license for the marriage of

FEMALE

Alice Marie Daum to James Lee Ellis

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Alice Marie Daum
2. Color W 3. Where born Plainfield Ind. (Town, County, State or Country) 4. When born Mar 11 - 1932 (Day, Month, Year)
5. Present residence Plainfield - 126 N. Miel St.
6. Present occupation Typist 7. Full christian and surname of father John F. Daum
8. His color W 9. His birthplace Indiana 10. His occupation Smoking 11. His residence Plainfield
12. Full christian and maiden name of mother Carrie Key 13. Her color W 14. Her occupation Housewife
15. Her birthplace Georgia 16. Her residence Plainfield - 126 N Miel
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Alice Marie Daum

Alice Marie Daum deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Alice Marie Daum

Subscribed and sworn to before me, this 29th day of September, 1950

Edah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

James Lee Ellis
To
Alice Marie Daum

ss:

BE IT REMEMBERED, That on this 29th day of September, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife James Lee Ellis and Alice Marie Daum and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 29th day of September, 1950.

(SEAL)

BE IT FURTHER REMEMBERED, That on this 3rd day of October, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, James Lee Ellis and Alice Marie Daum on the 29th day of September, 1950

Robert O Fife, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A9810

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Robert Thomas Ellis to Patricia Lenn Downs

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Robert Thomas Ellis
2. Color W 3. Where born Indianapolis (Town, County, State or Country) Ind. 4. When born Sept. 25-1931 (Day, Month, Year)
5. Present residence 164 N. West St. Plainfield Ind.
6. Present occupation Not employed 7. If no occupation, what means has the male contracting party to support a family? Employment starts Oct 2-1950 8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Charles Ellis 10. His color W
11. His birthplace Plainfield 12. His occupation Carpenter & Painter His residence Deceased
14. Full christian and maiden name of mother Clarmonde Hutchens 15. Her color W 16. Her occupation Housewife
17. Her birthplace Hazelwood Ind. 18. Her residence Plainfield Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Robert Thomas Ellis

Clarmonde Phillips deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives Her consent to the issuance of this license. Clarmonde Phillips

Subscribed and sworn to before me, this 29th day of September, 1950

Cedah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A9977

Application is hereby made for a license for the marriage of

FEMALE

Patricia Lenn Downs to Robert Thomas Ellis

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Patricia Ann Downs
2. Color W 3. Where born Indianapolis (Town, County, State or Country) 4. When born Aug 9-1932 (Day, Month, Year)
5. Present residence 541 South Center St. Plainfield Ind.
6. Present occupation Not employed 7. Full christian and surname of father Elbert Downs
8. His color W 9. His birthplace Indiana 10. His occupation 11. His residence Deceased
12. Full christian and maiden name of mother Sybil Banta 13. Her color W 14. Her occupation Press Operator
15. Her birthplace Indiana 16. Her residence 541 So. Center St Plainfield
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Patricia A. Downs

Patricia Ann Downs deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Patricia A. Downs

Subscribed and sworn to before me, this 29th day of September, 1950

Cedah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Robert Thomas Ellis
To
Patricia Ann Downs

ss:

BE IT REMEMBERED, That on this 29th day of September, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Robert Thomas Ellis and Patricia Ann Downs and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Cedah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 29th day of September, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 3rd day of October, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Robert Thomas Ellis and Patricia Ann Downs on the 29th day of September, 1950 Robert C. Fife, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 391080 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of Raymond Franklin Bennett to Helen P. Kleemann

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Raymond Franklin Bennett
2. Color wh. 3. Where born Chicago Ill. (Town, County, State or Country) 4. When born May 22 - 1913 (Day, Month, Year)
5. Present residence 52 W. Walnut. Franklin Ind.
6. Present occupation Aluminum worker. 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Uncyl Bennett 10. His color wh.
11. His birthplace Mulberry Ind. 12. His occupation Painter 13. His residence Dead
14. Full christian and maiden name of mother agnes Bailey 15. Her color wh 16. Her occupation Housewife
17. Her birthplace Chicago Ill. 18. Her residence Frankfort Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce May 1946.
25. Give the names and ages of any minor children of the male applicant from all former marriages No
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Raymond Franklin Bennett deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Raymond Franklin Bennett

Raymond Franklin Bennett

Subscribed and sworn to before me, this 30th day of September, 1950

Adah M Johnson Clerk Hendricks Circuit Court

Certificate No. A 391083 Application is hereby made for a license for the marriage of **FEMALE**

Helen P. Kleemann to Raymond Franklin Bennett

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Helen P. Kleemann
2. Color wh. 3. Where born Tell City Ind. (Town, County, State or Country) 4. When born May 30. 1913 (Day, Month, Year)
5. Present residence 552½ N. Columbia - Frankfort Ind.
6. Present occupation Natl Cigar Co. 7. Full christian and surname of father John F. Kleemann
8. His color wh. 9. His birthplace Tell City Ind. 10. His occupation Retired 11. His residence Tell City
12. Full christian and maiden name of mother Frances Hartz 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Spencer Co., Ind. 16. Her residence Tell City
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce June 1941
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Helen P. Kleemann deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Helen P. Kleemann

Helen P. Kleemann

Subscribed and sworn to before me, this 30th day of Sept., 1950

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Raymond Franklin Bennett
To
Helen P. Kleeman

ss:

BE IT REMEMBERED, That on this 30th day of September, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Raymond Franklin Bennett and Helen P. Kleeman and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 30th day of September, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 4th day of October, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Raymond Franklin Bennett and Helen P. Kleeman on the 30 day of Sept., 1950

Thomas P. Downey
J.P. Seal

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A231985

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Carl Russell Ridenour to Doris Mae Fields

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Carl Russell Ridenour
2. Color wh. 3. Where born Traders Point Ind (Town, County, State or Country) 4. When born Dec 18-1918 (Day, Month, Year)
5. Present residence Brownsburg Ind
6. Present occupation Mechanic 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Henry Ridenour 10. His color wh
11. His birthplace Indiana 12. His occupation Farmer 13. His residence Dead
14. Full christian and maiden name of mother Grace Reese 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Indiana 18. Her residence Rt 1 Putnam 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved?
24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Carl Russell Ridenour

Carl Russell Ridenour deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Carl Russell Ridenour

Subscribed and sworn to before me, this 30th day of September, 1950

Ural M Johnson Clerk Hendricks Circuit Court

Certificate No. A9971

Application is hereby made for a license for the marriage of

FEMALE

Doris Mae Fields to Carl Russell Ridenour

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Doris Mae Fields
2. Color wh. 3. Where born Indpls. Ind. (Town, County, State or Country) 4. When born April 5. 1926 (Day, Month, Year)
5. Present residence Pittsboro Ind.
6. Present occupation None 7. Full christian and surname of father Charles Fields
8. His color wh. 9. His birthplace Kentucky 10. His occupation Laborer 11. His residence Same
12. Full christian and maiden name of mother Ona Carlisle 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Illinois 16. Her residence Same.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes. 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved?
21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Doris mae Fields

Doris Mae Fields deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Doris mae Fields

Subscribed and sworn to before me, this 30th day of Sept, 1950

Ural M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Carl Russell Ridenour
To
Doris Mae Fields

ss:

BE IT REMEMBERED, That on this 30th day of September, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Carl Russell Ridenour and Doris Mae Fields and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Ural M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 30th day of September, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 3rd day of October, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Carl Russell Ridenour and Doris Mae Fields on the 30th day of September, 1950

Lester B. Yarnick

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A37457 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of Charles H. Hunt to Adelle M. Ruse

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Charles H. Hunt
2. Color W 3. Where born Hendricks Co Ind. (Town, County, State or Country) 4. When born Aug 12-1891 (Day, Month, Year)
5. Present residence Luzon Ind.
6. Present occupation Farmer 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Henry Hunt 10. His color W
11. His birthplace Hendricks Co 12. His occupation Railroad 13. His residence Deceased
14. Full christian and maiden name of mother Nancy C Meddle 15. Her color W 16. Her occupation Housewife
17. Her birthplace Virginia 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Charles H. Hunt

Charles H. Hunt deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Charles H. Hunt

Subscribed and sworn to before me, this 3rd day of October, 1950

Adah M Johnson Clerk Hendricks Circuit Court

Certificate No. A37457 Application is hereby made for a license for the marriage of Adelle M. Ruse to Charles H. Hunt **FEMALE**

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Adelle M. Ruse
2. Color W 3. Where born Oakland Pa. (Town, County, State or Country) 4. When born June 17-1904 (Day, Month, Year)
5. Present residence Brownsburg Ind.
6. Present occupation Theatre Mgr. 7. Full christian and surname of father Samuel Oster
8. His color W 9. His birthplace Pa. 10. His occupation Miner 11. His residence Deceased
12. Full christian and maiden name of mother Mary Jones 13. Her color W 14. Her occupation Housewife
15. Her birthplace Wales - 16. Her residence Deceased
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Death - 1947
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Adelle M. Ruse

Adelle M. Ruse deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Adelle M. Ruse

Subscribed and sworn to before me, this 3rd day of October, 1950

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Charles H. Hunt
To
Adelle M. Ruse

ss:

BE IT REMEMBERED, That on this 3rd day of October, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Charles H. Hunt and Adelle M. Ruse and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 3rd day of October, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 7th day of October, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Charles H. Hunt and Adelle M. Ruse on the 4th day of October, 1950

Lester B. Yarnick

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A355705 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

William Austin Johnson to Crystal Christina Johnson

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is William Austin Johnson
2. Color W 3. Where born Berea Ky (Town, County, State or Country) 4. When born Nov 9-1911 (Day, Month, Year)
5. Present residence Brownsburg Ind.
6. Present occupation Factory Worker 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Alfred Johnson 10. His color W
11. His birthplace Berea, Ky 12. His occupation Presto-O-Lite 13. His residence Deceased
14. Full christian and maiden name of mother Bessie Johnson 15. Her color W 16. Her occupation Housewife
17. Her birthplace Berea, Ky 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? Second once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? 1948
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Austin Johnson

William Austin Johnson deposes and says that has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Austin Johnson

Subscribed and sworn to before me, this 7th day of October, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A355704 Application is hereby made for a license for the marriage of **FEMALE**

Crystal Christina Johnson to William Austin Johnson

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Crystal Christina Johnson
2. Color W 3. Where born Royalton, Ind. (Town, County, State or Country) 4. When born Sept 6-1916 (Day, Month, Year)
5. Present residence Brownsburg Ind.
6. Present occupation Factory Worker 7. Full christian and surname of father Thomas Brandenburg
8. His color W 9. His birthplace Royalton, Ind. 10. His occupation Farmer 11. His residence Deceased
12. Full christian and maiden name of mother Bessie Neal 13. Her color W 14. Her occupation Housewife
15. Her birthplace Fayette, Ind. 16. Her residence Brownsburg
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? Twice 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? 1937-1947
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Crystal Johnson

Crystal Christina Johnson deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true and gives consent to the issuance of this license. Crystal Johnson

Subscribed and sworn to before me, this 7th day of October, 1950

Edah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

William Austin Johnson
To
Crystal Christina Johnson

ss:

BE IT REMEMBERED, That on this 7th day of October, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife William Austin Johnson and Crystal Christina Johnson and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 7th day of October, 1950.

(SEAL)

BE IT FURTHER REMEMBERED, That on this 20th day of October, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, William Austin Johnson and Crystal Christina Johnson on the 11 day of October, 1950

Frank Buckner (Minister)

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A27478

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Jerald Lee Burress to Phyllis Jean Cook

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Jerald Lee Burress
2. Color W 3. Where born Lebanon Ind. (Town, County, State or Country) 4. When born July 22 - 1921 (Day, Month, Year)
5. Present residence 1093 South East St. Lebanon
6. Present occupation Service Station 7. If no occupation, what means has the male contracting party to support a family? ——
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Solomen Burress 10. His color W
11. His birthplace Lebanon Ind. 12. His occupation Truck Driver 13. His residence Deceased
14. Full christian and maiden name of mother Lefma Price 15. Her color W 16. Her occupation Cashier
17. Her birthplace Lebanon Ind. 18. Her residence 933 N. Gladstone Ave. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue? ——
21. Is this his first marriage? Yes 22. If not, how often has he been married? —— 23. Has such prior marriage or marriages, been dissolved? —— 24. If so, how and when? ——
25. Give the names and ages of any minor children of the male applicant from all former marriages ——
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names ——
27. Are you supporting them and are you complying with all Court orders issued for their support? ——
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiand, Hendricks County, ss:

Jerald Lee Burress deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Signature of Applicant Jerald Lee Burress

Subscribed and sworn to before me, this 7th day of October, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A27477

Application is hereby made for a license for the marriage of

FEMALE

Phyllis Jean Cook to Jerald Lee Burress

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Phyllis Jean Cook
2. Color W 3. Where born Colfax, Ind. (Town, County, State or Country) 4. When born Jan 10 - 1932 (Day, Month, Year)
5. Present residence Colfax, Ind.
6. Present occupation Not Employed 7. Full christian and surname of father Floyd E. Cook
8. His color W 9. His birthplace Colfax Ind. 10. His occupation Trucker 11. His residence Otterbein Ind.
12. Full christian and maiden name of mother Margaret Price 13. Her color W 14. Her occupation Furniture Factory
15. Her birthplace Thorntown, Ind. 16. Her residence Colfax, Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? —— 20. Has such prior marriage, or marriages been dissolved? —— 21. If so, how and when? ——
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Phyllis Jean Cook deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Signature of Applicant Phyllis Jean Cook

Subscribed and sworn to before me, this 7th day of October, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Jerald Lee Burress
To
Phyllis Jean Cook

BE IT REMEMBERED, That on this 7th day of October, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Jerald Lee Burress and Phyllis Jean Cook and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 7th day of October, 1950 (SEAL)

BE IT FURTHER REMEMBERED, That on this 10th day of October, 1950 the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

Jerald Lee Burress and Phyllis Jean Cook on the 7th day of October, 1950

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife,

Everett I. Lane, J.P. (Seal)
(This signature is not too legible).

liana

Certificate No. A2 7969

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Robert Elden Barnett to Thelma Elmira Foester

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Robert Elden Barnett
2. Color W 3. Where born Ross County, Ohio (Town, County, State or Country) 4. When born Feb. 16 - 1918 (Day, Month, Year)
5. Present residence Coatesville Ind.
6. Present occupation Farm Hand 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Samuel Barnett 10. His color W
11. His birthplace Unknown 12. His occupation Not employed 13. His residence Chillicothe, Ohio
14. Full christian and maiden name of mother Sylvia Hart 15. Her color W 16. Her occupation Housewife
17. Her birthplace Ohio 18. Her residence Xenia, Ohio 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Robert Elden Barnett

Robert Elden Barnett deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Robert Elden Barnett

Subscribed and sworn to before me, this 11th day of October, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A2 7970

Application is hereby made for a license for the marriage of

FEMALE

Thelma Elmira Foester to Robert Elden Barnett

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Thelma Elmira Foester
2. Color W 3. Where born Columbus, Ohio (Town, County, State or Country) 4. When born Nov 11 - 1919 (Day, Month, Year)
5. Present residence Coatesville, Ind.
6. Present occupation Not employed 7. Full christian and surname of father Guy Arnold
8. His color W 9. His birthplace Columbus O. 10. His occupation Sgt. U.S.A. 11. His residence Shyenne Wyo
12. Full christian and maiden name of mother Erma Leach 13. Her color W 14. Her occupation Housewife
15. Her birthplace Columbus. O. 16. Her residence Dayton - Ohio
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Death - 1948
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Thelma Foester

Thelma Elmira Foester deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Thelma Foester

Subscribed and sworn to before me, this 11th day of October, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

To

ss:

BE IT REMEMBERED, That on this day of, 19, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife

and

and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, , Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this day of, 19

(SEAL)

BE IT FURTHER REMEMBERED, That on this day of, 19, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife,

and

on the day of, 19

ADAH M. JOHNSON
CLERK HENDRICKS CIRCUIT COURT
DANVILLE, INDIANA

November 22, 1950

Mr. Robert E. Barnett
Coatesville, Indiana

Dear Sir:

On October 11th, 1950, you obtained a marriage license at our office and to date we have not received the certificate showing that your were married. To complete our record will you please return the certificate of marriage signed by the person who performed the ceremony.

Very truly yours,

Adah M. Johnson, Clerk

By Barbara Grimes
Deputy Clerk

c/o Samuel Barnett
c/o Clintonville, Ohio

diana

MALE

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Housewife
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s such prior marriage or

26. Are any or all of these children either wholly or partially dependent upon you for support? State their names

27. Are you supporting them and are you complying with all Court orders issued for their support?

28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No

29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Robert Elden Barnett deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Robert Elden Barnett

Robert Elden Barnett

Subscribed and sworn to before me, this 11th day of October, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A-27970

Application is hereby made for a license for the marriage of

FEMALE

Thelma Elmira Foester to Robert Elden Barnett

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Thelma Elmira Foester
2. Color W 3. Where born Columbus, Ohio (Town, County, State or Country) 4. When born Nov 11-1919 (Day, Month, Year)
5. Present residence Coatesville, Ind.
6. Present occupation Not employed 7. Full christian and surname of father Guy Arnold
8. His color W 9. His birthplace Columbus O. 10. His occupation Sgt. C.D.C. 11. His residence Chillicothe
12. Full christian and maiden name of mother Erma Leach 13. Her color W 14. Her occupation Housewife
15. Her birthplace Columbus O. 16. Her residence Dayton - Ohio
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Death - 1948
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Thelma Elmira Foester deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Thelma Foester

Thelma Foester

Subscribed and sworn to before me, this 11th day of October, 1950

Adah M. Johnson ~~Clerk~~ Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

To

ss:

BE IT REMEMBERED, That on this day of, 19, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife

and

and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, , Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this day of, 19

(SEAL)

BE IT FURTHER REMEMBERED, That on this day of, 19, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife,

and

on the day of, 19

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A23157 1

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Charles Richard to Dorothy Jane Flanagan

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Charles Richard
2. Color W 3. Where born Hendricks Co Ind. (Town, County, State or Country) 4. When born May 9-1926 (Day, Month, Year)
5. Present residence Clayton, Indiana
6. Present occupation Truck Driver 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Bryan Richard 10. His color W
11. His birthplace Indiana 12. His occupation Town Marshall 13. His residence Clayton Ind.
14. Full christian and maiden name of mother Olga Mc Morris 15. Her color W 16. Her occupation Restaurant
17. Her birthplace Indiana 18. Her residence Clayton Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved?
24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Charles Richard

Charles Richard deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Charles Richard

Subscribed and sworn to before me, this 13th day of October, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A231520

Application is hereby made for a license for the marriage of

FEMALE

Dorothy Jane Flanagan to Charles Richard

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Dorothy Jane Flanagan
2. Color W 3. Where born Hendricks Co. 4. When born June 11-1931 (Town, County, State or Country) (Day, Month, Year)
5. Present residence Plainfield Ind R.F.D.
6. Present occupation Restaurant 7. Full christian and surname of father J. Jesse Flanagan
8. His color W 9. His birthplace Tennessee? 10. His occupation Electrician 11. His residence Plainfield
12. Full christian and maiden name of mother Steela Mayo 13. Her color W 14. Her occupation Housewife
15. Her birthplace Indiana (?) 16. Her residence Plainfield Ind R.F.D.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved?
21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Dorothy Jane Flanagan

Dorothy Jane Flanagan deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Dorothy Jane Flanagan

Subscribed and sworn to before me, this 13th day of October, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Charles Richard
To
Dorothy Jane Flanagan

BE IT REMEMBERED, That on this 13th day of October, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Charles Richard and Dorothy Flanagan and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 13th day of October, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 16th day of October, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Charles Richard and Dorothy Jane Flanagan on the 14th day of October, 1950 Rev. Howard J. Whitely, Clayton Ind.

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No A359328

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Lawrence Samuel Baire (Baire) to Sarah Marguerite Smith

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Lawrence Samuel Baire
2. Color W 3. Where born Cams. Indiana (Town, County, State or Country) 4. When born March 4-1917 (Day, Month, Year)
5. Present residence 451 Ketcham St. Indianapolis
6. Present occupation Fireman 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Leon Porter Baire 10. His color W
11. His birthplace Tennessee 12. His occupation Not employed 13. His residence 451 Ketcham St Indpls
14. Full christian and maiden name of mother Gertrude Malicoat 15. Her color W 16. Her occupation Housewife
17. Her birthplace Tennessee 18. Her residence 451 Ketcham St. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? once 23. Has such prior marriage or marriages, been dissolved? yes 24. If so, how and when? Divorce - 1949 September Richard Leon - 10 Linda Darleen 8; Carol Sue 4
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names as above
27. Are you supporting them and are you complying with all Court orders issued for their support? Yes
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Lawrence S. Baire

Lawrence S. Baire deposes and says that has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Lawrence S. Baire

Subscribed and sworn to before me, this 14th day of October, 1950

Cedah M. Johnson Clerk Hendricks Circuit Court

Certificate No B359329

Application is hereby made for a license for the marriage of

FEMALE

Sarah Marguerite Smith to Lawrence Samuel Baire

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Sarah Marguerite Smith
2. Color W 3. Where born Indianapolis (Town, County, State or Country) 4. When born July 27-1915 (Day, Month, Year)
5. Present residence 3002 Lockburn St. Indianapolis
6. Present occupation Housewife 7. Full christian and surname of father Curtis Allen Day
8. His color W 9. His birthplace Indpls. 10. His occupation City Fireman 11. His residence Deceased
12. Full christian and maiden name of mother Mabel Emily White 13. Her color W 14. Her occupation Housewife
15. Her birthplace Indianapolis 16. Her residence Deceased
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? once 20. Has such prior marriage, or marriages been dissolved? yes 21. If so, how and when? Divorce - May 1949
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Sarah Marguerite Smith

Sarah Marguerite Smith deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Sarah Marguerite Smith

Subscribed and sworn to before me, this 14th day of October, 1950

Cedah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Lawrence S. Baire
To
Sarah M. Smith

ss:

BE IT REMEMBERED, That on this 14th day of October, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Lawrence S. Baire and Sarah M. Smith and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Cedah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 14th day of October, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 31st day of October, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Lawrence S. Baire and Sarah M. Smith on the 15th day of October, 1950

John L. Sutterfield Jr

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A374584

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of John Herbert Fisher to Shirley Ann Marley

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is John Herbert Fisher
2. Color W 3. Where born Greenwood Ind. (Town, County, State or Country) 4. When born April 1-1919 (Day, Month, Year)
5. Present residence Clayton Ind.
6. Present occupation Carpenter 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Ray E. Fisher 10. His color W
11. His birthplace Greenwood Ind. 12. His occupation Farmer 13. His residence Moorefield Ind.
14. Full christian and maiden name of mother Leona Cypert 15. Her color W 16. Her occupation Housewife
17. Her birthplace Greenwood Ind. 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

John Herbert Fisher deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant John Herbert Fisher

Subscribed and sworn to before me, this 14th day of October, 1950

John Herbert Fisher

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A374583

Application is hereby made for a license for the marriage of Shirley Ann Marley to John Herbert Fisher

FEMALE

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Shirley Ann Marley
2. Color W 3. Where born Monrovia Ind. (Town, County, State or Country) 4. When born June 4-1931 (Day, Month, Year)
5. Present residence Monrovia Indiana
6. Present occupation Unemployed 7. Full christian and surname of father Clyde Marley
8. His color W 9. His birthplace Monrovia Ind 10. His occupation Gas Station 11. His residence Monrovia Ind.
12. Full christian and maiden name of mother Grace Bange 13. Her color W 14. Her occupation Housewife
15. Her birthplace Monrovia Ind. 16. Her residence Monrovia Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Shirley Ann Marley deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Shirley Ann Marley

Subscribed and sworn to before me, this 14th day of October, 1950

Shirley Ann Marley

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

John Herbert Fisher
To
Shirley Ann Marley

ss:

BE IT REMEMBERED, That on this 14th day of October, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife John Herbert Fisher and Shirley Ann Marley and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 14th day of October, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 17th day of November, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, John Herbert Fisher and Shirley Ann Marley on the 14th day of October, 1950

Rev. Warren R. Seahour

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A302432

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Kenneth Gene Puckett to Rita Blanche Dougherty

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Kenneth Gene Puckett
2. Color W 3. Where born Indianapolis (Town, County, State or Country) 4. When born May 4-1929 (Day, Month, Year)
5. Present residence 546 South Harman
6. Present occupation Western Electric 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Julius Frank Puckett 10. His color W
11. His birthplace Tennessee 12. His occupation at Roper Body Plant 13. His residence 546 S. Harman
14. Full christian and maiden name of mother Ella Lee Puckett 15. Her color W 16. Her occupation U.S. Rubber Co.
17. Her birthplace Alabama 18. Her residence 546 S. Harman 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Kenneth Gene Puckett

Kenneth D. Puckett deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives Kenneth Gene Puckett consent to the issuance of this license.

Subscribed and sworn to before me, this 14th day of October, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A27722

Application is hereby made for a license for the marriage of

FEMALE

Rita Blanche Dougherty to Kenneth Gene Puckett

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Rita Blanche Dougherty
2. Color W 3. Where born Indianapolis (Town, County, State or Country) 4. When born Mar 20-1932 (Day, Month, Year)
5. Present residence 215 N. Mount. Indianapolis
6. Present occupation Typist 7. Full christian and surname of father Horace B. Dougherty
8. His color W 9. His birthplace Illinois 10. His occupation Lawyer 11. His residence Deceased
12. Full christian and maiden name of mother Blanche Morton 13. Her color W 14. Her occupation Stenographer
15. Her birthplace Evansville Ind. 16. Her residence 215 N. Mount. Indianapolis
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Rita Dougherty

Rita Blanche Dougherty deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives Rita Dougherty consent to the issuance of this license.

Subscribed and sworn to before me, this 14th day of October, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Kenneth Gene Puckett
To
Rita Blanche Dougherty

ss:

BE IT REMEMBERED, That on this 14th day of October, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Kenneth Gene Puckett and Rita Blanche Dougherty and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 14th day of October, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 17th day of October, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Kenneth Gene Puckett and Rita Blanche Dougherty on the 14 day of October, 1950

Raymond L. Alber

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. 8305

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Sylvester Smoot to Sophia Cewright

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Sylvester Smoot
2. Color White 3. Where born Hendricks County, Ind. (Town, County, State or Country) 4. When born Nov. 19-1888 (Day, Month, Year)
5. Present residence 906 N. Belmont, Indianapolis, Ind.
6. Present occupation Painter 7. If no occupation, what means has the male contracting party to support a family? —
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father James Smoot 10. His color White
11. His birthplace Indiana. 12. His occupation Deceased 13. His residence Deceased.
14. Full christian and maiden name of mother Jamie Moore 15. Her color Cerhite 16. Her occupation Deceased
17. Her birthplace Indiana 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Twice 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Death - - - Divorce 1948
25. Give the names and ages of any minor children of the male applicant from all former marriages None
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names —
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Sylvester Smoot

Sylvester Smoot deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives his consent to the issuance of this license. Sylvester Smoot

Subscribed and sworn to before me, this 16th day of October, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A. 302776

Application is hereby made for a license for the marriage of FEMALE

Sophia Cewright to Sylvester Smoot

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Sophia Wright
2. Color White 3. Where born Ky. (Town, County, State or Country) 4. When born Feb. 13, 1883 (Day, Month, Year)
5. Present residence 906 N. Belmont Indianapolis Ind.
6. Present occupation Housewife 7. Full christian and surname of father George Brackinridge (Went to
8. His color White 9. His birthplace Ky. 10. His occupation Deceased 11. His residence Regarded. work
12. Full christian and maiden name of mother Corinna Handlon 13. Her color White 14. Her occupation Deceased
15. Her birthplace Ky. 16. Her residence Deceased
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No 19. If not, how often has she been married? Twice. 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Death - 1935 .. Death - 1948.
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Sophia Wright

Sophia Cewright deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. Sophia Wright

Subscribed and sworn to before me, this 16th day of October, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Sylvester Smoot
To
Sophia Wright

ss:

BE IT REMEMBERED, That on this 16th day of October, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Sylvester Smoot and Sophia Wright and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 16th day of October, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 22nd day of November, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Sylvester Smoot and Sophia Wright on the 22nd day of October, 1950

Cairn McGuire

(Signature on certificate is not too legible)

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A25753

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Gene T. Scott to Delores Kay Mendenhall

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Gene Tunney Scott
2. Color W 3. Where born Louisville, Ky (Town, County, State or Country) 4. When born Jan 27-1928 (Day, Month, Year)
5. Present residence Avon, Indiana
6. Present occupation Welder 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Everett Scott 10. His color W
11. His birthplace Louisville Ky 12. His occupation Carpenter 13. His residence Avon, Ind.
14. Full christian and maiden name of mother Velma Purvis 15. Her color W 16. Her occupation Housewife
17. Her birthplace Valley Mills, Ind. 18. Her residence Avon, Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Gene Tunney Scott

Gene Tunney Scott deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Gene Tunney Scott

Subscribed and sworn to before me, this 18 day of October, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A25751

Application is hereby made for a license for the marriage of

FEMALE

Delores Kay Mendenhall to Gene Tunney Scott

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Delores Kay Mendenhall
2. Color W 3. Where born Indianapolis (Town, County, State or Country) 4. When born Aug 2-1934 (Day, Month, Year)
5. Present residence Stilesville
6. Present occupation Not employed 7. Full christian and surname of father William Mendenhall
8. His color W 9. His birthplace Hampfield 10. His occupation Truck Driver 11. His residence Stilesville
12. Full christian and maiden name of mother Crystal Shoridder 13. Her color W 14. Her occupation Housewife
15. Her birthplace Carlersburg, Ind. 16. Her residence Stilesville Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Delores Mendenhall

Dola Crystal Mendenhall deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. Crystal Mendenhall

Subscribed and sworn to before me, this 18 day of October, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Gene Tunney Scott to Dolores Kay Mendenhall

ss:

BE IT REMEMBERED, That on this 18th day of October, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Gene Tunney Scott and Dolores Kay Mendenhall and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 17th day of October, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 20th day of October, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Gene Tunney Scott and Dolores Kay Mendenhall on the 18th day of October, 1950

Percy M. Thomas

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A302908

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Gilbert Allen Barry to Alice Sue Dowen

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Gilbert Allen Barry
2. Color W 3. Where born Greencastle Ind. (Town, County, State or Country) 4. When born Nov 13-1928 (Day, Month, Year)
5. Present residence Clayton Ind.
6. Present occupation Farmer 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father George E Barry 10. His color W
11. His birthplace Paris Ill. 12. His occupation Farmer 13. His residence Clayton Ind.
14. Full christian and maiden name of mother Tillie Harrer 15. Her color W 16. Her occupation Housewife
17. Her birthplace Cincinnati O 18. Her residence Clayton 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Gilbert Allen Barry deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Gilbert Allen Barry

Subscribed and sworn to before me, this 18th day of October, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A30582

Application is hereby made for a license for the marriage of

FEMALE

Alice Sue Dowen to Gilbert Allen Barry

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Alice Sue Dowen
2. Color W 3. Where born Parke Co. Ind. (Town, County, State or Country) 4. When born Dec 6-1929 (Day, Month, Year)
5. Present residence Cuno Ind.
6. Present occupation Teacher 7. Full christian and surname of father Howard E Dowen
8. His color W 9. His birthplace Carbon Ind. 10. His occupation Farmer 11. His residence Carbon Ind.
12. Full christian and maiden name of mother Freda Mary Brown 13. Her color W 14. Her occupation Housewife
15. Her birthplace Carbon, Ind. 16. Her residence Carbon Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Alice Sue Dowen deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Alice Sue Dowen

Subscribed and sworn to before me, this 18th day of October, 1950

Edah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Gilbert Allen Barry
To
Alice Sue Dowen

ss:

BE IT REMEMBERED, That on this 18th day of October, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Gilbert Allen Barry and Alice Sue Dowen and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 18th day of October, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 25th day of October, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Gilbert Allen Barry and Alice Sue Dowen on the 20th day of October, 1950

John Paul Jones, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A355814

Application for Marriage License — MALE

Application is hereby made for a license for the marriage of Hurley Buchanan to Betty Lee Warren

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Hurley Buchanan
2. Color W 3. Where born Marshall Ill (Town, County, State or Country) 4. When born Aug 6-1914 (Day, Month, Year)
5. Present residence 118 N. Noble St. Indianapolis
6. Present occupation Cabinet Maker 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Mace Buchanan 10. His color W
11. His birthplace Illinois 12. His occupation Unknown 13. His residence Unknown
14. Full christian and maiden name of mother Ethel Thomas 15. Her color W 16. Her occupation Housewife
17. Her birthplace Marshall Ill 18. Her residence Clinton Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? Twice 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce - 1948 - Ft. Wayne
25. Give the names and ages of any minor children of the male applicant from all former marriages No
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Hurley Buchanan deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Hurley Buchanan

Subscribed and sworn to before me, this 19th day of October, 19 50

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A355845

Application is hereby made for a license for the marriage of — FEMALE

Betty Lee Warren to Hurley Buchanan

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Betty Lee Warren
2. Color W 3. Where born Terre Haute Ind. (Town, County, State or Country) 4. When born Feb. 13-1922 (Day, Month, Year)
5. Present residence 118 N. Noble Indianapolis
6. Present occupation Housewife 7. Full christian and surname of father Henry Warren
8. His color W 9. His birthplace Mississippi 10. His occupation Nobles Boyd 11. His residence Terre Haute
12. Full christian and maiden name of mother Bertha Steele 13. Her color W 14. Her occupation Housewife
15. Her birthplace Terre Haute 16. Her residence Terre Haute
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce - Oct 13-1950
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Betty Lee Warren deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Betty Lee Warren

Subscribed and sworn to before me, this 19th day of October, 19 50

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Hurley Buchanan
To
Betty Lee Warren

ss:

BE IT REMEMBERED, That on this 19th day of October, 19 50, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Hurley Buchanan and Betty Lee Warren and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 19th day of October, 19 50

(SEAL)

BE IT FURTHER REMEMBERED, That on this 21st day of October, 19 50, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Hurley Buchanan and Betty Lee Warren on the 19 day of October, 19 50

Thomas P. Heaney
(J. P. Seal)

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 30785 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

Don A Garrison to Margaret D Kelly

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Don A. Garrison
2. Color White 3. Where born Richmond Ind. (Town, County, State of Country) 4. When born July 19-1931. (Day, Month, Year)
5. Present residence 5939 N. Wa Narwalds, Indianapolis, Ind.
6. Present occupation Student 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Neill Raymond Garrison 10. His color White.
11. His birthplace Astoria, Ill. 12. His occupation Manager Emeregain 13. His residence Agresate Corp. Indianapolis Ind.
14. Full christian and maiden name of mother Dorothy Mae Wolfe 15. Her color White 16. Her occupation Housewife
17. Her birthplace Ludlow Falls, Ohio 18. Her residence Indianapolis, Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? — 24. If so, how and when? —
25. Give the names and ages of any minor children of the male applicant from all former marriages —
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names —
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Don A Garrison

Dorothe Mae Garrison deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. Dorothe Mae Garrison

Subscribed and sworn to before me, this 20th day of October, 1950.

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A. 30816 Application is hereby made for a license for the marriage of **FEMALE**

Margaret D Kelly to Don A. Garrison

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Margaret D. Kelly
2. Color White 3. Where born Marion Indiana (Town, County, State or Country) 4. When born Mar. 13-1933 (Day, Month, Year)
5. Present residence 561 Tecumseh Place, Indianapolis, Ind. 6. Present occupation At Home 7. Full christian and surname of father Joseph Michael Kelly
8. His color White 9. His birthplace Indianapolis 10. His occupation Sales Agent 11. His residence Indianapolis Ind.
12. Full christian and maiden name of mother Anna Dolores Steele 13. Her color White 14. Her occupation Cashier
15. Her birthplace Alexandria, Indiana 16. Her residence Indianapolis, Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? — 20. Has such prior marriage, or marriages been dissolved? — 21. If so, how and when? —
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Margaret D. Kelly

Anna Dolores Kelly deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. Anna Dolores Kelly

Subscribed and sworn to before me, this 20th day of October, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Don A. Garrison
To
Margaret D. Kelly

Indiana, to-wit: Hendricks County, ss:

BE IT REMEMBERED, That on this 20th day of October, 1950, the following Marriage License was issued, to-wit:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Don A. Garrison and Margaret D. Kelly and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 20th day of October, 1950. (SEAL)

BE IT FURTHER REMEMBERED, That on this 24th day of October, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Don A. Garrison and Margaret D. Kelly on the 22nd day of October, 1950

Roy V Davis, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A8109

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Paul Troke to Thelma Jane Renner

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Paul Troke
2. Color Wh 3. Where born Toledo Ohio (Town, County, State or Country) 4. When born June 2-1931 (Day, Month, Year)
5. Present residence 3441 No. Ill. Indpls.
6. Present occupation Book Binder 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Thomas Pain Troke 10. His color wh.
11. His birthplace London England. 12. His occupation Mech. Engr. 13. His residence Coatesville Ind.
14. Full christian and maiden name of mother Gladys Reed 15. Her color wh 16. Her occupation Housewife
17. Her birthplace Danville Ind. 18. Her residence Indpls. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Thomas Troke deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Signature of Applicant Paul Troke

Subscribed and sworn to before me, this 21st day of October, 1950

Carl M Johnson Clerk Hendricks Circuit Court

Certificate No. A8206

Application is hereby made for a license for the marriage of

FEMALE

Thelma Jane Renner to Paul Troke

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Thelma Jane Renner
2. Color Wh. 3. Where born Indpls. (Town, County, State or Country) 4. When born Apr. 25-1932 (Day, Month, Year)
5. Present residence Mooresville 1107 So 6 Clay St.
6. Present occupation Typist. 7. Full christian and surname of father John Emory Renner
8. His color Wh. 9. His birthplace Indpls 10. His occupation Foreman 11. His residence Same
12. Full christian and maiden name of mother Sarah Anne Creagan 13. Her color Wh. 14. Her occupation Housewife
15. Her birthplace Centerton 16. Her residence Same
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Thelma Jane Renner deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Signature of Applicant Thelma Jane Renner

Subscribed and sworn to before me, this 21st day of October, 1950

Carl M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Paul Troke
To
Thelma Jane Renner

ss:

BE IT REMEMBERED, That on this 21st day of October, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Paul Troke and Thelma Jane Renner and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Carl M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 21st day of October, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 25th day of October, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Paul Troke and Thelma Jane Renner on the 21 day of October, 1950

Herbert Engle

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 27437

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Virgil Lewis Gipson to Mary Kathleen Hanlon

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Virgil Lewis Gipson
2. Color Wh. 3. Where born Brownsville Ky. (Town, County, State or Country) 4. When born 6-20-26 (Day, Month, Year)
5. Present residence Danville Ind.
6. Present occupation Construction 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Robt. Gipson 10. His color wh.
11. His birthplace Ky 12. His occupation Truck Driver 13. His residence Same
14. Full christian and maiden name of mother Dora Jaggers 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Ky. 18. Her residence Danville 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes. 24. If so, how and when? Divorce 1950
25. Give the names and ages of any minor children of the male applicant from all former marriages Pamela - 3 yrs
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names Same
27. Are you supporting them and are you complying with all Court orders issued for their support? Yes
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Virgil Lewis Gipson deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true and gives consent to the issuance of this license.

Signature of Applicant Virgil Lewis Gipson

Subscribed and sworn to before me, this 21st day of October, 1950

Leah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A 35420

Application is hereby made for a license for the marriage of

FEMALE

Mary Kathleen Hanlon to Virgil Lewis Gipson

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Mary Kathleen Hanlon
2. Color Wh. 3. Where born Greencastle Ind. (Town, County, State or Country) 4. When born 5-5-30 (Day, Month, Year)
5. Present residence Reno Ind.
6. Present occupation Westinghouse employee 7. Full christian and surname of father Lee Hanlon
8. His color Wh. 9. His birthplace Greencastle 10. His occupation Truck Driver 11. His residence Reno.
12. Full christian and maiden name of mother Kathleen Kersey 13. Her color Wh. 14. Her occupation Housewife
15. Her birthplace Greencastle 16. Her residence Reno.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Mary Kathleen Hanlon deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Mary Kathleen Hanlon

Subscribed and sworn to before me, this 21st day of October, 1950

Leah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Virgil Lewis Gipson
to
Mary Kathleen Hanlon

ss:

BE IT REMEMBERED, That on this 21st day of October, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Virgil Lewis Gipson and Mary Kathleen Hanlon and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Leah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 21st day of October, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 23rd day of October, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Virgil Lewis Gipson and Mary Kathleen Hanlon on the 21st day of October, 1950

Raymond L. Alber

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. 355813

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Wm. Dale Walters to Norma Jean Hooker

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is William Dale Walters
2. Color W 3. Where born North Vernon Ind. (Town, County, State or Country) 4. When born June 2-1929 (Day, Month, Year)
5. Present residence R5 North Vernon Ind.
6. Present occupation Factory Worker 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Minor Walters 10. His color W
11. His birthplace Lafayette Ind. 12. His occupation Unknown 13. His residence Unknown
14. Full christian and maiden name of mother Vyda F. Cooper 15. Her color W 16. Her occupation Housewife
17. Her birthplace Jennings Co. Ind. 18. Her residence R5 North Vernon 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

William Dale Walters deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Signature of Applicant William Dale Walters

Subscribed and sworn to before me, this 21st day of October, 1950

Cedah M. Johnson Clerk Hendricks Circuit Court

Certificate No. 355812

Application is hereby made for a license for the marriage of

FEMALE

Norma Jean Hooker to William Dale Walters

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the women is Norma Jean Hooker
2. Color W 3. Where born Jennings Co Ind. (Town, County, State or Country) 4. When born Jan 5-1932 (Day, Month, Year)
5. Present residence Rt 5 North Vernon Ind.
6. Present occupation Not employed 7. Full christian and surname of father Clarence Hooker
8. His color W 9. His birthplace Jennings Co 10. His occupation Farmer 11. His residence Rt 5 N. Vernon
12. Full christian and maiden name of mother Chalice McDowell 13. Her color W 14. Her occupation Factory Worker
15. Her birthplace Jennings Co. Ind. 16. Her residence Rt 5 North Vernon
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Norma Jean Hooker deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Signature of Applicant Norma Jean Hooker

Subscribed and sworn to before me, this 21st day of October, 1950

Cedah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Wm Dale Walters
To
Norma Jean Hooker

ss:

BE IT REMEMBERED, That on this 21st day of October, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Wm Dale Walters and Norma Jean Hooker and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Cedah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 21st day of October, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 21st day of October, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, William Dale Walters and Norma Jean Hooker on the 21 day of October, 1950

Thomas P. Heaney
J.P. Seal

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 8325

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of William D. Brown to Mary Lou Laughlin

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is William D. Brown
2. Color wh. 3. Where born Sumner Co Tenn. (Town, County, State or Country) 4. When born June 6-1918 (Day, Month, Year)
5. Present residence 6332 Dunaway, Indpls.
6. Present occupation Diamond chain Mfg. 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Walker Brown 10. His color wh.
11. His birthplace Tenn. 12. His occupation Diamond chain 13. His residence Same
14. Full christian and maiden name of mother Vallie Butts 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Tenn. 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce 1948.
25. Give the names and ages of any minor children of the male applicant from all former marriages William Dennis 6
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names Same
27. Are you supporting them and are you complying with all Court orders issued for their support? Yes
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

William D. Brown deposes and says that He has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant William D. Brown

Subscribed and sworn to before me, this 27th day of Oct, 1950

William D. Brown

Clerk Hendricks Circuit Court

Certificate No. A 51765

Application is hereby made for a license for the marriage of

FEMALE

Mary Lou Laughlin to William D. Brown

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Mary Lou Laughlin
2. Color wh. 3. Where born Indpls. (Town, County, State or Country) 4. When born Dec 29-1927 (Day, Month, Year)
5. Present residence 1196 E. 33rd Indpls.
6. Present occupation None 7. Full christian and surname of father Oliver O. Laughlin
8. His color wh. 9. His birthplace Odon Ind 10. His occupation Dead 11. His residence Dead
12. Full christian and maiden name of mother Clara E. McCord 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Odon Ind. 16. Her residence Dead
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes. 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Mary Lou Laughlin deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Mary Lou Laughlin

Subscribed and sworn to before me, this 27th day of Oct, 1950

Mary Lou Laughlin

Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

William D. Brown
To
Mary Lou Laughlin

ss:

BE IT REMEMBERED, That on this 27th day of October, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife William D. Brown and Mary Lou Laughlin and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 27th day of October 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 2nd day of November, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, William D. Brown and Mary Lou Laughlin on the 27th day of October, 1950

John Paul Jones, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 5005 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of Richard Eugene Perkins to Ruth Emma McNeely

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Richard Eugene Perkins
2. Color White 3. Where born Hadley Ind. (Town, County, State or Country) 4. When born Nov. 5-1930 (Day, Month, Year)
5. Present residence 64 High St. Danville, Ind.
6. Present occupation Works at Lumber Co. 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Kenneth Perkins 10. His color White
11. His birthplace Roachdale Ind. 12. His occupation N.Y. Central Employee 13. His residence Danville, Ind.
14. Full christian and maiden name of mother Leona Pearl Archer 15. Her color White 16. Her occupation Housewife
17. Her birthplace Clayton, Ind. 18. Her residence Danville, Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? — 23. Has such prior marriage or marriages, been dissolved? — 24. If so, how and when? —
25. Give the names and ages of any minor children of the male applicant from all former marriages —
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names —
27. Are you supporting them and are you complying with all Court orders issued for their support? —
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Richard Eugene Perkins

Kenneth Perkins deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives his consent to the issuance of this license. Kenneth Perkins

Subscribed and sworn to before me, this 28th day of October, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A 349734 Application is hereby made for a license for the marriage of Ruth Emma McNeely to Richard Eugene Perkins **FEMALE**

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Ruth Emma McNeely
2. Color White 3. Where born Richmond, Ind. (Town, County, State or Country) 4. When born July 3-1927 (Day, Month, Year)
5. Present residence 423 So. Fess, Bloomington, Ind.
6. Present occupation Teacher 7. Full christian and surname of father H. Cecil McNeely
8. His color White 9. His birthplace Boonville Ind. 10. His occupation Carpenter 11. His residence Bloomington, Ind.
12. Full christian and maiden name of mother H. Thelma Bottright 13. Her color White 14. Her occupation Housewife
15. Her birthplace Boonville Ind. 16. Her residence Bloomington.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? — 20. Has such prior marriage, or marriages been dissolved? — 21. If so, how and when? —
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Ruth Emma McNeely

Ruth Emma McNeely deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. Ruth Emma McNeely

Subscribed and sworn to before me, this 28th day of October, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Richard Eugene Perkins
to
Ruth Emma McNeely

BE IT REMEMBERED, That on this 28th day of October, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Richard Eugene Perkins and Ruth Emma McNeely and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 28th day of October, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 31st day of October, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Richard Eugene Perkins and Ruth Emma McNeely on the 28th day of October, 1950

Rev. F. J. Beisel

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 257509 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of Dean Elliott Kempf to Wanda Imogene Bray

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Dean Elliott Kempf
2. Color wh. 3. Where born South Bend Ind. (Town, County, State or Country) 4. When born May 1-1925 (Day, Month, Year)
5. Present residence RR 2 South Bend Ind.
6. Present occupation Home study man 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Ernest H Kempf 10. His color wh.
11. His birthplace Germany 12. His occupation Printer 13. His residence Same
14. Full christian and maiden name of mother Elizabeth Pierce 15. Her color wh. 16. Her occupation Teacher
17. Her birthplace Indiana 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Dean Elliott Kempf deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Dean E. Kempf X

Dean Elliott Kempf X

Subscribed and sworn to before me, this 27th day of October, 1950

Clerk M Johnson Clerk Hendricks Circuit Court

Certificate No. A 257510 Application is hereby made for a license for the marriage of **FEMALE**

Wanda Imogene Bray to Dean Elliott Kempf

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Wanda Imogene Bray
2. Color wh. 3. Where born Hendricks Co Ind. (Town, County, State or Country) 4. When born Oct 18. 1928 (Day, Month, Year)
5. Present residence Avon Ind.
6. Present occupation None. 7. Full christian and surname of father Paul T. Bray
8. His color wh. 9. His birthplace Unknown 10. His occupation Dyer 11. His residence Dec'd
12. Full christian and maiden name of mother Ruby Hunt 13. Her color wh. 14. Her occupation Bookkeeper
15. Her birthplace Hendricks Co. 16. Her residence Avon.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes. 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Wanda Imogene Bray deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Wanda Imogene Bray X

Wanda Imogene Bray X

Subscribed and sworn to before me, this 28th day of October, 1950

Clerk M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Dean Elliott Kempf
To
Wanda Imogene Bray

ss:

BE IT REMEMBERED, That on this 28th day of October, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Dean Elliott Kempf and Wanda Imogene Bray and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Clerk M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 28th day of October, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 6th day of November, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Dean Kempf and Wanda Bray on the 3rd day of November, 1950

Clyde H. Pearce

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A355948

Application for Marriage License — MALE

Application is hereby made for a license for the marriage of Robert Allen Hayden to Thelma Elaine Johnson

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Robert Allen Hayden
2. Color W 3. Where born Brownsburg (Town, County, State or Country) 4. When born Dec 2-1926 (Day, Month, Year)
5. Present residence Brownsburg
6. Present occupation Eng. & Operator N.Y. Central R.R. 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Marion Otis Hayden 10. His color W
11. His birthplace Hendricks Co. 12. His occupation Machinist 13. His residence 1935 N. Keystone, Indpls.
14. Full christian and maiden name of mother Elizabeth Courtney 15. Her color W 16. Her occupation Housewife
17. Her birthplace Brownsburg 18. Her residence Brownsburg 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Robert allen Hayden

Robert Allen Hayden deposes and says that has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Robert allen Hayden

Subscribed and sworn to before me, this 31st day of October, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A355947

Application is hereby made for a license for the marriage of — FEMALE

Thelma Elaine Johnson to Robert Allen Hayden

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Thelma Elaine Johnson
2. Color W 3. Where born Indianapolis (Town, County, State or Country) 4. When born June 9-1932 (Day, Month, Year)
5. Present residence Brownsburg R.R. 6. Present occupation At Allisonville 7. Full christian and surname of father George L. Johnson
8. His color W 9. His birthplace Indianapolis 10. His occupation City Patrolman 11. His residence Brownsburg R.R.
12. Full christian and maiden name of mother Sallie Benedict 13. Her color W 14. Her occupation Housewife
15. Her birthplace Kentucky 16. Her residence Brownsburg R.R.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Thelma Elaine Johnson

Thelma Elaine Johnson deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Thelma Elaine Johnson

Subscribed and sworn to before me, this Oct 31 day of October, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Robert Allen Hayden
To
Thelma Elaine Johnson

ss:

BE IT REMEMBERED, That on this 31st day of October, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Robert Allen Hayden and Thelma Elaine Johnson and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 31st day of October, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 14th day of November, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Robert Allen Hayden and Thelma Elaine Johnson on the 2nd day of November, 1950

Lester B. Yarnick

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No A355946

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Vincent J. Roesky to Dora Jones Fuller

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Vincent Joseph Roesky
2. Color W 3. Where born Junkletownock Pa (Town, County, State or Country) 4. When born Jan 17-1920 (Day, Month, Year)
5. Present residence 1028 East Morris St. Indianapolis
6. Present occupation U.S. Air Force 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Wm J. Roesky 10. His color W
11. His birthplace Warsaw Poland 12. His occupation Shoemaker 13. His residence 26 Harrison St. Junkletownock
14. Full christian and maiden name of mother Hedwig Myeskiy 15. Her color W 16. Her occupation Housewife
17. Her birthplace Nanticoke Pa 18. Her residence Junkletownock 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? once 23. Has such prior marriage or marriages, been dissolved? yes 24. If so, how and when? Divorce - 1950
25. Give the names and ages of any minor children of the male applicant from all former marriages Vincent Jr., 6 yrs.
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names yes - Wholly - as above
27. Are you supporting them and are you complying with all Court orders issued for their support? yes
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Vincent J. Roesky

Vincent J. Roesky deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Vincent J Roesky

Subscribed and sworn to before me, this 1st day of Nov., 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No A355945

Application is hereby made for a license for the marriage of

FEMALE

Dora J. Fuller to Vincent J. Roesky

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Dora Jones Fuller
2. Color W 3. Where born Ky. Hustonville (Town, County, State or Country) 4. When born Dec 13-1914 (Day, Month, Year)
5. Present residence 1028 E. Morris St. Indpls
6. Present occupation Dental Technician 7. Full christian and surname of father Wm. L. Jones
8. His color W 9. His birthplace Ky 10. His occupation Railroader 11. His residence Jeffersonville Rt.
12. Full christian and maiden name of mother Grace Runnerelley 13. Her color W 14. Her occupation Housewife
15. Her birthplace Kentucky 16. Her residence 1024 Elen St. Indpls
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? once 20. Has such prior marriage, or marriages been dissolved? yes 21. If so, how and when? Sept-37- Divorce
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Dora J. Fuller

Dora J. Fuller deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Dora J Fuller

Subscribed and sworn to before me, this 1st day of Nov., 1950

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Vincent Joseph Roesky
To
Dora Jones Fuller

ss:

BE IT REMEMBERED, That on this 1st day of November, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Vincent Joseph Roesky and Dora Jones Fuller and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 1st day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 2nd day of November, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Vincent Joseph Roesky and Dora Jones Fuller on the 1st day of November, 1950

John Paul Jones, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 28734 — **Application for Marriage License** — **MALE**

Application is hereby made for a license for the marriage of

Atha Sylvester Mayes to Barbara Jean Brown

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Atha Sylvester Mayes
2. Color wh. 3. Where born Franklin Ky. (Town, County, State or Country) 4. When born April 4-1929 (Day, Month, Year)
5. Present residence 924 Prospect - Indpls.
6. Present occupation Factory worker. 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Clarence V. Mayes 10. His color wh.
11. His birthplace Simpson Co - Ky. 12. His occupation Farmer 13. His residence Franklin Ky.
14. Full christian and maiden name of mother Fannie K. Laney 15. Her color Wh. 16. Her occupation Housewife
17. Her birthplace Ky. 18. Her residence Franklin Ky. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Atha S. Mayes

Atha Sylvester Mayes deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Atha S. Mayes

Subscribed and sworn to before me, this 3rd day of November, 1950.

Cecil M. Johnson Clerk Hendricks Circuit Court

Certificate No. A 28734 — Application is hereby made for a license for the marriage of — **FEMALE**

Barbara Jean Brown to Atha Sylvester Mayes

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Barbara Jean Brown
2. Color wh. 3. Where born Indpls. Ind. (Town, County, State or Country) 4. When born Aug 29- 1931 (Day, Month, Year)
5. Present residence 929 Prospect. Indpls
6. Present occupation None 7. Full christian and surname of father Marion Rufus Brown
8. His color Wh. 9. His birthplace Texas. 10. His occupation Welder 11. His residence Same
12. Full christian and maiden name of mother Ethel Mae Doss 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Tennessee 16. Her residence Same
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Barbara J. Brown

Barbara Jean Brown deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Barbara J. Brown

Subscribed and sworn to before me, this 3rd day of November, 1950.

Cecil M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Atha Sylvester Mayes
To
Barbara Jean Brown

ss:

BE IT REMEMBERED, That on this 3rd day of November, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Atha Sylvester Mayes and Barbara Jean Brown and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Cecil M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 3rd day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 4th day of November, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Atha Sylvester Mayes and Barbara Jean Brown on the 3 day of November, 1950

Raymond L. Alker

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A14898

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Donald Othel Jellison to Wynnette Mae Hutton

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Donald Othel Jellison
2. Color wh. 3. Where born Salem Ind. (Town, County, State or Country) 4. When born Nov 23-1928 (Day, Month, Year)
5. Present residence 1403 So. East - Duplex
6. Present occupation Carpenters Helper 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Othel Jellison 10. His color wh.
11. His birthplace Salem Ind. 12. His occupation Foreman - Allison 13. His residence Same
14. Full christian and maiden name of mother Hazel Gardner 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Salem Ind. 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Donald Othel Jellison deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Donald Othel Jellison

Donald Othel Jellison

Subscribed and sworn to before me, this 4th day of November, 1950

Arah M Johnson Clerk Hendricks Circuit Court

Certificate No. A14899

Application is hereby made for a license for the marriage of

FEMALE

Wynnette Mae Hutton to Donald Othel Jellison

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Wynnette Mae Hutton
2. Color wh. 3. Where born Indpls. Ind (Town, County, State or Country) 4. When born Sept 29-1932 (Day, Month, Year)
5. Present residence 1539 So. Dibbs - Indpls.
6. Present occupation Office work 7. Full christian and surname of father John R. Hutton
8. His color wh. 9. His birthplace Indpls. 10. His occupation Machine shop 11. His residence Same
12. Full christian and maiden name of mother Gwendolyn Taylor 13. Her color wh 14. Her occupation Factory worker
15. Her birthplace Wisconsin 16. Her residence Same
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Wynnette Mae Hutton deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Wynnette Mae Hutton

Wynnette Mae Hutton

Subscribed and sworn to before me, this 4th day of November, 1950

Arah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Donald Othel Jellison
To
Wynnette Mae Hutton

ss:

BE IT REMEMBERED, That on this 4th day of November, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Donald Othel Jellison and Wynnette Mae Hutton and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Arah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 4th day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 6th day of November, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Donald Othel Jellison and Wynnette Mae Hutton on the 4th day of November, 1950

John Paul Jones, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 374642 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

Harold Lloyd Whitaker to Freda Ann Hawkins

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Harold Lloyd Whitaker
2. Color Wh. 3. Where born Snapp, Ind. (Town, County, State or Country) 4. When born July 7-1931 (Day, Month, Year)
5. Present residence Brizepost Ind.
6. Present occupation work at Express Co. 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Oscar Whitaker 10. His color wh.
11. His birthplace Somerset Ky. 12. His occupation Farmer 13. His residence Same
14. Full christian and maiden name of mother Zona Phelps 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Ky. 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant X Harold Lloyd Whitaker

Zona Whitaker deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. X Mrs Zona Whitaker

Subscribed and sworn to before me, this 4th day of November, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A 374641 Application is hereby made for a license for the marriage of **FEMALE**

Freda Ann Hawkens to Harold Lloyd Whitaker

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Freda Ann Hawkens
2. Color Wh. 3. Where born Avon Ind. (Town, County, State or Country) 4. When born Jan. 11-1932. (Day, Month, Year)
5. Present residence Avon Ind.
6. Present occupation Office worker 7. Full christian and surname of father Ralph Hawkens
8. His color wh. 9. His birthplace Plainfield 10. His occupation Garageman 11. His residence Avon Ind.
12. Full christian and maiden name of mother Marguerite Masten 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Plainfield Ind 16. Her residence Avon Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes. 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Freda Ann Hawkins X

Freda Ann Hawkins deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Freda Ann Hawkins X

Subscribed and sworn to before me, this 4th day of November, 1950

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Harold Lloyd Whitaker
To
Freda Ann Hawkens

ss: **BE IT REMEMBERED,** That on this 4th day of November, 1950 the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Harold Lloyd Whitaker and Freda Ann Hawkens and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 4th day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 14th day of November, 1950 the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Harold Lloyd Whitaker and Freda Ann Hawkens on the 9th day of November, 1950

Percy M. Thomas

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 14743 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

Virgil Sexton to Grace V Bowman

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Virgil Sexton
2. Color White 3. Where born Bloomington, Ind. (Town, County, State or Country) 4. When born Aug. 16-1915 (Day, Month, Year)
5. Present residence Danville, Indiana
6. Present occupation Lineman 7. If no occupation, what means has the male contracting party to support a family? —
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father James Monroe Sexton 10. His color White
11. His birthplace Bloomington Ind 12. His occupation Carpenter 13. His residence Martinsville Ind.
14. Full christian and maiden name of mother Mary Ellen White 15. Her color Her 16. Her occupation Deceased
17. Her birthplace Bloomington Ind 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Twice 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce 1947 - Sept. 1950
25. Give the names and ages of any minor children of the male applicant from all former marriages Martha Ruth Sexton, - Six Years
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names Yes, Martha Ruth Sexton
27. Are you supporting them and are you complying with all Court orders issued for their support? Yes
28. Is the male contracting party afflicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Virgil L Sexton

Virgil Sexton deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives his consent to the issuance of this license. Virgil L Sexton

Subscribed and sworn to before me, this 4th day of November, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A 14742 Application is hereby made for a license for the marriage of **FEMALE**

Grace V Bowman to Virgil Sexton

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Grace V Bowman
2. Color White 3. Where born Putnam County, Ind. (Town, County, State or Country) 4. When born Oct 8-1916 (Day, Month, Year)
5. Present residence Danville, Ind.
6. Present occupation Waitress 7. Full christian and surname of father Otis Harvey Estes
8. His color White 9. His birthplace Ky. 10. His occupation Janitor 11. His residence Danville
12. Full christian and maiden name of mother Irene Eulalia Johnson 13. Her color White 14. Her occupation Housewife.
15. Her birthplace Putnam County, Ind. 16. Her residence Danville, Indiana
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce 1947
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Grace Bowman

Grace Bowman deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. Grace Bowman

Subscribed and sworn to before me, this 4th day of November, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Virgil Sexton
To
Grace Bowman

ss:

BE IT REMEMBERED, That on this 4th day of November, 1950 the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Virgil Sexton and Grace Bowman and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 4th day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 10th day of November, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Virgil Sexton and Grace Bowman on the 4th day of November, 1950

Rev. Clarence M. Hager
Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No A359268 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of Charles Logan Robinson to Marcia Helen Gray

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Charles Logan Robinson
2. Color W 3. Where born Montgomery Co. Ind. (Town, County, State or Country) 4. When born Sept 15 - 1884 (Day, Month, Year)
5. Present residence 620 Lafayette Ave. Lebanon Ind
6. Present occupation Farming 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Thomas J. Robinson 10. His color W
11. His birthplace Owen Co Ind. 12. His occupation Farming 13. His residence Deceased
14. Full christian and maiden name of mother Susan Ellen Miller 15. Her color W 16. Her occupation Housewife
17. Her birthplace Floyd Co Ind. 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Death - June 27 - 1950
25. Give the names and ages of any minor children of the male applicant from all former marriages No
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Charles Logan Robinson

Charles Logan Robinson deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives Charles Logan Robinson consent to the issuance of this license.

Subscribed and sworn to before me, this 6th day of Nov, 19 50

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No A359269 Application is hereby made for a license for the marriage of **FEMALE**

Marcia Helen Gray to Charles Logan Robinson

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Martha Helen Gray
2. Color W 3. Where born Boone Co Ind. (Town, County, State or Country) 4. When born June 1 - 1891 (Day, Month, Year)
5. Present residence Brownsburg Ind
6. Present occupation Housewife 7. Full christian and surname of father James Buchanan Linter 8. His color W 9. His birthplace Boone Co Ind 10. His occupation Laborer 11. His residence Deceased
12. Full christian and maiden name of mother Harriet R Rush 13. Her color W 14. Her occupation Housewife Deceased
15. Her birthplace Bloomington Ind 16. Her residence
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Death - 1947
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Martha Helen Gray

Marcia Helen Gray deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives Martha Helen Gray consent to the issuance of this license.

Subscribed and sworn to before me, this 6th day of Nov, 19 50

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Charles Logan Robinson
to
Martha Helen Gray

ss:

BE IT REMEMBERED, That on this 6th day of November, 19 50, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Charles Logan Robinson and Martha Helen Gray and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 6th day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 14th day of November, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Charles Logan Robinson and Martha Helen Gray on the 8th day of November, 1950

Lester B. Yearick

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A19614

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Lester Franklin Cochran to Julia Haywood

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Lester Franklin Cochran
2. Color W 3. Where born Euaton Ind, (Town, County, State or Country) 4. When born Nov 25-1908 (Day, Month, Year)
5. Present residence 7800 E Washington St. Indianapolis
6. Present occupation Mail Carrier 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Hugey Worth Cochran 10. His color W
11. His birthplace Grant Co Ind. 12. His occupation Farmer 13. His residence Deceased
14. Full christian and maiden name of mother Sarah Maddox 15. Her color W 16. Her occupation Housewife
17. Her birthplace Grant Co Ind. 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce — Nov - 1950
25. Give the names and ages of any minor children of the male applicant from all former marriages Richard 15; Joyce Enid 8; Charles 3; Barbara 2.
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names as above
27. Are you supporting them and are you complying with all Court orders issued for their support? Yes
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Lester Franklin Cochran deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Lester F. Cochran

Lester F. Cochran

Subscribed and sworn to before me, this 6th day of Nov, 1950

Edah M. Johnson, Clerk Hendricks Circuit Court

Certificate No. A19643

Application is hereby made for a license for the marriage of

FEMALE

Julia Haywood to Lester Franklin Cochran

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Julia Haywood
2. Color W 3. Where born Hancock Co Ind. (Town, County, State or Country) 4. When born July 12-1911 (Day, Month, Year)
5. Present residence 742 S Meridian St Indpls
6. Present occupation Restaurant Work 7. Full christian and surname of father Frank O. Riley
8. His color W 9. His birthplace Hancock Co Ind 10. His occupation Motorman 11. His residence Deceased
12. Full christian and maiden name of mother Sarah E. Canfield 13. Her color W 14. Her occupation Housewife
15. Her birthplace Hancock Co. Ind. 16. Her residence Deceased.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? twice 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? May 7-1930 — 1944
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Julia Haywood deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Julia Haywood

Julia Haywood

Subscribed and sworn to before me, this 6th day of Nov, 1950

Edah M. Johnson, Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Lester Franklin Cochran
To
Julia Haywood

Indiana, to-wit: Hendricks County, ss:

BE IT REMEMBERED, That on this 6th day of November, 1950, the following Marriage License was issued, to-wit:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Lester Franklin Cochran and Julia Haywood and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 6th day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 9th day of November, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Lester Franklin Cochran and Julia Haywood on the 6th day of November, 1950

Rev. W. T. Pearcy D.D. Minister

Witnesses: Mr. & Mrs. Lester F. Cochran

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A234003 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of Jack Allen McCray to Esther Evelyn Ralston

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Jack Allen McCray
2. Color wh. 3. Where born Fraser Ind (Town, County, State or Country) 4. When born Feb 9-1932 (Day, Month, Year)
5. Present residence 1043 S. Villa Indpls. Ind.
6. Present occupation Sheet metal worker 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Fredrick McCray 10. His color wh.
11. His birthplace Putnam Co. Ind. 12. His occupation Steel treater 13. His residence Same.
14. Full christian and maiden name of mother Edna Fay Jennings 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Scott Co. Ind. 18. Her residence Same. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Jack A. McCray.

Edna Fay McCray deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. X Edna Fay McCray

Subscribed and sworn to before me, this 7th day of November, 1950

Adah M Johnson Clerk Hendricks Circuit Court

Certificate No. A234004 Application is hereby made for a license for the marriage of **FEMALE**

Esther Evelyn Ralston to Jack Allen McCray

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Esther Evelyn Ralston
2. Color wh. 3. Where born North Salem Ind (Town, County, State or Country) 4. When born Jan 14 1932 (Day, Month, Year)
5. Present residence Indpls 3650 W. 10th St.
6. Present occupation R.C.A. 7. Full christian and surname of father Elbert E. Ralston
8. His color wh. 9. His birthplace North Salem 10. His occupation Mechanic 11. His residence Same
12. Full christian and maiden name of mother Fansy Eggers 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Boone Co. Ind. 16. Her residence Same.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant X Esther Evelyn Ralston

Esther Evelyn Ralston deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. X Esther Evelyn Ralston

Subscribed and sworn to before me, this 7th day of November, 1950

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Jack Allen McCray
To
Esther Evelyn Ralston

ss:

BE IT REMEMBERED, That on this 7th day of November, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Jack Allen McCray and Esther Evelyn Ralston and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 7th day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 9th day of November, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Jack Allen McCray and Esther Evelyn Ralston on the 7th day of November, 1950

John Paul Jones, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A14823

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Robert Paul Pedigo to Edna Mae Dawson

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Robert Paul Pedigo
2. Color W 3. Where born Pittsboro Ind. (Town, County, State or Country) 4. When born Nov 13 - 1926 (Day, Month, Year)
5. Present residence Plainfield Ind.
6. Present occupation Ford Parts Mgr. 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Lloyd Pedigo 10. His color W
11. His birthplace Boone Co Ind. 12. His occupation Filling Sta. Operator 13. His residence Plainfield Ind.
14. Full christian and maiden name of mother Mayme Smith 15. Her color W 16. Her occupation Housewife
17. Her birthplace Pittsboro Ind 18. Her residence Plainfield Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Robert Paul Pedigo deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Robert Paul Pedigo

Subscribed and sworn to before me, this day of , 19

Clerk Hendricks Circuit Court

Certificate No. A14822

Application is hereby made for a license for the marriage of

FEMALE

Edna Mae Dawson to Robert Paul Pedigo

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Edna Mae Dawson
2. Color W 3. Where born Plainfield Ind (Town, County, State or Country) 4. When born June 10 - 1929 (Day, Month, Year)
5. Present residence Plainfield Ind.
6. Present occupation Skating Rink operator 7. Full christian and surname of father John F. Dawson
8. His color W 9. His birthplace Indiana 10. His occupation Farming & Stamping 11. His residence Plainfield Ind
12. Full christian and maiden name of mother Carrie O. Key 13. Her color W 14. Her occupation Housewife
15. Her birthplace Georgia 16. Her residence Plainfield Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Edna Mae Dawson deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Edna Mae Dawson

Subscribed and sworn to before me, this 9th day of November, 1950

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Robert Paul Pedigo
To
Edna Mae Dawson

ss:

BE IT REMEMBERED, That on this 9th day of November, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Robert Paul Pedigo and Edna Mae Dawson and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 9th day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 15th day of November, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Robert Paul Pedigo and Edna Mae Dawson on the 11th day of November, 1950

Robert O. Fife, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 19 8164 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

Berton Henry to Cora A. Brooks

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Berton Henry
2. Color White. Where born Pennsylvania. (Town, County, State or Country) 4. When born Aug 30-1903 (Day, Month, Year)
5. Present residence 760 N. La Salle, Indianapolis, Ind.
6. Present occupation Shoe Cleaner 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father James E. Henry 10. His color White
11. His birthplace Pennsylvania His occupation Deceased 13. His residence Deceased
14. Full christian and maiden name of mother Martha C. Yohn 15. Her color White 16. Her occupation Housewife
17. Her birthplace Pennsylvania 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Death - November 25 - 1946
25. Give the names and ages of any minor children of the male applicant from all former marriages. Burton Henry Jr. 19yrs Married
Edward E. Henry - 16yrs.
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names Edward E. Henry.
27. Are you supporting them and are you complying with all Court orders issued for their support? Yes.
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Berton Henry

Berton Henry deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives his consent to the issuance of this license. Berton Henry

Subscribed and sworn to before me this 17th day of November, 1950

Adah M. Johnson, Clerk Hendricks Circuit Court

Certificate No. A 198163 Application is hereby made for a license for the marriage of **FEMALE**

Cora A. Brooks to Berton Henry

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Cora A. Brooks
2. Color White 3. Where born Near Indianapolis, Ind. (Town, County, State or Country) 4. When born Sept. 18-1867 (Day, Month, Year)
5. Present residence 2441 N. Goodland Indianapolis, Ind.
6. Present occupation At Home Full christian and surname of father William Fadelaker
8. His color White 9. His birthplace Indiana. 10. His occupation Deceased 11. His residence Deceased
12. Full christian and maiden name of mother Charlotte Sulgrove 13. Her color White 14. Her occupation Deceased
15. Her birthplace Indiana Decea 16. Her residence Deceased.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Twice 20. Has such prior marriage, or marriages been dissolved? Yes. 21. If so, how and when? Death (Do not remember first death.) - Nov. 10-1945
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Cora A Brooks

Cora A. Brooks deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. Cora A Brooks

Subscribed and sworn to before me, this 17th day of November, 1950.

Adah M. Johnson, Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Berton Henry
To
Cora A. Brooks

BE IT REMEMBERED, That on this 17th day of November, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Berton Henry and Cora A. Brooks and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 17th day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 17th day of November, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Berton Henry and Cora A. Brooks on the 17th day of November, 1950

Thomas P. Heiney
J.P. Seal

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 22942 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of John Edmond Dailey to Betty June Remsnyder

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is John Edmond Dailey
2. Color wh 3. Where born Plainfield Ind. (Town, County, State or Country) 4. When born Dec 16-1928 (Day, Month, Year)
5. Present residence Plainfield
6. Present occupation Farming 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Mont Dailey 10. His color wh.
11. His birthplace Kentucky 12. His occupation Farmer 13. His residence Dane
14. Full christian and maiden name of mother Gertrude Fremuld 15. Her color wh 16. Her occupation Housewife
17. Her birthplace Indpls. 18. Her residence Dane 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

John Edmond Dailey deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Signature of Applicant John Edmond Dailey

Subscribed and sworn to before me, this 17th day of November, 1950 John Edmond Dailey

Adah M Johnson Clerk Hendricks Circuit Court

Certificate No. A 22940 Application is hereby made for a license for the marriage of Betty June Remsnyder to John Edmond Dailey **FEMALE**

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Betty June Remsnyder
2. Color wh 3. Where born June Hunterford (Town, County, State or Country) 4. When born Sept 11-1925 (Day, Month, Year)
5. Present residence Plainfield
6. Present occupation Office worker 7. Full christian and surname of father Lester Bennet
8. His color wh 9. His birthplace Farmersburg 10. His occupation Mechanic 11. His residence Plainfield
12. Full christian and maiden name of mother Joyce Wenzel 13. Her color wh 14. Her occupation Housewife
15. Her birthplace Coal Bluff, Ind. 16. Her residence Dane.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce June 1949
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Betty June Remsnyder deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Signature of Applicant Betty June Remsnyder

Subscribed and sworn to before me, this 17th day of November, 1950 Betty June Remsnyder

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

John Edmond Dailey
To
Betty June Remsnyder

ss:

Indiana, to-wit: Hendricks County, ss:

BE IT REMEMBERED, That on this 17th day of November, 1950, the following Marriage License was issued, to-wit:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife John Edmond Dailey and Betty June Remsnyder and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 17th day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 24th day of November, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, John Edmond Dailey and Betty June Remsnyder on the 17th day of November, 1950

Robert D. Fish, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 198113

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of John Alvin Thomas to Pauline Pollard

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is John Alvin Thomas
2. Color wh 3. Where born Lincoln Co. Ky. (Town, County, State or Country) 4. When born Dec 12 - 1888 (Day, Month, Year)
5. Present residence 349 W. New York Indpls.
6. Present occupation Spring maker 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father James Thomas 10. His color wh
11. His birthplace Knoxville Tenn 12. His occupation Farmer 13. His residence Dead
14. Full christian and maiden name of mother Mary Chappel 15. Her color wh. 16. Her occupation Housewife.
17. Her birthplace Lincoln Co. Ky. 18. Her residence Dec'd 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Death 1934.
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

John Alvin Thomas deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant × John A Thomas.

× John A Thomas

Subscribed and sworn to before me, this 18th day of November, 1950

Asahel M Johnson Clerk Hendricks Circuit Court

Certificate No A 229482

Pauline Pollard

Application is hereby made for a license for the marriage of

FEMALE

to John A. Thomas

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Pauline Pollard
2. Color wh. 3. Where born Kentucky (Town, County, State or Country) 4. When born May 6 - 1899 (Day, Month, Year)
5. Present residence 1840 W. Minnesota Indpls
6. Present occupation Housewife 7. Full christian and surname of father Thomas Rockey
8. His color wh 9. His birthplace Kentucky 10. His occupation Decd 11. His residence Decd
12. Full christian and maiden name of mother Hattie Lawrence 13. Her color wh. 14. Her occupation Decd
15. Her birthplace Kentucky 16. Her residence Decd
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce 1924. 22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Pauline Pollard deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant × Pauline Pollard

× Pauline Pollard

Subscribed and sworn to before me, this 18th day of November, 1950

Asahel M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

John Alvin Thomas
To
Pauline Pollard

ss:

BE IT REMEMBERED, That on this 18th day of November, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife John Alvin Thomas and Pauline Pollard and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Asahel M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 18th day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 20th day of November, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, John Alvin Thomas and Pauline Pollard on the 18th day of November, 1950

Thomas P. Heaney
J. P. Seal

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 221030

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Leland Ballenger to Eleanor Maxine Johnson

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Leland Ballenger
2. Color wh. 3. Where born Jamestown Ky. (Town, County, State or Country) 4. When born April 13-1929 (Day, Month, Year)
5. Present residence 2510 N. Gladstone Indpls.
6. Present occupation Farmer - Shirley Rauk Co. 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No,
9. Full christian and surname of father Lellie Ballenger 10. His color wh.
11. His birthplace Jamestown Ky. 12. His occupation Farmer 13. His residence Jamestown Ky.
14. Full christian and maiden name of mother Mary Jane Lollis 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Jamestown Ky. 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Leland Ballenger

Leland Ballenger deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Leland Ballenger

Subscribed and sworn to before me, this 18th day of November, 1950

Adah M Johnson Clerk Hendricks Circuit Court

Certificate No. A 233294

Application for Marriage License

FEMALE

Application is hereby made for a license for the marriage of Eleanor Maxine Johnson to Leland Ballenger

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Eleanor Maxine Johnson
2. Color wh. 3. Where born Brown Co. Ind. (Town, County, State or Country) 4. When born Dec 19-1930. (Day, Month, Year)
5. Present residence 2135 N. Drexel Indpls.
6. Present occupation R & A. 7. Full christian and surname of father Charles Moore
8. His color wh. 9. His birthplace Jackson Co. Ind. 10. His occupation Dec'd 11. His residence Dec'd
12. Full christian and maiden name of mother Nayl Otta Truitt 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Jackson Co. Ind. 16. Her residence Danville Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce Nov 1949.
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Eleanor Johnson

Eleanor Maxine Johnson deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Eleanor Johnson

Subscribed and sworn to before me, this 18th day of November, 1950

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Leland Ballenger
To
Eleanor Maxine Johnson

ss:

BE IT REMEMBERED, That on this 18th day of November, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Leland Ballenger and Eleanor Maxine Johnson and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 18th day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 21st day of November, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Leland Ballenger and Eleanor Maxine Johnson on the 18 day of November, 1950

Raymond L. Alber

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A22956 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

James Lee Hedge to Sherry Lee Umbarger

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is James Lee Hedge
2. Color W 3. Where born Indianapolis (Town, County, State or Country) 4. When born July 9-1930 (Day, Month, Year)
5. Present residence 476 So Tennessee, Danville
6. Present occupation Public Service 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Paul Verne Hedge 10. His color W
11. His birthplace North Salem Ind. 12. His occupation Barber 13. His residence 476 So Tennessee
14. Full christian and maiden name of mother Mayme V. Dodge 15. Her color W 16. Her occupation Clerk-Cashier-Teller
17. Her birthplace Montgomery Co Ind. 18. Her residence 476 So Tennessee 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant James Lee Hedge

Mamie V. Hedge deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives Her consent to the issuance of this license. Mamie V Hedge

Subscribed and sworn to before me, this 18th day of November 1950

Adah M Johnson Clerk Hendricks Circuit Court

Certificate No. A22959 Application is hereby made for a license for the marriage of **FEMALE**

Sherry Lee Umbarger to James Lee Hedge

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Sherry Lee Umbarger
2. Color W 3. Where born Walton, Indiana (Town, County, State or Country) 4. When born Feb 8-1933 (Day, Month, Year)
5. Present residence Walton Ind.
6. Present occupation Not employed 7. Full christian and surname of father Kenneth R. Umbarger
8. His color W 9. His birthplace Walton 10. His occupation Salesman 11. His residence Walton
12. Full christian and maiden name of mother Donna Merrick 13. Her color W 14. Her occupation Restaurant
15. Her birthplace Princeton Ind. 16. Her residence Walton Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Sherry Lee Umbarger

Donna Umbarger deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives Her consent to the issuance of this license. Donna Umbarger

Subscribed and sworn to before me, this 18th day of November 1950

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

James Lee Hedge
To
Sherry Lee Umbarger

Indiana, to-wit: Hendricks County, ss:

ss:

BE IT REMEMBERED, That on this 18th day of November, 1950, the following Marriage License was issued, to-wit:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife James Lee Hedge and Sherry Lee Umbarger and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 18th day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 22nd day of November, 1950 the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, James Lee Hedge and Sherry Lee Umbarger on the 22nd day of November, 1950

W. C. Ackenhart, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 22126 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of Earl Oldfather to Opal Castor

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Earl Oldfather
2. Color White 3. Where born Miami County, Ind. (Town, County, State or Country) 4. When born Mar. 30-1908 (Day, Month, Year)
5. Present residence Mooresville, Ind.
6. Present occupation Restaurant Proprietor 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Harry Earl Oldfather 10. His color White
11. His birthplace Tipton, Ind. 12. His occupation Carpenter 13. His residence Kokomo, Ind.
14. Full christian and maiden name of mother Wilda Edith Bowser 15. Her color White 16. Her occupation Housewife
17. Her birthplace Miami County 18. Her residence Peru, Ind, R.R.4 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce 1931
25. Give the names and ages of any minor children of the male applicant from all former marriages Yes, Roy Leroy 11, and Ellis Earl 18.
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names. Partial, Leroy + Ellis Earl
27. Are you supporting them and are you complying with all Court orders issued for their support? Yes, but no Court Order.
28. Is the male contracting party afflicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Earl Oldfather

Earl Oldfather deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives his consent to the issuance of this license. Earl Oldfather

Subscribed and sworn to before me, this 22nd day of November, 19 50.

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A 8497 Application is hereby made for a license for the marriage of Opal Castor to Earl Oldfather **FEMALE**

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Opal Castor.
2. Color White 3. Where born Columbus, Ind. (Town, County, State or Country) 4. When born May 14th 1900 (Day, Month, Year)
5. Present residence Mooresville, Ind.
6. Present occupation Owns a Restaurant 7. Full christian and surname of father Thomas Reeves
8. His color White 9. His birthplace Columbus, Ind. 10. His occupation Deceased 11. His residence Deceased
12. Full christian and maiden name of mother Elizabeth Ellen Brown 13. Her color White 14. Her occupation Deceased
15. Her birthplace Elizabeth, Georgia 16. Her residence Deceased.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Twice 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce 1928; Sept 23-1950
22. Is the female contracting party afflicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Opal Castor

Opal Castor deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. Opal Castor

Subscribed and sworn to before me, this 22nd day of November, 19 50.

Adah M. Johnson, Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Earl Oldfather
To
Opal Castor

ss:

BE IT REMEMBERED, That on this 22nd day of November, 1950 the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Earl Oldfather and Opal Castor and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 22nd day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 27th day of December, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Earl Oldfather and Opal Castor on the 25th day of December, 1950

Rev. Donald J. Durkin

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 36 2 187

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Charles Ray Buchanan to Clara Edna Brogdon

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Charles Ray Buchanan
2. Color wh. 3. Where born Sinclair Ill. (Town, County, State or Country) 4. When born Oct 6-1921 (Day, Month, Year)
5. Present residence 405 E. Ohio Indpls.
6. Present occupation Indpls Railways 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Curtis Buchanan 10. His color wh
11. His birthplace Waverley Ill. 12. His occupation Farmer 13. His residence Jacksonville Ill.
14. Full christian and maiden name of mother Dorothy Dennis 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Waverley, Ill. 18. Her residence Jacksonville Ill. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce, Nov 14-1950.
25. Give the names and ages of any minor children of the male applicant from all former marriages 2. Sandra Kay - 3
Patricia Marie - 5
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names Yes Same
27. Are you supporting them and are you complying with all Court orders issued for their support? Yes
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Charls Ray Buchanan

Charles Ray Buchanan deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Charls Ray Buchanan

Subscribed and sworn to before me, this 22nd day of November, 1950

Arah M Johnson Clerk Hendricks Circuit Court

Certificate No. A 36 2 188

Application for Marriage License

FEMALE

Application is hereby made for a license for the marriage of Clara Edna Brogdon to Charles Ray Buchanan

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Clara Edna Brogdon
2. Color wh. 3. Where born Columbia Ky. (Town, County, State or Country) 4. When born Mar 14-1919 (Day, Month, Year)
5. Present residence 721 Waldemere Indpls.
6. Present occupation Shoe saleswoman 7. Full christian and surname of father John Rigney
8. His color wh. 9. His birthplace Somerset Ky. 10. His occupation Farmer 11. His residence Columbia Ky.
12. Full christian and maiden name of mother Martha Grant 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Adair Co. Ky. 16. Her residence Same.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? July 6-1949 Divorce
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Clara Edna Brogdon

Clara Edna Brogdon deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Clara Edna Brogdon.

Subscribed and sworn to before me, this 22nd day of November, 1950

Arah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Charles Ray Buchanan
To
Clara Edna Brogdon

ss:

BE IT REMEMBERED, That on this 22nd day of November, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Charles Ray Buchanan and Clara Edna Brogdon and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Arah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 22nd day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 7th day of December, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Charles Ray Buchanan and Clara Edna Brogdon on the Third day of December, 1950

Raymond L. Albes

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 233306

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Stanley T. Case to Marijean Mc Donagle

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Stanley T. Case
2. Color White 3. Where born Crawfordsville, Ind. (Town, County, State or Country) 4. When born May 4-1924 (Day, Month, Year)
5. Present residence 137 N. East St., Plainfield, Ind.
6. Present occupation Salesman 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Chester T. Case 10. His color White
11. His birthplace Indiana 12. His occupation Grocery 13. His residence Plainfield, Ind.
14. Full christian and maiden name of mother Mary Catherine McCarthy 15. Her color White 16. Her occupation Housewife
17. Her birthplace Crawfordsville, Ind. 18. Her residence Plainfield, Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? — 23. Has such prior marriage or marriages, been dissolved? — 24. If so, how and when? —
25. Give the names and ages of any minor children of the male applicant from all former marriages —
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names —
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Stanley T. Case

Stanley T. Case deposes and says that has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Stanley T. Case

Subscribed and sworn to before me, this 24th day of November, 1950

Adah M. Johnson, Clerk Hendricks Circuit Court

Certificate No. A 233307

Application for Marriage License

FEMALE

Application is hereby made for a license for the marriage of Marijean Mc Donagle to Stanley T. Case

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Marijean Mc Donagle
2. Color White 3. Where born Indianapolis, Ind. (Town, County, State or Country) 4. When born Nov. 29-1928 (Day, Month, Year)
5. Present residence 137 N. Center St. Plainfield Ind.
6. Present occupation Secretary 7. Full christian and surname of father Charles A. Mc Donagle
8. His color White 9. His birthplace Ohio 10. His occupation Retired 11. His residence Plainfield Ind.
12. Full christian and maiden name of mother Valley Mc Cloud 13. Her color White 14. Her occupation Housewife
15. Her birthplace Ohio, Indiana 16. Her residence Plainfield, Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? — 20. Has such prior marriage, or marriages been dissolved? — 21. If so, how and when? —
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Marijean Mc Donagle

deposes and says that has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Marijean Mc Donagle

Subscribed and sworn to before me, this 24th day of November, 1950.

Adah M. Johnson, Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Stanley T. Case
Marijean Mc Donagle

ss:

BE IT REMEMBERED, That on this 24th day of November, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Stanley T. Case and Marijean Mc Donagle and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 24th day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 30th day of November, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Stanley T. Case and Marijean Mc Donagle on the 25 day of November, 1950

Anthony L. Mc Laughlin

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A14657 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

Harrison Paul Hook to Mildred Marie Kamrat

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Harrison Paul Hook
2. Color wh. 3. Where born Indpls. (Town, County, State or Country) 4. When born Dec 18 - 1898 (Day, Month, Year)
5. Present residence 4820 E. 21st Indpls.
6. Present occupation Molder 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father James Otto Hook 10. His color wh.
11. His birthplace Indiana 12. His occupation Retired 13. His residence Coatesville Ind.
14. Full christian and maiden name of mother Margaret Rocky 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Greenfield Ind. 18. Her residence Indpls. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Death Nov 10-1949
25. Give the names and ages of any minor children of the male applicant from all former marriages No.
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Harrison Paul Hook deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant X Harrison P. Hook

X Harrison P. Hook

Subscribed and sworn to before me, this 24th day of November, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A14656 Application is hereby made for a license for the marriage of **FEMALE**

Mildred Marie Kamrat to Harrison Paul Hook

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Mildred Marie Kamrat
2. Color wh. 3. Where born Greenville, Penna. (Town, County, State or Country) 4. When born Aug 23-1916 (Day, Month, Year)
5. Present residence 408½ Mass. Ave Indpls.
6. Present occupation Assemblyworker 7. Full christian and surname of father Wm Kitch
8. His color wh. 9. His birthplace Greenville Penna 10. His occupation Molder 11. His residence Anderson Ind.
12. Full christian and maiden name of mother Marguerite Mc Call 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Falconer N. Y. 16. Her residence Grand Dis.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Twice 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce - June 26-1936 - Oct 6-1950
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Mildred Marie Kamrat deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant X Mildred Marie Kamrat

X Mildred Marie Kamrat

Subscribed and sworn to before me, this 24th day of November, 1950

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Harrison Paul Hook
To
Mildred Marie Kamrat

ss:

BE IT REMEMBERED, That on this 24th day of November, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Harrison Paul Hook and Mildred Marie Kamrat and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 24th day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 25th day of November, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Harry Hook and Mildred Marie Kamrat on the 25 day of November, 1950

Thomas P. Denney

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 229313

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of George Crittenden Widmer Jr. to Charlotte Rose McDonald

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is George Crittenden Widmer Jr.
2. Color wh. 3. Where born Neelysville Mo. (Town, County, State or Country) 4. When born June 18-1922 (Day, Month, Year)
5. Present residence 3347 No. Neil Jersey Indpls.
6. Present occupation Steam fitter 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father George Crittenden Widmer Sr. 10. His color wh.
11. His birthplace Portsmith Ark. 12. His occupation Oil field worker 13. His residence Dead.
14. Full christian and maiden name of mother Mary Ellis 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Neelysville Mo. 18. Her residence Dead 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

George Crittenden Widmer Jr deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant George Crittenden Widmer Jr.

Subscribed and sworn to before me, this 24th day of November, 19 50

Adah M Johnson Clerk Hendricks Circuit Court

Certificate No. A 221036

Application for Marriage License

FEMALE

Application is hereby made for a license for the marriage of Charlotte Rose McDonald to George Crittenden Widmer Jr.

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the women is Charlotte Rose McDonald
2. Color wh. 3. Where born Clarksville Ind (Town, County, State or Country) 4. When born July 19-1930 (Day, Month, Year)
5. Present residence Bridgeport
6. Present occupation Western Electric. Full christian and surname of father Dennis Lee McDonald
8. His color wh. 9. His birthplace Kentucky 10. His occupation Welder 11. His residence Same
12. Full christian and maiden name of mother Margaret Wiley 13. Her color wh 14. Her occupation Housewife
15. Her birthplace Clarksville Ind. 16. Her residence Same
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes. 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Charlotte Rose McDonald deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Charlotte Rose McDonald

Subscribed and sworn to before me, this 24th day of November, 19 50

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

George Crittenden Widmer Jr. To Charlotte Rose McDonald

Indiana, to-wit: Hendricks County, ss:

ss:

BE IT REMEMBERED, That on this 24th day of November, 19 50, the following Marriage License was issued, to-wit:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife George Crittenden Widmer Jr. and Charlotte Rose McDonald and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 24th day of November, 19 50

(SEAL)

BE IT FURTHER REMEMBERED, That on this 30th day of November, 19 50, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

George Crittenden Widmer Jr. and Charlotte Rose McDonald

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, on the 24th day of November, 19 50

Robert O. Fife, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A231484 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

Paul Robert Smith to Marilyn Elizabeth Harris

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Paul Robert Smith
2. Color W 3. Where born Indianapolis (Town, County, State or Country) 4. When born Feb. 28-1929 (Day, Month, Year)
5. Present residence 1610 Bundy St. Indianapolis
6. Present occupation In Service 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Thomas David Smith 10. His color C
11. His birthplace Kentucky 12. His occupation Truck Driver 13. His residence 5436 Gurley Indpls.
14. Full christian and maiden name of mother Thelma Lester 15. Her color C 16. Her occupation Housewife
17. Her birthplace Kentucky 18. Her residence 1610 Bundy Indpls 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Paul Robert Smith deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Paul R. Smith

Paul R. Smith

Subscribed and sworn to before me, this 24 day of November, 1950

Adah M Johnson Clerk Hendricks Circuit Court

Certificate No. A231485 Application is hereby made for a license for the marriage of **FEMALE**

Marilyn Elizabeth Harris to Paul Robert Smith

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Marilyn Elizabeth Harris
2. Color C 3. Where born Indianapolis Ind. (Town, County, State or Country) 4. When born Feb. 28-1932 (Day, Month, Year)
5. Present residence 2304 Paris Ave. Indianapolis
6. Present occupation Student at Butler 7. Full christian and surname of father Samuel Harris
8. His color C 9. His birthplace Atlanta Ga 10. His occupation Mechanic 11. His residence 2304 Paris Ave.
12. Full christian and maiden name of mother Callie Bell 13. Her color C 14. Her occupation Housewife
15. Her birthplace Indianapolis 16. Her residence 2304 Paris Ave.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Marilyn Elizabeth Harris deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Marilyn E. Harris

Marilyn E. Harris

Subscribed and sworn to before me, this 24th day of November, 1950

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Paul Robert Smith
To
Marilyn Elizabeth Harris

ss:

BE IT REMEMBERED, That on this 24th day of November, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Paul Robert Smith and Marilyn Elizabeth Harris and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 24th day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 27th day of November, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Paul Robert Smith and Marilyn Elizabeth Harris on the 24th day of November, 1950

Raymond L. Alber

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. 2359

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of James Edward Moore to Phyllis Joan Winter

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is James Edward Moore
2. Color W 3. Where born Indianapolis (Town, County, State or Country) 4. When born Oct 29-1931 (Day, Month, Year)
5. Present residence 626 South Whitcomb St. Indianapolis
6. Present occupation USN Mariner 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Herman Stanley Moore 10. His color W
11. His birthplace Monroe Co Ind. 12. His occupation Bookkeeper P.P. 13. His residence 626 So Whitcomb
14. Full christian and maiden name of mother Hazel Rice 15. Her color W 16. Her occupation Housewife
17. Her birthplace Indianapolis 18. Her residence 626 So Whitcomb 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Herman S. Moore deposes and says that He has personal knowledge of the facts above stated and that they and each of them are true, and gives his consent to the issuance of this license.

Signature of Applicant James Edward Moore

Herman S. Moore

Subscribed and sworn to before me, this 24th day of November, 1950

Ledah M Johnson Clerk Hendricks Circuit Court

Certificate No. A233966

Application is hereby made for a license for the marriage of

FEMALE

Phyllis Joan Winter to James Edward Moore

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Phyllis Joan Winter
2. Color W 3. Where born Indianapolis (Town, County, State or Country) 4. When born June 19-1934 (Day, Month, Year)
5. Present residence 5036 West Morris St Indianapolis 6. Present occupation Not employed 7. Full christian and surname of father John Edwin Winter
8. His color W 9. His birthplace St Cloud Minn 10. His occupation Auto Repair 11. His residence 5036 W. Morris
12. Full christian and maiden name of mother Beatrice Green 13. Her color W 14. Her occupation Housewife
15. Her birthplace Indianapolis 16. Her residence 5036 W Morris St.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Beatrice Winter deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license.

Signature of Applicant Phyllis Winter

Beatrice Winter

Subscribed and sworn to before me, this 24th day of November, 1950

Ledah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

James Edward Moore
To
Phyllis Joan Winter

BE IT REMEMBERED, That on this 24th day of November, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife James Edward Moore and Phyllis Joan Winter and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Ledah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 24th day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 27th day of November, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in Marriage, as Husband and Wife, James Edward Moore and Phyllis Joan Winter on the 24th day of November, 1950

Raymond L. Alles

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A229100 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

Beryl Elton Scudder to Hilda Leona Edelman

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Beryl Elton Scudder
2. Color W 3. Where born Indianapolis (Town, County, State or Country) 4. When born Mar 17-1889 (Day, Month, Year)
5. Present residence 5457 Pleasant Run Parkway, Indpls
6. Present occupation Printer 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Michael Thomas Scudder 10. His color W
11. His birthplace Indiana 12. His occupation Molder 13. His residence Deceased
14. Full christian and maiden name of mother Logan Bailey 15. Her color W 16. Her occupation Housewife
17. Her birthplace Southport Ind. 18. Her residence Cleveland, O. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Death - 1947
25. Give the names and ages of any minor children of the male applicant from all former marriages No
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Beryl Elton Scudder

Beryl Elton Scudder deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Beryl Elton Scudder

Subscribed and sworn to before me, this 24th day of November, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A229042 Application is hereby made for a license for the marriage of **FEMALE**

Hilda Leona Edelman to Beryl Elton Scudder

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is: Hilda Leona Edelman
2. Color W 3. Where born Indianapolis (Town, County, State or Country) 4. When born Aug 10-1901 (Day, Month, Year)
5. Present residence 1142 N. Pennsylvania Indianapolis
6. Present occupation Printer 7. Full christian and surname of father Edward Edelman
8. His color W 9. His birthplace Paris France 10. His occupation Baker 11. His residence Deceased
12. Full christian and maiden name of mother Nell Culp 13. Her color W 14. Her occupation Housewife
15. Her birthplace Walesboro, Ind. 16. Her residence Deceased
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Hilda Edelman

Hilda Leona Edelman deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Hilda Edelman

Subscribed and sworn to before me, this 24th day of November, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Beryl Elton Scudder
To
Hilda Leona Edelman

ss:

BE IT REMEMBERED, That on this 24th day of November, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Beryl Elton Scudder and Hilda Leona Edelman and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 24th day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 1st day of December, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Beryl Elton Scudder and Hilda Leona Edelman on the 24th day of November, 1950 Rev. Chas B. Stock

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A221307

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Cecil Lane Stevens to Edith Jane Atkins

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Cecil Lane Stevens
2. Color wh. 3. Where born Hendricks Co Ind (Town, County, State or Country) 4. When born Nov 4-1910 (Day, Month, Year)
5. Present residence 232 N. East St. Plainfield
6. Present occupation Manager Phillips Motor Sales 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Oder Stevens 10. His color wh
11. His birthplace Danville Ind. 12. His occupation None. 13. His residence Same
14. Full christian and maiden name of mother Mamie Lane 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Knoxville Tenn. 18. Her residence Same. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce 1940.
25. Give the names and ages of any minor children of the male applicant from all former marriages No.
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Cecil Lane Stevens deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant X Cecil L Stevens

X Cecil L Stevens

Subscribed and sworn to before me, this 25th day of November, 1950

Adah M Johnson Clerk Hendricks Circuit Court

Certificate No. A220275

Application is hereby made for a license for the marriage of

FEMALE

Edith Jane Atkins to Cecil Lane Stevens

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Edith Jane Atkins
2. Color wh. 3. Where born Ams Ind. (Town, County, State or Country) 4. When born Oct 6-1918 (Day, Month, Year)
5. Present residence Plainfield Ind.
6. Present occupation Inspector Eli Lilly 7. Full christian and surname of father Ezra Ray Atkins
8. His color wh. 9. His birthplace Ams Ind. 10. His occupation Decd 11. His residence Decd.
12. Full christian and maiden name of mother Freda Reeves 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Carbon Ind. 16. Her residence Plainfield Ind
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Divorce 1946.
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Edith Jane Atkins deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant X Edith Jane Atkins

X Edith Jane Atkins

Subscribed and sworn to before me, this 25th day of November, 1950

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Cecil Lane Stevens
To
Edith Jane Atkins

ss:

BE IT REMEMBERED, That on this 25th day of November, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Cecil Lane Stevens and Edith Jane Atkins and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 25th day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 30th day of November, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Cecil Lane Stevens and Edith Jane Atkins on the 25th day of November, 1950

Robert O Fife, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No A 221491

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Riles Morphew to Marjorie Bartlett

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Riles Morphew
2. Color White 3. Where born North Salem, Ind. (Town, County, State or Country) 4. When born Dec 11-1928 (Day, Month, Year)
5. Present residence Roachdale, Ind., R.R.1.
6. Present occupation Farming 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin no.
9. Full christian and surname of father Alta F. Morphew 10. His color White
11. His birthplace Indiana 12. His occupation Retired 13. His residence La Fayette, Ind.
14. Full christian and maiden name of mother Jessie Maude Lamb 15. Her color White 16. Her occupation Housekeeper
17. Her birthplace Indiana 18. Her residence Indianapolis, Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? no. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? — 23. Has such prior marriage or marriages, been dissolved? — 24. If so, how and when? —
25. Give the names and ages of any minor children of the male applicant from all former marriages —
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names —
27. Are you supporting them and are you complying with all Court orders issued for their support? —
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? no.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? no.

State of Indiana, Hendricks County, ss:

Signature of Applicant Riles Morphew

Riles Morphew deposes and says that has personal knowledge of the facts above stated and that they and each of them are true, and gives his consent to the issuance of this license. Riles Morphew

Subscribed and sworn to before me, this 25th day of November, 1950. Adah M. Johnson, Clerk Hendricks Circuit Court

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Certificate No A 221488

Application for Marriage License

FEMALE

Application is hereby made for a license for the marriage of Marjorie Bartlett to Riles Morphew

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Marjorie Bartlett
2. Color White 3. Where born Roachdale, Ind. R.R.1. (Town, County, State or Country) 4. When born May 2nd 1932. (Day, Month, Year)
5. Present residence Roachdale, Ind. R.R.1.
6. Present occupation At Home 7. Full christian and surname of father Otis E. Bartlett
8. His color White 9. His birthplace Indiana 10. His occupation School Janitor 11. His residence Roachdale Ind.
12. Full christian and maiden name of mother Lora Mae Ferris 13. Her color White 14. Her occupation Housewife
15. Her birthplace Indiana 16. Her residence Roachdale, Ind. R.R.1.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? no.
18. Is this her first marriage? Yes 19. If not, how often has she been married? — 20. Has such prior marriage, or marriages been dissolved? — 21. If so, how and when? —
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? no.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? no.

State of Indiana, Hendricks County, ss:

Signature of Applicant Marjorie Bartlett

Marjorie Bartlett deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. Marjorie Bartlett

Subscribed and sworn to before me, this 25th day of November, 1950. Adah M. Johnson, Clerk Hendricks Circuit Court

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State of Indiana, Hendricks County, ss:

Riles Morphew
and
Marjorie Bartlett

ss:

BE IT REMEMBERED, That on this 25th day of November, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Riles Morphew and Marjorie Bartlett and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 25th day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 1st day of December, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Riles Morphew and Marjorie Bartlett on the 25th day of November, 1950

Rev. Ira B. Stock

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A374705

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of John Bonsmer to Hazel Florence Soots

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is John Bonsmer
2. Color W 3. Where born Terre Haute Ind. (Town, County, State or Country) 4. When born Oct 15 - 1892 (Day, Month, Year)
5. Present residence Clayton Ind.
6. Present occupation Well Driver 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father George Bonsmer 10. His color W
11. His birthplace France 12. His occupation Farmer 13. His residence Deceased
14. Full christian and maiden name of mother Ida McDaniel 15. Her color W 16. Her occupation Housewife
17. Her birthplace France 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Death - Jan 8 - 1950
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

John Bonsmer deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant John Bonsmer

Subscribed and sworn to before me, this 30 th day of Nov, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A374706

Application is hereby made for a license for the marriage of

FEMALE

Hazel Florence Soots to John Bonsmer

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Hazel Florence Soots
2. Color W 3. Where born Hendricks Co. Ind. (Town, County, State or Country) 4. When born June 20 - 1897 (Day, Month, Year)
5. Present residence North Salem, Indiana
6. Present occupation Housewife 7. Full christian and surname of father Jessie Martin Kersey
8. His color W 9. His birthplace Indiana 10. His occupation Farmer 11. His residence Deceased
12. Full christian and maiden name of mother Daisy Davidson 13. Her color W 14. Her occupation Housewife
15. Her birthplace Indiana 16. Her residence Deceased
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? By death 1947
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Hazel Florence Soots deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Mrs Hazel F. Soots

Subscribed and sworn to before me, this 30 th day of November, 1950

Mrs Hazel F Soots

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

John Bonsmer
To
Hazel Florence Soots

ss:

BE IT REMEMBERED, That on this 30 th day of November, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife John Bonsmer and Hazel Florence Soots and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 30 th day of November, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 2 nd day of December, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, John Bonsmer and Hazel F. Soots on the 30 th day of November, 1950

Albert W. Mitchell, Pastor, North Christian Ch, Advance, Ind.

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A10314

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Marion F. Luttrell to Doris Catherine Johnson

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Marion Francis Luttrell
2. Color wh. 3. Where born Carthage Ind. (Town, County, State or Country) 4. When born Nov 12-1929 (Day, Month, Year)
5. Present residence Anco
6. Present occupation Machinest 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Homer Luttrell 10. His color wh
11. His birthplace Bedford Ind. 12. His occupation Machinest 13. His residence Anco
14. Full christian and maiden name of mother Gretchen Thompson 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Hazlewood 18. Her residence Anco. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Marion F Luttrell deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant X Marion F Luttrell

X Marion F. Luttrell

Subscribed and sworn to before me, this 2nd day of December, 1950

Ardath M Johnson Clerk Hendricks Circuit Court

Certificate No. A10313

Application for a license for the marriage of

FEMALE

Doris Catherine Johnson to Marion F. Luttrell

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Doris Catherine Johnson
2. Color wh. 3. Where born Coatesville Ind. (Town, County, State or Country) 4. When born July 21-1931 (Day, Month, Year)
5. Present residence Coatesville
6. Present occupation Office work 7. Full christian and surname of father Al Johnson
8. His color wh. 9. His birthplace Coatesville 10. His occupation Farmer 11. His residence Same
12. Full christian and maiden name of mother Ennis Justice 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Ams 16. Her residence Same
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes. 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Doris Catherine Johnson deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant X Doris C. Johnson

X Doris Johnson

Subscribed and sworn to before me, this 2nd day of December, 1950

Ardath M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Marion F. Luttrell
To
Doris Catherine Johnson

ss:

BE IT REMEMBERED, That on this 2nd day of December, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Marion F. Luttrell and Doris Catherine Johnson and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Ardath M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 2nd day of December, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 5th day of December, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Marion F. Luttrell and Doris Catherine Johnson on the 2nd day of December, 1950 Percy W. Thomas

Marriage Record, No. 21, Hendricks County, Indiana

MALE

Certificate No. A36226 **Application for Marriage License**

Application is hereby made for a license for the marriage of Gentry St. John to Betty Mae Powell

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Gentry St. John
2. Color W 3. Where born Morgan Co. Indiana (Town, County, State or Country) 4. When born Aug 29-1907 (Day, Month, Year)
5. Present residence Martinsville, Ind. RR 5
6. Present occupation Farmer 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Walter E. St. John 10. His color W
11. His birthplace Indiana 12. His occupation Farmer 13. His residence Martinsville RR 5
14. Full christian and maiden name of mother Julia Tackett 15. Her color W 16. Her occupation Housewife
17. Her birthplace Indiana 18. Her residence Martinsville RR 5 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce – 1949
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party afflicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Gentry St. John deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Gentry St John

Gentry St John

Subscribed and sworn to before me, this Dec 2 day of , 1950

Adah M Johnson Clerk Hendricks Circuit Court

FEMALE

Certificate No. A362247 Application is hereby made for a license for the marriage of Betty Mae Powell to Gentry St. John

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Betty Mae Powell
2. Color W 3. Where born Morgan Co Ind (Town, County, State or Country) 4. When born Nov 21-1921 (Day, Month, Year)
5. Present residence 589 De Alva (College Ave) Martinsville Ind.
6. Present occupation Housewife 7. Full christian and surname of father Charles A. Powell
8. His color W 9. His birthplace Monroe Co Ind. 10. His occupation Retired 11. His residence Martinsville Ind.
12. Full christian and maiden name of mother Nellie Hartrock 13. Her color W 14. Her occupation Clerk
15. Her birthplace Monroe Co. Ind. 16. Her residence Martinsville Ind
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party afflicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Betty Mae Powell deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Betty Mae Powell

Betty Mae Powell

Subscribed and sworn to before me, this 2nd day of December, 1950

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Gentry St. John
to
Betty Mae Powell

BE IT REMEMBERED, That on this 2nd day of December, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That ~~any~~ person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Gentry St. John and Betty Mae Powell and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 2nd day of December, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 4th day of December, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Gentry St. John and Betty Mae Powell on the 2nd day of December, 1950

Gene Wurman, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 362213

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Robert Hunter Baxter to Theresa Agnes Cox

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Robert Hunter Baxter
2. Color wh. 3. Where born North Carolina (Town, County, State or Country) 4. When born Apr 24-1917. (Day, Month, Year)
5. Present residence 207 N. Illinois Indpls.
6. Present occupation Carpenter 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father James Marvin Baxter 10. His color wh.
11. His birthplace No. Carolina 12. His occupation Dead 13. His residence Dead
14. Full christian and maiden name of mother Mary Florence Heath 15. Her color wh. 16. Her occupation Dead
17. Her birthplace No. Carolina 18. Her residence Dead 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes. 24. If so, how and when? Divorce Feb - 1950.
25. Give the names and ages of any minor children of the male applicant from all former marriages No.
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Robert Hunter Baxter deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Robert H Baxter

Robert H Baxter

Subscribed and sworn to before me, this 5th day of December, 1950

Ardath M Johnson Clerk Hendricks Circuit Court

Certificate No. A 362214

Application is hereby made for a license for the marriage of Theresa Agnes Cox to Robert Hunter Baxter

FEMALE

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Theresa Agnes Cox
2. Color wh. 3. Where born Lebanon Kentucky (Town, County, State or Country) 4. When born Sept 5 - 1914 (Day, Month, Year)
5. Present residence New Palestine Ind. 6. Present occupation Waitress 7. Full christian and surname of father J. C. Stapp.
8. His color wh. 9. His birthplace Lebanon Ky. 10. His occupation Carpenter 11. His residence Lebanon Ky.
12. Full christian and maiden name of mother Alma Manningly 13. Her color wh. 14. Her occupation Dead
15. Her birthplace Kentuckey 16. Her residence Dead
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No. 19. If not, how often has she been married? Once. 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Death
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Theresa Agnes Cox deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Theresa Cox +

Theresa Cox +

Subscribed and sworn to before me, this 5th day of December, 1950

Ardath M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Robert Hunter Baxter
To
Theresa Agnes Cox

ss:

BE IT REMEMBERED, That on this 5th day of December, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Robert Hunter Baxter and Theresa Agnes Cox and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Ardath M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 5th day of December, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 5th day of December, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Robert Hunter Baxter and Theresa Agnes Cox on the 5th day of December, 1950

John Paul Jones, Minister

Marriage Record, No. 21, Hendricks County, Indiana

Application for Marriage License — MALE

Certificate No. A 220167

Application is hereby made for a license for the marriage of Richard Kirk to Elizabeth Hinshaw

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Richard Kirk
2. Color White 3. Where born Monrovia Ind (Town, County, State or Country) 4. When born July 24-1929 (Day, Month, Year)
5. Present residence Monrovia, Ind.
6. Present occupation machanic 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Daniel Kirk 10. His color White
11. His birthplace Monrovia Ind. His occupation machanic 13. His residence Monrovia, Ind.
14. Full christian and maiden name of mother Goldie Lange 15. Her color White 16. Her occupation Housewife
17. Her birthplace Indiana 18. Her residence Monrovia, Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? — 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages —
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names —
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Richard Kirk deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives his consent to the issuance of this license.

Signature of Applicant Richard Kirk

Subscribed and sworn to before me, this 7th day of December, 1950

Cedah M. Johnson, Clerk Hendricks Circuit Court

Application for Marriage License — FEMALE

Certificate No. A 223416

Application is hereby made for a license for the marriage of Elizabeth Hinshaw to Richard Kirk

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Elizabeth Hinshaw
2. Color White 3. Where born Marion County, Ind. (Town, County, State or Country) 4. When born Nov. 4-1931 (Day, Month, Year)
5. Present residence Plainfield, Indiana
6. Present occupation Typist 7. Full christian and surname of father Carleton F. Hinshaw
8. His color White 9. His birthplace Hamilton Co., Ind. 10. His occupation machanic 11. His residence Plainfield, Ind.
12. Full christian and maiden name of mother Rosa Fine 13. Her color White 14. Her occupation Housewife
15. Her birthplace Lebanon, Indiana 16. Her residence Plainfield, Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? — 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Elizabeth Hinshaw deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license.

Signature of Applicant Elizabeth Hinshaw

Subscribed and sworn to before me, this 7th day of December, 1950.

Cedah M. Johnson, Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Richard Kirk, To Elizabeth Hinshaw

ss:

BE IT REMEMBERED, That on this 7th day of December, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Richard Kirk and Elizabeth Hinshaw and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Cedah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 7th day of December, 1950 (SEAL)

BE IT FURTHER REMEMBERED, That on this 18th day of December, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Richard Kirk and Elizabeth Hinshaw on the 8th day of December, 1950

Paul A. Shepard
Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A223159 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of Robert Lee Jenkins to Anna Lorene Williams

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Robert Lee Jenkins
2. Color W 3. Where born Montgomery Co Ind. (Town, County, State or Country) 4. When born Feb. 14-1916 (Day, Month, Year)
5. Present residence Crawfordsville R. 7 - Ind.
6. Present occupation Truck Operator 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Elzner A. Jenkins 10. His color W.
11. His birthplace Clinton Co. Ind. 12. His occupation Railroader 13. His residence Crawfordsville R 7
14. Full christian and maiden name of mother Rosa Ella Skull 15. Her color W 16. Her occupation Housewife
17. Her birthplace Clinton Co Ind. 18. Her residence Crawfordsville R 7 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Robert Lee Jenkins deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Signature of Applicant / Robert Lee Jenkins

Subscribed and sworn to before me, this 8th day of December, 1950

Adah M Johnson Clerk Hendricks Circuit Court

Certificate No. A223160 Application is hereby made for a license for the marriage of **FEMALE**

Anna Lorene Williams to Robert Lee Jenkins

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Anna Lorene Williams
2. Color W 3. Where born Hamblen Co. Tennessee (Town, County, State or Country) 4. When born Oct 7-1924 (Day, Month, Year)
5. Present residence Lyston R.R. Ind.
6. Present occupation Telegraph-Craig's 7. Full christian and surname of father James Howard Williams
8. His color W. 9. His birthplace Tennessee 10. His occupation Farmer 11. His residence Lyston R.R.
12. Full christian and maiden name of mother Mary Ethel Brooks 13. Her color W 14. Her occupation Housewife
15. Her birthplace Tennessee 16. Her residence Lyston R.R.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Anna Lorene Williams deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Signature of Applicant Anna Lorene Williams

Subscribed and sworn to before me, this 8th day of December, 1950

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Robert Lee Jenkins
To
Anna Lorene Williams

ss:

BE IT REMEMBERED, That on this 8th day of December, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Robert Lee Jenkins and Anna Lorene Williams and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 8th day of December, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 18th day of December, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Robert Lee Jenkins and Anna Lorene Williams on the 10th day of December, 1950

Rev. Ira B. Stocks

158

Marriage Record, No. 21, Hendricks County, Indiana

Application for Marriage License

MALE

Certificate No. A10115

Application is hereby made for a license for the marriage of Raymond Kenneth Gardner to Betty Jean McKinney

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Raymond Kenneth Gardner
2. Color W 3. Where born Marion Co. Indiana (Town, County, State or Country) 4. When born Aug 31-1929 (Day, Month, Year)
5. Present residence 226 N. Rural, Indianapolis
6. Present occupation Laborer 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Charles Gardner 10. His color W
11. His birthplace Indiana 12. His occupation Truck Driver 13. His residence Believieu Place Apts
14. Full christian and maiden name of mother Arizona Burton 15. Her color W 16. Her occupation Housewife
17. Her birthplace Indiana 18. Her residence 226 N. Rural 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Raymond K Gardner

Raymond Kenneth Gardner deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Raymond K Gardner

Subscribed and sworn to before me, this 9th day of December, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A10114

Application is hereby made for a license for the marriage of Betty Jean McKinney to Raymond Kenneth Gardner

FEMALE

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Betty Jean McKinney
2. Color W 3. Where born Indianapolis (Town, County, State or Country) 4. When born Oct 19-1931 (Day, Month, Year)
5. Present residence 1246 South Sheffield, Indianapolis
6. Present occupation Adv. Dept. J. C. Penney Co. 7. Full christian and surname of father Gilbert McKinney
8. His color W 9. His birthplace Mooresville Ind. 10. His occupation Bartender 11. His residence 1246 S. Sheffield
12. Full christian and maiden name of mother Lucille Burton 13. Her color W 14. Her occupation At Western Elec.
15. Her birthplace New Castle Indiana 16. Her residence 1246 South Sheffield
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Betty McKinney

Betty Jean McKinney deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Betty McKinney

Subscribed and sworn to before me, this 9th day of December, 1950

Edah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Raymond Kenneth Gardner
To
Betty Jean McKinney

ss:

BE IT REMEMBERED, That on this 9th day of December, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Raymond Kenneth Gardner and Betty Jean McKinney and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Edah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 9th day of December, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 11th day of December, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Raymond Kenneth Gardner and Betty Jean McKinney on the 9th day of December, 1950

Thomas P. Heaney
J. P. Seal

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A12158

Application for Marriage License — MALE

Application is hereby made for a license for the marriage of Theodore Ward Doyal to Madge Lee Landon

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Theodore Ward Doyal
2. Color wh. 3. Where born Hendricks Co. Ind. (Town, County, State or Country) 4. When born Oct 25 - 1909 (Day, Month, Year)
5. Present residence Brownsburg Ind.
6. Present occupation Farmer 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father John Doyal 10. His color wh.
11. His birthplace Boone Co Ind. 12. His occupation Carpenter 13. His residence Hend. Co. Ind.
14. Full christian and maiden name of mother Hattie Davis 15. Her color wh 16. Her occupation Housewife
17. Her birthplace Marion Co. Ind. 18. Her residence Hend. Co. Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce 1948
25. Give the names and ages of any minor children of the male applicant from all former marriages Richard Lee 16 with this affiant
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names Same
27. Are you supporting them and are you complying with all Court orders issued for their support? yes.
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Theodore Ward Doyal deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Theodore Ward Doyal

Theodore Ward Doyal

Subscribed and sworn to before me, this 9th day of December, 1950

Adah M Johnson Clerk Hendricks Circuit Court

Certificate No. A12157

Application is hereby made for a license for the marriage of — FEMALE

Madge Lee Landon to Theodore Ward Doyal

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Madge Lee Landon
2. Color wh. 3. Where born Lehigh Okla. (Town, County, State or Country) 4. When born 6-9-14 (Day, Month, Year)
5. Present residence Arapls. 2031 Broadway.
6. Present occupation Secty. Supv. 7. Full christian and surname of father George Landon
8. His color wh. 9. His birthplace Mo. 10. His occupation Farmer 11. His residence Okla.
12. Full christian and maiden name of mother Joe Kalb 13. Her color wh. 14. Her occupation Teacher
15. Her birthplace Ind. Ter. 16. Her residence Stockton Calif.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? No 19. If not, how often has she been married? Once 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? March 1950 Divorce
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Madge Lee Landon deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Madge Lee Landon.

Madge Lee Landon

Subscribed and sworn to before me, this 9th day of December, 1950

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Theodore Ward Doyal
To
Madge Lee Landon

ss:

BE IT REMEMBERED, That on this 9th day of December, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Theodore Ward Doyal and Madge Lee Landon and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 9th day of December, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 18th day of December, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Theodore Ward Doyal and Madge Lee Landon on the 9th day of December, 1950

Rev Ira B Stock

160

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 198248

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Gene Leroy Snowball to Joyce Ione Phillips

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Gene Leroy Snowball
2. Color wh. 3. Where born Anafls. Ind (Town, County, State or Country) 4. When born March 7-1932. (Day, Month, Year)
5. Present residence Brownsberg Ind.
6. Present occupation Factory worker. 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father George T. Snowball Sr 10. His color wh.
11. His birthplace Evansville Ind. 12. His occupation Carpenter 13. His residence Same
14. Full christian and maiden name of mother Lorena Webb 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Bedford Ind. 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Gene Leroy Snowball

Lorena Snowball deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. Lorena Snowball

Subscribed and sworn to before me, this 15th day of December 1950

Clark M Johnson Clerk Hendricks Circuit Court

Certificate No. A 198247

Application is hereby made for a license for the marriage of

FEMALE

Joyce Ione Phillips to Gene Leroy Snowball

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Joyce Ione Phillips
2. Color wh. 3. Where born Brownsburg Ind. (Town, County, State or Country) 4. When born Nov 14-1930 (Day, Month, Year)
5. Present residence Brownsburg Ind.
6. Present occupation Amer. Legion 7. Full christian and surname of father Dudley P Phillips
8. His color wh. 9. His birthplace Mapleywood. 10. His occupation Deed 11. His residence Deed
12. Full christian and maiden name of mother Edna B. Garner 13. Her color wh. 14. Her occupation State worker
15. Her birthplace Brownsburg Ind. 16. Her residence Brownsburg Ind.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes. 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Joyce Ione Phillips

Joyce Ione Phillips deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives her consent to the issuance of this license. Joyce Ione Phillips

Subscribed and sworn to before me, this 15th day of December, 1950

Clark M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Gene Leroy Snowball
To
Joyce Ione Phillips

ss:

BE IT REMEMBERED, That on this 15th day of December, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Gene Leroy Snowball and Joyce Ione Phillips and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Clark M Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 15th day of December, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 19th day of December, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Gene Leroy Snowball and Joyce Ione Phillips on the 16th day of December, 1950

Lester B. Yearick
Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 37473o

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Robert Joseph Wyatt to Mary Jayne Shugart

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Robert Joseph Wyatt
2. Color wh. 3. Where born Princeton Ind. (Town, County, State or Country) 4. When born Oct 2-1931 (Day, Month, Year)
5. Present residence Pittsboro Ind.
6. Present occupation Allisons 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Paris Robert Wyatt 10. His color wh.
11. His birthplace Gibson Co. Ind. 12. His occupation Lbr. Co. Manager 13. His residence Pittsboro
14. Full christian and maiden name of mother Bessie Clara Ward 15. Her color wh. 16. Her occupation Housewife
17. Her birthplace Gibson Co. Ind. 18. Her residence Same 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant Robert Joseph Wyatt

Paris Robert Wyatt deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives his consent to the issuance of this license. X Paris Robert Wyatt

Subscribed and sworn to before me, this 16th day of December, 19 50

Adah M Johnson Clerk Hendricks Circuit Court

Certificate No. A 374729

Application is hereby made for a license for the marriage of

FEMALE

Mary Jayne Shugart to Robert Joseph Wyatt

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Mary Jayne Shugart
2. Color wh. 3. Where born Noblesville Ind (Town, County, State or Country) 4. When born Dec 23-1931 (Day, Month, Year)
5. Present residence Pittsboro Ind.
6. Present occupation Steno. Ind Bell. 7. Full christian and surname of father Herbert Shugart
8. His color wh. 9. His birthplace Hamilton Co. 10. His occupation Farmer 11. His residence Same.
12. Full christian and maiden name of mother Marie Booth 13. Her color wh 14. Her occupation Housewife
15. Her birthplace Hamilton Co. 16. Her residence Same.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes. 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Signature of Applicant X Mary Jayne Shugart

Mary Jayne Shugart deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. X Mary Jayne Shugart

Subscribed and sworn to before me, this 16th day of December, 19 50

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Robert Joseph Wyatt
To
Mary Jane Shugart

ss:

BE IT REMEMBERED, That on this 16 de day of December, 19 50 the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Robert Joseph Wyatt and Mary Jane Shugart and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 16 de day of December, 19 50

(SEAL)

BE IT FURTHER REMEMBERED, That on this 30 de day of December, 19 50, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Robert Joseph Wyatt and Mary Jane Shugart on the 23rd day of December, 19 50

Rev. Gary Albritten
Baptist Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A23193 **Application for Marriage License** **MALE**

Application is hereby made for a license for the marriage of

Marion McKiney to Marcia Smith

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Marion McKiney
2. Color W 3. Where born Knox Co. Ky (Town, County, State or Country) 4. When born Feb. 28-1889 (Day, Month, Year)
5. Present residence DeWitt, Knox Co. Ky.
6. Present occupation Farmer 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Isaac McKiney 10. His color W
11. His birthplace Unknown North Carolina 12. His occupation Farmer 13. His residence Deceased
14. Full christian and maiden name of mother Marcia Turnbull 15. Her color W 16. Her occupation Housewife
17. Her birthplace Bell Co. Ky 18. Her residence Deceased 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? Twice 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Death - 1949
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Marion McKiney

Marion McKiney deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Marion McKiney

Subscribed and sworn to before me, this 16th day of December, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A23194 Application is hereby made for a license for the marriage of **FEMALE**

Marcia Smith to Marion McKiney

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Marcia Smith
2. Color W 3. Where born Knox Co. Ky (Town, County, State or Country) 4. When born Oct 11-1893 (Day, Month, Year)
5. Present residence R.R. 1 Hall, Indiana
6. Present occupation Housewife 7. Full christian and surname of father Abie Miels
8. His color W 9. His birthplace Knox Co. Ky 10. His occupation Farmer 11. His residence Deceased
12. Full christian and maiden name of mother Celia Jordan 13. Her color W 14. Her occupation Housewife
15. Her birthplace Knox Co. Ky 16. Her residence Deceased
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? twice 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? 1945 - 1950 Divorce
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Martha Smith

Marcia Smith deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Martha Smith

Subscribed and sworn to before me, this 16th day of December, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Marion McKiney
To
Marcia Smith

ss:

BE IT REMEMBERED, That on this 16th day of December, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Marion McKiney and Marcia Smith and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 16th day of December, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 21st day of December, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Marion McKiney and Marcia Smith on the 19th day of December, 1950

Robert Leggett - Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A 36910

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Louis Polesel to Mary Lou Elliott

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Louis Polesel
2. Color wh 3. Where born Indpls. Ind. (Town, County, State or Country) 4. When born June 23-1929 (Day, Month, Year)
5. Present residence 961 No. Denney Indpls.
6. Present occupation Floor covering. 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father August Polesel 10. His color wh.
11. His birthplace Italy 12. His occupation Custodian. school 13. His residence Same
14. Full christian and maiden name of mother Ida Scarpone 15. Her color wh. 16. Her occupation Cook.
17. Her birthplace Italy 18. Her residence Same. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes. 22. If not, how often has he been married?
23. Has such prior marriage or marriages, been dissolved?
24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Louis Polesel deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Louis Polesel X

Louis Polesel X

Subscribed and sworn to before me, this 16th day of December, 1950

Adah M Johnson Clerk Hendricks Circuit Court

Certificate No. A 39009

Application is hereby made for a license for the marriage of

FEMALE

Mary Lou Elliott to Louis Polesel

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Mary Lou Elliott
2. Color wh. 3. Where born Indpls Ind (Town, County, State or Country) 4. When born May 28. 1932 (Day, Month, Year)
5. Present residence 738 No. Denney Indpls.
6. Present occupation None. 7. Full christian and surname of father Gary Elliott
8. His color wh. 9. His birthplace Anderson Ind. 10. His occupation R R Postal Clerk 11. His residence Same
12. Full christian and maiden name of mother Lottie Wickliff 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Indiana 16. Her residence Same.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes. 19. If not, how often has she been married?
20. Has such prior marriage, or marriages been dissolved?
21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Mary Lou Elliott deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Mary Lou Elliott

Mary Lou Elliott

Subscribed and sworn to before me, this 16th day of December, 1950

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Louis Polesel
To
Mary Lou Elliott

ss:

BE IT REMEMBERED, That on this 16th day of December, 1950 the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Louis Polesel and Mary Lou Elliott and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 16th day of December, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 19th day of December, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Louis Polesel and Mary Lou Elliott on the 16th day of December, 1950

Raymond J. Alber
Minister

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A15693

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Edgar Newhall Martin to Christine Hortense Orrell

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Edgar Newhall Martin
2. Color wh. 3. Where born Marion Co. Ind (Town, County, State or Country) 4. When born Aug 13-1909 (Day, Month, Year)
5. Present residence 703 Hiatt - Indpls.
6. Present occupation welder 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No.
9. Full christian and surname of father Edgar Newhall Martin Sr. 10. His color wh
11. His birthplace Wabash Ind. 12. His occupation Sheet metal worker 13. His residence Dec'd
14. Full christian and maiden name of mother Mildred Keller 15. Her color wh. 16. Her occupation Seamstress
17. Her birthplace Indiana 18. Her residence Dec'd 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No. 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No. 22. If not, how often has he been married? Once 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? Divorce 1948.
25. Give the names and ages of any minor children of the male applicant from all former marriages No.
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Edgar Newhall Martin deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Edgar Newhall Martin

Subscribed and sworn to before me, this 16th day of December, 1950

Adah M Johnson Clerk Hendricks Circuit Court

Certificate No. A 15694

Application is hereby made for a license for the marriage of

FEMALE

Christine Hortense Orrell to Edgar Newhall Martin

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Christine Hortense Orrell
2. Color wh. 3. Where born Greencastle Ind (Town, County, State or Country) 4. When born May 8. 1926 (Day, Month, Year)
5. Present residence 830 S. Reviner, Indpls.
6. Present occupation waitress 7. Full christian and surname of father Walter Orrell
8. His color wh. 9. His birthplace Cloverdale 10. His occupation Dec'd 11. His residence Dec'd
12. Full christian and maiden name of mother Dollie Rice 13. Her color wh. 14. Her occupation Housewife
15. Her birthplace Cloverdale Ind. 16. Her residence Same.
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No.
18. Is this her first marriage? Yes. 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No.
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No.

State of Indiana, Hendricks County, ss:

Christine Hortense Orrell deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant X Christine Hortence Orrell

Subscribed and sworn to before me, this 16th day of December, 1950

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Edgar Newhall Martin
To
Christine Hortense Orrell

Indiana, to-wit: Hendricks County, ss:

ss:

BE IT REMEMBERED, That on this 16th day of December, 1950, the following Marriage License was issued, to-wit:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Edgar Newhall Martin and Christine Hortense Orrell and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 16th day of December, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 18th day of December, 1950 the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Edgar Newhall Martin and Christine Hortense Orrell on the 16th day of December, 1950

Rev. Ira B. Stock

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A4429

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of Elmer Roy Dilley to Martha Jane Hess

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Elmer Roy Dilley
2. Color W 3. Where born Greencastle Ind. (Town, County, State or Country) 4. When born July 28-1901 (Day, Month, Year)
5. Present residence 2964 N. Talbot Indianapolis
6. Present occupation Clerk 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Edward Dilley 10. His color W
11. His birthplace Indiana 12. His occupation Farmer 13. His residence Bridgeton Ind.
14. Full christian and maiden name of mother Savanah O'Neal 15. Her color W 16. Her occupation Housewife
17. Her birthplace Indiana 18. Her residence Bridgeton Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? twice 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? 1922 - Divorce ; 1949 - Divorce
25. Give the names and ages of any minor children of the male applicant from all former marriages —
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Elmer Roy Dilley deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Elmer R. Dilley

Subscribed and sworn to before me, this 18th day of December, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A6104

Application is hereby made for a license for the marriage of

FEMALE

Martha Jane Hess to Elmer Roy Dilley

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Martha Jane Hess
2. Color W 3. Where born Sheldon Indiana (Town, County, State or Country) 4. When born Feb 10-1912 (Day, Month, Year)
5. Present residence 2909 Stuart St., Indianapolis
6. Present occupation Typist 7. Full christian and surname of father Arthur T. Hess
8. His color W 9. His birthplace Zanesville O. 10. His occupation Physician 11. His residence Deceased
12. Full christian and maiden name of mother Grace G. Wallwork 13. Her color W 14. Her occupation Housewife
15. Her birthplace Zanesville O. 16. Her residence 2909 Stuart St. Indpls
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Martha Jane Hess deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Martha Jane Hess

Subscribed and sworn to before me, this 18th day of December, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Elmer Roy Dilley
To
Martha Jane Hess

Indiana, to-wit: Hendricks County, ss:

BE IT REMEMBERED, That on this 18th day of December, 1950, the following Marriage License was issued, to-wit:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Elmer Roy Dilley and Martha Jane Hess and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 18th day of December, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 21st day of December, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Elmer Roy Dilley and Martha Jane Hess on the 19th day of December, 1950

Albert R. Ashly

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A10957

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Leland E. Woodward to Mary Bell Boyd

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Leland E. Woodward
2. Color W 3. Where born Hendricks Co. Ind. (Town, County, State or Country) 4. When born Oct 23-1898 (Day, Month, Year)
5. Present residence 302 N. Main St. Plainfield
6. Present occupation Mechanic 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Benjamin Woodward 10. His color W
11. His birthplace Hendricks Co. Ind. 12. His occupation Farmer 13. His residence Deceased
14. Full christian and maiden name of mother Mary E. Allison 15. Her color W 16. Her occupation Housewife
17. Her birthplace Indiana 18. Her residence Plainfield Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? No 22. If not, how often has he been married? three 23. Has such prior marriage or marriages, been dissolved? Yes 24. If so, how and when? 1949 - Divorce
25. Give the names and ages of any minor children of the male applicant from all former marriages No
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Leland E. Woodward deposes and says that he has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Leland E. Woodward

Leland E. Woodward.

Subscribed and sworn to before me, this 23rd day of December, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

Certificate No. A10976

Application is hereby made for a license for the marriage of Mary Bell Boyd to Leland E. Woodward

FEMALE

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Mary Bell Boyd
2. Color W 3. Where born Howard Co. Indiana (Town, County, State or Country) 4. When born July 28-1914 (Day, Month, Year)
5. Present residence Plainfield Indiana
6. Present occupation R.C.A. - Sub assembly 7. Full christian and surname of father Jesse M. Randolph
8. His color W 9. His birthplace Howard Co. Ind. 10. His occupation Contractor 11. His residence Kokomo R5
12. Full christian and maiden name of mother Emma F. Atkisson 13. Her color W 14. Her occupation Housewife
15. Her birthplace Clinton Co. Ind. 16. Her residence Kokomo, R5
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? No 19. If not, how often has she been married? Four times 20. Has such prior marriage, or marriages been dissolved? Yes 21. If so, how and when? Death - 1949
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Mary Bell Boyd deposes and says that she has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license.

Signature of Applicant Mary Bell Boyd

Mary Bell Boyd

Subscribed and sworn to before me, this 23rd day of December, 1950

Adah M. Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Leland E. Woodward
To
Mary Bell Boyd

ss:

BE IT REMEMBERED, That on this 23rd day of December, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Leland E. Woodward and Mary Bell Boyd and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 23rd day of December, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 26th day of December, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Leland E. Woodward and Mary Bell Boyd on the 25th day of December, 1950

Marriage Record, No. 21, Hendricks County, Indiana

Certificate No. A6264

Application for Marriage License

MALE

Application is hereby made for a license for the marriage of

Charles Marvin Crouch to Eleanor Beatrice Poirier

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the man is Charles Marvin Crouch
2. Color W 3. Where born Pecksburg Indiana (Town, County, State or Country) 4. When born April 1-1924 (Day, Month, Year)
5. Present residence 611 N. La Salle St. Indianapolis
6. Present occupation Citizen Usa 7. If no occupation, what means has the male contracting party to support a family?
8. Is the male contracting party of nearer blood kin to the female contracting party than second cousin No
9. Full christian and surname of father Lucien Crouch 10. His color W
11. His birthplace Hendricks Co Ind. 12. His occupation Railroader 13. His residence 234 N. Holmes, Indpls
14. Full christian and maiden name of mother Gladys Bartholomew 15. Her color W 16. Her occupation Housewife
17. Her birthplace Hendricks Co. Ind. 18. Her residence Danville Ind. 19. Has the male contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No 20. If so, is he now able to support a family and likely to so continue?
21. Is this his first marriage? Yes 22. If not, how often has he been married? 23. Has such prior marriage or marriages, been dissolved? 24. If so, how and when?
25. Give the names and ages of any minor children of the male applicant from all former marriages
26. Are any or all of these children either wholly or partially dependent upon you for support? State their names
27. Are you supporting them and are you complying with all Court orders issued for their support?
28. Is the male contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
29. Is he an imbecile, feeble-minded, idiotic or insane, or is he under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Charles M Crouch

Charles Marvin Crouch deposes and says that has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Charles M Crouch

Subscribed and sworn to before me, this 23rd day of December, 1950

Adah M Johnson Clerk Hendricks Circuit Court

Certificate No. A 6263

Application is hereby made for a license for the marriage of

FEMALE

Eleanor Beatrice Poirier to Charles Marvin Crouch

UPON THE FOLLOWING STATEMENT OF FACTS RELATIVE TO SAID PARTIES:

1. The full christian and surname of the woman is Eleanor Beatrice Poirier
2. Color W 3. Where born Indianapolis Ind. (Town, County, State or Country) 4. When born July 14-1920 (Day, Month, Year)
5. Present residence 137 W. Fall Creek Blvd. Indianapolis
6. Present occupation Office of City Controller-Dept. 7. Full christian and surname of father Charles Poirier
8. His color W 9. His birthplace Indianapolis 10. His occupation Newspaper 11. His residence Green Bay, Wisc.
12. Full christian and maiden name of mother Cora Eeder 13. Her color W 14. Her occupation Housewife
15. Her birthplace Osgood, Ind. 16. Her residence 137 West Fall Creek Blvd
17. Has the female contracting party been an inmate of any county asylum or home for indigent persons within the last five years? No
18. Is this her first marriage? Yes 19. If not, how often has she been married? 20. Has such prior marriage, or marriages been dissolved? 21. If so, how and when?
22. Is the female contracting party affiicted with epilepsy, tuberculosis, venereal or any other contagious or transmissible disease? No
23. Is she an imbecile, feeble-minded, idiotic or insane, or is she under guardianship as a person of unsound mind? No

State of Indiana, Hendricks County, ss:

Signature of Applicant Eleanor B. Poirier

Eleanor Beatrice Poirier deposes and says that She has personal knowledge of the facts above stated and that they and each of them are true, and gives consent to the issuance of this license. Eleanor B. Poirier

Subscribed and sworn to before me, this 23rd day of December, 1950

Adah M Johnson Clerk Hendricks Circuit Court

State of Indiana, Hendricks County, ss:

Charles Marvin Crouch
To
Eleanor Beatrice Poirier

ss:

BE IT REMEMBERED, That on this 23rd day of December, 1950, the following Marriage License was issued, to-wit:

Indiana, to-wit: Hendricks County, ss:

TO ALL WHO SHALL SEE THESE PRESENTS—GREETING:

KNOW YE, That any person empowered by law to solemnize Marriages is hereby authorized to join together as Husband and Wife Charles Marvin Crouch and Eleanor Beatrice Poirier and for so doing this shall be his sufficient authority.

IN TESTIMONY WHEREOF, I, Adah M. Johnson, Clerk of the Hendricks Circuit Court, hereunto subscribe my name, and affix the seal of said Court, at Danville, this 23rd day of December, 1950

(SEAL)

BE IT FURTHER REMEMBERED, That on this 27th day of December, 1950, the following certificate was filed in my office, to-wit:

Indiana, to-wit: Hendricks County, ss:

THIS CERTIFIES, That I have joined in marriage, as Husband and Wife, Charles Marvin Crouch and Eleanor Beatrice Poirier on the 23rd day of December, 1950 Rev. Harold N. Mohler