No. 559

APPLICATION FOR MARRIAGE LICENSI

HENDRI	CKS County File 26
MALE Medical Examination Report Dated Quely 5 1915	July 7 1915
0 1 1 1 1 6 2	FEMALE Date of Application
Name of Physician the Melen	Medical Examination Report Dated Scales 5 1946
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "Falso of pretense shall be fined in any sum not exceeding five hundred days prescribes "Falso of the property of the prescribes of the	Name of Physician John & 1762
MALE APPLICANT	atement—Whoever procures the issuance of a license
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False st tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name Middle Jan Just	Draw
Date of Birth Month Day	First APPLICANT
Place of Birth (State or foreign country) . 194.3	Date of Birth Month ann & Land
Indianapoles Ind	Place of Birth (State of foreign country)
Residence Address Residence Address Residence Address Street or R. R. City County State Here State	Residence Address Such Such
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different 5 421 Indigmobile Day - State
Last Marriage Ended By: Death Divorce Annulment	T/ UMMINON JR
	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Co.
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White
	Negro Other (specify)
Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?	Usual Occupation Clerk -
Of Unsound Mind?	Date of birth verified by: Birth Cert. Dudicial Decree
2. Are you under guardianship as a person of unsound mind? 3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons?	Ucher (Specify)
If answer to 3 is "yes" has the cause of such condition been years as	Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?
4. Are you afflicted with a transmissible disease?	Of Unsound Mind?
b. Are you related to the bride closer than second cousin? No (Yes)	2. Are you under guardianship as a person of unsound mind?
7. Are you now under the influence of a narcotic drug?	3. Are you afflicted with a transmissible disease?
8. Are you able to support a family? 9. Are you likely to so continue?	4. Are you related to the groom closer than second cousin?
10. Do you have minor children from one or more former marriages?	o. Are you now under the influence of intoxicating liquer!
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	6. Are you now under the influence of a narcotic drug? 7. Full name of father
Name Age Address	Residence of father (16.)
	Occupation of father Murchart
	Birthplace of father (State or foreign country) Indiana
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Lucille JV Baker
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state) RR 18 Inchilo
11. Full name of father & Charl Males m Sermilton	Occupation of mother Mone Race of mother W.
Residence of father (if deceased so state) R 18 - 2 mples	Birthplace of mother (State or foreign country) Indianafolis
Occupation of father Self Implayed Race of father W.	
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS Bas: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Halhallen 175 Joung	
Residence of mother (if deceased so state) TR 18 - Grand G	Signed you Dyons
Birthplace of mother (State or foreign country) Sent Race of mother	New Address
State of Indiana.	Subscribed and sworn to before me this. And day of Harry 186
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	L'audi viegnes Gerk HENDRICKS Circuit Cours
Signed Amulton	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address RR 18 Box 138 H Indpla	We, the parents, of this applicant hereby give consent for this marriage, If only one parent
subscribed and sworn to before me this the day of July 1962	signs, state facts which render the consent of the other parent unnecessary
ONEDWARD CONTROL COURT C	signs, state races which render the control of the signs, state races which render the control of the signs and the signs are signs.
ONSENT OF PARENTS, PARENT OR GUARDIAN Ve, the parents, of this applicant hereby give consent for this marriage. If only one parent	
gns, state facts which render the consent of the other parent unnecessary	
the consent of the other parent differences.	
	State of Indiana,
tate of Indiana,	County of Codris & John Pether
ounty of HENDRICKS	Signed O Ol H Lyons Mather
Signed Achard Hamilton Father	Signed Direction of Dealer 162
Signed Mother Moscribed and sworn to before me this day of July 1962	Subscribed and sworn to before me this
Clerk	Claude Sugnice
	license having been refused to the above named parties, the
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	A marriage license having been refused to the activated and filed rt by written order issued aday wouting - watered and filed a marriage license to the above named parties.
Jendiech County Craut County	rt by written order issued.
authorized and directs the issualice of	
RETURN OF MARRIAGE LICENSE	
Be It Remembered, there was filed in my office a marriage license	19.6.2, authorizing the joining together as husband and ways
Be It Remembered, there was filed in my office a marriage license Indiana dated the Ith day of July	Jo ann dy
Jane Col	to suit : //
William J. Tresslar he	reby certify muthodist Church County of
thousand nine hundred 1	County, State of
the of Indiana Green Tito Titon of	County, State of
re by me united in marriage as authorized by a marriage license issued for the unity.	A suppose by the Clerk of the Circuit Court of
re by me united in marriage as authorized by a marriage license issued for thunty.	at purpose of I have less
ted this 31 at day of July , 1962	. Signed Welliam of Olysuman
day of	ficial Designation nethodist Carry 19 62
led and recorded in accordance with the laws of the State of Indiana this	Claude Highes Circuit Court
ed -	

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

o		5	6	1
-				_

Date of Application

HENDR	ICKS	County

Medical Examination Report Dated Medical Examination Report Dated Name of Physician ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT FEMALE APPLICANT Name Name Forsy Date of Birth Date of Birth Ce Maiden Name if Different Previous Marital Status: Never Married Number of Previous Marriages Last Marriage Ended By: Previous Marital Status: Never Married Number of Previous Marriages Death Divorce Annulment Death Divorce Annulment Color or Race White Negro Other (specify). Last Marriage Ended By: Usual Occupation Car White Negro | Other | (specify)... Color or Race Date of birth verified by: Birth Cert. | Judigial Decree Usual Occupation privers x recuse Other (Specify)..... Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Date of birth verified by Birth Cert. | Judical Decree Yes 🗌 Other (Specify) Brivers Taccuse Of Unsound Mind? Yes 🗌 2. Are you under guardianship as a person of unsound mind? Yes 🗌 1. Are you now or have you been adjudged, diagnosed or considered as: 3. Are you now or have you been within five (5) years an inmate of a home for indigent persons? An Imbecile? No Yes If answer to 3 is "yes" has the cause of such condition been removed? Yes 🗌 No 🗆 Of Unsound Mind? No Yes 4. Are you afflicted with a transmissible disease? Yes 🗌 2. Are you under guardianship as a person of unsound mind? No Yes 5. Are you related to the bride closer than second cousin? No Yes 🗌 6. Are you now under the influence of intoxicating liquor? Yes 🗌 3. Are you afflicted with a transmissible disease? No Yes 7. Are you now under the influence of a narcotic drug? Yes 🗌 No Yes 4. Are you related to the groom closer than second cousin? 8. Are you able to support a family? No 🗆 9. Are you likely to so continue? 5. Are you now under the influence of intoxicating liquor? New Yes Yes No 🗆 10. Do you have minor children from one or more former marriages? No 🗆 Yes 🗌 6. Are you now under the influence of a narg (If yes, answer questions a, b, c) (a) List their full names, ages and addresses 7. Full name of father f. au Address Residence of father (if deceased so state). (b) Are you supporting or contributing to their support? Yes 🗌 No 🗆 Are you complying with any court order or orders issu Yes No 🗆 11. Full name of father. Birthplace of mother (State or foreign country). Occupation of father State of Indiana, Birthplace of father (State or foreign country) HENDRICKS County of .. 12. Full maiden name of mother Mary Residence of mother (if degeased so state)... Occupation of mother Thruseur Birthplace of mother (State or foreign country). State of Indiana, I depose and state the information given in this application is true and correct HENDRICKS .. Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN Subscribed and sworn to before me this We, the parents, of this applicant hereby give consent for this marriage. If only one parent HENDRICKS CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indiana. HENDRICKS State of Indiana. County of ... HENDRICKS County of Signed. Father Subscribed and sworn to before me this COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the ..authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Be It Remembered there was filed in my office a marriage license issued by the clerk of the findless Circuit Court of Indiana dated the 19ll authorizing the joining, together as husband and wife Be it farther remembered, the following plarriage certificate was filed in my office, to wit: Tritchard hereby certify that on the 24 ± one thousand nine hundred and at Danville State of Indiana, Groom.... County, State of Adexa of Dondricks County, State of Indiana Dated this. Official Designation Filed and recorded in accordance with the laws of the State of Indiana this 16 ch Signed Circuit Court

APPLICATION FOR MARRIAGE LICENSE

MALE	County County	File 26
Medical Examination Report Dated July 5 1962	FEMALE	July 9 196
Name of Physician Alchard Nolen mo	Medical E.	Day of Application
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name First Middle Hacuse Last	Name of Physician Richard	July 5 196:
MALE APPLICANT	statement—Whoever procures the issue	Holen m. D. D.
Name First Middle	the issuance of a license to	marry by any false statement
Date of Birth Day	Name First	LICANT
Place of Birth (State or foreign country)	Date of Birth Month	liddle Last
Residence Address Street or R. R. City		Day Sociel
120 11. Vene Sambele Hend State	Residence Address	800: 1944
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different	City County's
Last Marriage Ended By: Death Divorce Annulment		per marion I
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Numb	er of Prantage V
Usual Occupation Crmus	Last Marriage Ended By: Death Divorce	Annulment
Date of birth verified by: Birth Cert. Judicial Degree	Color or Race	
1. Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation None	(*pecify)
Of Unsound Mind?	Date of birth verified by: Birth Cert. Judicial	
2. Are you under guardianship as a person of unsound mind? No□ Yes□ No□ Yes□ No□ Yes□ home for indigent persons?	Green (Specify)	1010
home for indigent persons? If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Are you now or have you been adjudged, diagnosed An Imbecile?	or considered as:
4. Are you afflicted with a transmissible disease?	Of Unsound Mind?	No [
6. Are you now under the influence of intoxicating liquor?	2. Are you under guardianship as a person of unsour	No []
7. Are you now under the influence of a narcotic drug? No Yes No Yes No Yes	o. Are you afflicted with a transmissible disease?	
9. Are you likely to so continue? Yes No	4. Are you related to the groom closer than second of	ousin?
(If yes, answer questions a, b, c) Yes	5. Are you now under the influence of intoxicating l 6. Are you now under the influence of a narcotic dr	iquor?
(a) List their full names, ages and addresses Name	7. Full name of father Leonge Calv	
Age Address	Residence of father (if deceased so state) na	- Commission of the Commission
	Occupation of father Melianic	Race of father W
(b) Are you supporting or contributing to their support?	Birthplace of father (State or foreign country)	Findigna
(c) Are you complying with any court order or orders issued for their support?	8. Full maiden name of mother Selly sea	ngong
1. Full name of father Kalph Thomas Handen	Residence of mother (if deceased so state)	apes Incl
Residence of father (if deceased so state) Planifuld	Occupation of mother Walls	Race of mother.
Occupation of father Bus Strice Race of father W -	Birthplace of mother (State or foreign country)	
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS Ss: I din	epose and state the information gi
Residence of mother (if deceased so state)		The above and con-
Occupation of mother Race of mother V	Signed	2000
Birthplace of mother (State or foreign country)	New Address	Oreles
tate of Indiana,	Subscribed and sworn to before me this	ay of Junipure , 19
Signed auco Signed auco Signed	A LILLIAN GIE	rk HENDRUCKS Circuit Co
New Address.	CONSENT OF PARENTS, PARENT OR GUARDIAN	
abscribed and sworn to before me this 9th day of July 1962	We, the parents, of this applicant hereby give consent	for this marriage. If only one par
X Laucle Heighlo Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other	parent unnecessary
ONSENT OF PARENTS, PARENT OR GUARDIAN	In miles	1.0
e, the parents, of this applicant hereby give consent for this marriage. If only one parent	ye anai	wee .
ins, state facts which render the consent of the other parent unnecessary		
See Alached	State of Indiana,	
ate of Indiana,	County of HENDRICKS	NAME OF TAXABLE PARTY.
unty of HENDRICKS 88:	Signed	Fath
Signed	Signed	Ouls 6
Signed Mother Secribed and sworn to before me this This day of July 192.	Subscribed and sworn to before me this da	01, 01, 10
Claude Hughest Clerk	XXIII	Jeeght adminion Or
MPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	A marriage license having been refused to t	he above named parties, the
County County County	t by written order issued	and file
authorizes and directs the issuance of	a marriage license to the above named parties.	Said before the first
	THE PARTY OF A PRICE.	Circuit Cou
Be It Remembered, there was filed in my office a marriage license	issued by the clerk of the	agether as husband and wi
Indiana dated the day of day of	, 19, authorizing the joining to	
ano		
at.	County, Sta	te of
of Indiana, Groom	County, Ste	ite of
te of Indiana, Groom	hat the Clerk of the Circuit Court of	
nty.	to pur posses	
ed thisday of, 19	Signed	
Off	The state of the s	***************************************
d and recorded in accordance with the laws of the State of Indiana this	day of	Cler
th accordance with the laws of the State of Indiana this		Circuit Cou

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

	Date of Application
MALE Medical Examination Report Dated My 10-1962	FEMALE Medical Examination Report Dated July 12-62
Name of Physician 9-VI.	Name of Physician 9 W / Jourdan MN
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False s tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	statement-Whoever procures the issuance of a license to marry by any false statement, represen
MALE APPLICANT	FEMALE APPLICANT
Name First Middle Last	Name First Middle
Date of Birth Month Day Rear	Date of Birth Month Day hornburg
June 18 1939	Jul. 14 10441
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	Residence Address Street or R. R. City County State
HOV M. Their Brownsburg and.	Maiden Name if Different Al Adams Provensburg De
Previous Marital Status: Never Married Number of Previous Marriages	
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Cert Judicial Decree	Color or Race White Negro Other (specify)
	Usual Occupation Tronc
Other (Specify)	Date of birth verified by: Birth Cert. Judicial Decree
An Imbecile? Of Unsound Mind? Yes Ves	Other (Specify)
2. Are you under guardianship as a person of unsound mind?	1. Are you now or have you been adjudged, diagnosed or considered as:
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons?	An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed? No Yes 4. Are you afflicted with a transmissible disease?	Of Unsound Mind?
5. Are you related to the bride closer than second cousin?	2. Are you under guardianship as a person of unsound mind? Now Yes
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a narcotic drug? NOT Yes 1	3. Are you afflicted with a transmissible disease?
8. Are you able to support a family? Yes No	4. Are you related to the groom closer than second cousin?
9. Are you likely to so continue?	5. Are you now under the influence of intoxicating liquor? Yes
 Do you have minor children from one or more former marriages? No ☐ Yes ☐ (If yes, answer questions a, b, c) 	6. Are you now under the influence of a narcotic drug? Not Yes
(a) List their full names, ages and addresses	7. Full name of father Eaward Jum im Surjubur
Name Age Address	Residence of father (if deceased so state)
	Occupation of father
_	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother fellows Elou Thomax
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state) 1 Drywnsburg
11. Full name of father Humon well the fell guson	Occupation of mother aundry & Ellanes of mother W
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Alle Race of father Race of father	
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS Sa: I depose and state the information give in this application is true and correct in this application is true and correct in this application.
12. Full maiden name of mother Mary frames much much all	
Residence of mother (if deceased so state)	Signed Janey Le Thouseur
Occupation of mother Race of mother Race of mother	New Address
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of Hely 196
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Claude Tughes Clerk HENDRICKS Circuit Cour
Signed Jem J. Ferguson	Circuit Cour
New Address	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of May 1968	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Church Stugle Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN	the other of the other parent uninecessary
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
signs, state facts which render the consent of the other parent unnecessary	
State of Indian	State of Indiana,
State of Indiana, County of HENDRICKS ss:	County of HENDRICKS ss:
Signed	Signed Father
Signed	Signed Mother
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of
Clerk	day of
COMPLETE IE MARRIAGE LIGENCE TOWNS	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	Γ. A marriage license having been refused to the above named parties, the
of and directs the issuance of	a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE
in the option a marriage licens	se issued by the alone of the
Jan & Flygues July	, 1962, authorizing the joining together as husband and wife
se it juyther remembered, the following marriage certificate was filed in my of	The state of the s
, Jessey (1) fearage	ereby certify that and the 9911
n and a second and	+ Linous notices
State of Indiana, Groom John Juguson o	f Dendrick County of Hedrick,
and, Bride Manay Lee Thomburghof	Lendrick County, State of Indiana,
vere by me united in marriage as authorized by a marriage license issued for the	hat purpose by the Clerk of the Circuit Count of The
Pated this 39th day of July , 1962)
, 19.6	Signed Lester B Many (6)
	fficial Designation Minister
iled and recorded in accordance with the laws of the Co.	

Signed..

Filed and recorded in accordance with the laws of the State of Indiana this......

.... Circuit Court

Form Prescribed By Indiana State Board of Health under Authority

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS County Medical Examination Report Dated_ Date of Application FEMALE Name of Physician 7. 6. 0 -93 Medical Examination Report Dated ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False statement—Whoever procures the issuance of a license to marry by any false statement, representa-FEMALE APPLICANT Previous Marital Status: Never Married Number of Previous Married Death | Divorce | Annulment | Last Marriage Ended By: Previous Marital Status: Never Married Number of Previous Marriages. White Negro Other (specify). Color or Race Last Marriage Ended By: Death | Divorce | Annulment | armine Birth Cert. | Judicial Decree Color or Race White ☐ Negro ☐ Other ☐ (specify). wives Usual Occupation 1. Are you now or have you been adjudged, diagnosed or considered as: Date of birth verified by: Birth Cert. Dudicial Decree Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? Other (Specify) Assures Lecture Yes 🗌 3. Are you now or have you been within five (5) years an inmate of a 1. Are you now or have you been adjudged, diagnosed or considered as: county asylum or No Yes If answer to 3 is "yes" has the cause of such condition been removed? Yes 🗌 4. Are you afflicted with a transmissible disease? Not Yes Of Unsound Mind? 5. Are you related to the bride closer than second cousin? Yes 🗌 2. Are you under guardianship as a person of unsound mind? No - Yes No Yes 6. Are you now under the influence of intoxicating liquor? Yes 🗆 7. Are you now under the influence of a narcotic drug? 3. Are you afflicted with a transmissible disease? No Z Yes Yes 🗌 8. Are you able to support a family? 4. Are you related to the groom closer than second cousin? No Z Yes No 🗆 9. Are you likely to so continue? No Yes [Yes No [5. Are you now under the influence of intoxicating liquor 10. Do you have minor children from one or more former marriages? No 🗌 Yes 🖂 No Yes (If yes, answer questions a, b, c) (a) List their full names, ages and addresses Name Address (b) Are you supporting or contributing to their support? Yes 🗆 No 🗆 (c) Are you complying with any court order or orders issued for their support? Yes No No 11. Full name of father Kay alle Occupation of father Birthplace of father (State or foreign country) State of Indiana, HENDRICKS County of ... nousewife Birthplace of mother (State or foreign country) Winimac State of Indiana. I depose and state the information given in this application is true and correct. County of ... CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent 1962 Claude Hugher ark HENDRICKS T Circuit Court signs, state facts which render the consent of the other parent unnecessary..... CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, HENDRICKS County of State of Indiana, County of HENDRICKS Mother Signed Subscribed and sworn to before me this ... Subscribed and sworn to before me this ... COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, theCourt by written order issued......County... authorizes and directs the issuance of a marriage license to the above named parties. Be It Remembered, there was filed in my office a marriage license issued by the clerk of the duck Circuit Court Be it further remembered, the following marriage certificate was filed in my office, to-wit: Hern Humbling hereby certify that on the 22 nd day of July a Collige Corner Buther Church County of Water by, one thousand nine hundred and 620 State of Indiana, Groom Langie allen Steele of Jarger County, State of and, Bride Carol Louise Stout of The Clerk of the Circuit Court of Them were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of Hendruck County. day of July , 1962 Dated this. Official Designation Theres

Signed

APPLICATION FOR MARRIAGE LICENSE

No. 564

File 26

HENDRICKS County

Date of Application County 1962 MALE FEMALE Medical Examination Report Dated Medical Examination Report Dated Name of Physician_ Name of Physician ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT FEMALE APPLICANT First Date of Birth Date of Birtl Place of Birth (State of Previous Marital Status: Never Married Number of Previous Marriages. Last Marriage Ended By: Death Divorce Annulment Previous Marital Status: Never Married Number of Previous Marriages White | Negro | Color or Race Other (specify)... Last Marriage Ended By: Death | Divorce | Annulment | Usual Occupation Color or Race Negro [Other [(specify)... Date of birth verified by: Birth Cert. Judicial Decree Other (Specify) Alrues Usual Occupation Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Date of birth verified by:

Birth Cert.

Judicial Decree Yes 🗆 Of Unsound Mind? Yes 🗌 Other (Specify)... 2. Are you under guardianship as a person of unsound mind? Yes 🗌 1. Are you now or have you been adjudged, diagnosed or considered as: 3. Are you now or have you been within five (5) years an inmate of a home for indigent persons? An Imbecile? If answer to 3 is "yes" has the cause of such condition been removed? Yes 🗌 No 🗌 Of Unsound Mind? 4. Are you afflicted with a transmissible disease? No 🗗 Yes 🗌 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? No Yes 6. Are you now under the influence of intoxicating liquor? No [Yes 🗌 3. Are you afflicted with a transmissible disease? 7. Are you now under the influence of a narcotic drug? No 🗗 Yes [4. Are you related to the groom closer than second cousin? 8. Are you able to support a family? Yes E No 🗆 9. Are you likely to so continue? Yes No 🗆 5. Are you now under the influence of intoxicating liquor? 10. Do you have minor children from one or more former marriages? No Yes No 🗌 Yes 🗌 6. Are you now under the influence of a narcotic (If yes, answer questions a, b, c) (a) List their full names, ages and addresses 7. Full name of father Name Address Residence of father (if deceased so state) Occupation of father James + Race of fathe Birthplace of father (State or foreign country) (b) Are you supporting or contributing to their support? 8. Full maiden name of mother of Despose Yes 🗌 No 🗆 (c) Are you complying with any court order or orders issued for their support? (if) deceased so state) No 🗆 Occupation of mother susue Birthplace of mother (State or foreign country) Occupation of father. Birthplace of father (State or foreign country) State of Indiana, I depose and state the information given in this application is true and correct. HENDRICKS 12. Full maiden name of mother A D Della County of .. Residence of mother (if deceased so state). Occupation of mother ... housen Birthplace of mother (State or foreign country State of Indiana, and sworn to before me this I depose and state the information given in this application is true and correct. HENDRICKS HENDRICKS .Circuit Court New Address. CONSENT OF PARENTS, PARENT OR GUARDIAN Subscribed and sworn to before me this. We, the parents, of this applicant hereby give consent for this marriage. If only one parent HENDRICKSCircuit Court signs, state facts which render the consent of the other parent unnecessary. CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, State of Indiana, HENDRICKS County of ... HENDRICKS County of Signed Signed. Subscribed and sworn to before me this...... COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the ...authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Lusar Jane Travis Kohert Hill Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the 2/st day of one thousand nine hundred and R. R. 1 , County of Headucks , State of Indiana, Groom Cohest endricke County, State of Andiena and, Bride Ausan of Hendricks County, State of Stateson

Filed and recorded in accordance with the laws of the State of Indiana this......

Signed Designation Remister (Prestien)

34 day of July , 19 62

Signed Claude Hughes

Del Jed Del Ted Del Ted Del Ted

_Father _Mother

Clerk

S, the

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APPLICATION FOR MARRIAGE LICENSI

HENDRI	CKS County File Book 26
MALE	County
Medical Examination Report Dated July 10-196	FEMALE Date of Application
Name of Physician y. T. Workey 90.	Medical Examination D
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False st tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name Middle Light Middle Middle Light Middle Middle	Name of Physician A P
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500 cov.	atement whom
MALE APPLICANT	moever procures the issuance of a license to marry by specific
Name Willer 711 Last	FEMALE Appro-
Date of Birth Day Year	Name FEMALE APPLICANT Middle
Place of Birth (State or foreign country)	Date of Birth Month Lee 3/ Last
Residence Address Street or R. R. Change	Place of Birth (State or foreign country) Day Year 1942
Residence Address Street of R. R. City County State	Residence Address State Ind.
Previous Marital Status: Never Married Number of Previous Marriages	Street or R. R. City
	Maiden Name if Different Seriello - Inapla marin
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status, N
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
Usual Occupation Luik + Bel + Cho	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Cert. Judicial Becree	Color or Race White P Negro D
Other (Specify)	Henel O
1. Are you now or have you been adjudged, diagnosed or considered as:	Aca
Of Unsound Mind? No Yes 2. Are you under guardianship as a person of unsound mind? Yes Yes	Date of birth verified by: Birth Cert. Judicial Decree
3. Are you now or have you been within five (5) years an inmate of a county asylum or	Other (Specify)
If answer to 3 is "yes" has the cause of such condition have	Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?
4. Are you afflicted with a transmissible disease?	Of Unsound Mind?
5. Are you related to the bride closer than second cousin? 6. Are you now under the influence of intoxicating liquor? No Yes	2. Are you under guardianship as a person of unsound mind?
7. Are you now under the influence of a narcotic drue?	3. Are you afflicted with a transmissible disease?
8. Are you able to support a family?	4. Are you related to the groom closer than second cousin?
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriage.	5. Are you now under the influence of intoxicating liquor?
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	6. Are you now under the influence of a parcetic days?
Name	7. Full name of father Charles R Hunter
Age Address	Residence of father (if deceased so state)
	Occupation of father
	Birthplace of father (State or foreign country) Marin Co. Dad.
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother alice may miller
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state) 140 & 108 th & Seatt
11. Full name of father Degle moson.	Occupation of mother A Drass Line 1 Race of mother W
Residence of father (if deceased so state) de ease l	Birthplace of mother (State or foreign country) Thoras Co Dro
Occupation of father Race of father	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country) Tendruck Co and,	State of Indiana,
12. Full maiden name of mother Winora Claise Penrod	County of HENDRICKS 88: in this application is true and corre
Residence of mother (if deceased so state)	Signed Diffie Lee Hunter
Occupation of mother Asusania Race of mother	New Address P.O. Box 101, R.R. 2, Andples 3
Birthplace of mother (State or foreign country) Newton Co Indian	
State of Indiana, I depose and state the information given	Subscribed and sworn to before me this day of HENDRICKS
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Claude Vudes Clerk HENDRICKS Circuit Con
Signed William Wellen Mason	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address Boy # 169 Clayton Drahama	
Subscribed and sworn to before me this day of day of 1963	We, the parents, of this applicant hereby give consent for this marriage. If only one pare
Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN	
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
igns, state facts which render the consent of the other parent unnecessary	
	State of Indiana, County of HENDRICKS
tate of Indiana,	Father Company of the
ounty of HENDRICKS	Signed
Signed Father	Signed
Signed	Subscribed and sworn to before me thisday of
ubscribed and sworn to before me thisday of	Ger
	the state and parties the
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT.	. A marriage license having been refused to the above named parties, and file
Cour	rt by written order issued
authorizes and directs the issuance of	a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE IN AS each Circuit Cour
Be It Remembered, there was filed in my office a marriage license	issued by the clerk of the
it further remembered the fill in a sping contificate was filed in my office	ce, to-wii:
ett further remembered, the following marriage certificate was filed in my offi	reby certify that on the County of Handrecker County of Handrecker
e thousand nine hundred and dist tura at	Clayfor by County State of Jadiana
ate of Indiana, Groom Applicann Hilbus Masson of	County State of Judiana
ate of Indiana, Groom Molliam Helbus Mason of d, Bride Life The Lantes of	Marion Court of Hydricks
Ul me unated in the state of th	at purpose by the Clerk of the Circuit Court of
unty.	O G mill
ited this 2/st day of July , 19 62	Signed Jac Christian Minister 13
	Ticial Designation Christian Mississim, 19 62.
led and recorded in accordance with the laws of the State of Indiana this	33 rd day of July Claude Houghes Cler
and recorded in accordance with the laws of the State of Indiana this	Classific Court Court

Form Prescribed By Indiana State Board of Health under Authority

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No	51	6	6	
Wast.		3	19.4	

.Circuit Court

Chap. 126, Ind. Acts 1905 HENDRICKS County Date of Application MALE FEMALE Medical Examination Report Dated Medical Examination Report Dated Dann Name of Physician_ Name of Physician. ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT FEMALE APPLICANT Date of Birth Residence Addres Maiden Name if Different Number of Previous Marriages Previous Marital Status: Never Married Last Marriage Ended By: Previous Marital Status: Never Married Number of Previous Marriages. Death Divorce Annulment White Negro | Other | (specify)... Last Marriage Ended By: Death Divorce Annulment Darmer Usual Occupation Other [(specify). Color or Race White Negro Date of birth verified by: Birth Cert. Judicial Decree Usual Occupation Other (Specify). Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile? Date of birth verified by Birth Cert. | Judicial Decree Yes 🗆 Of Unsound Mind? Yes 🗌 Other (Specify). 2. Are you under guardianship as a person of unsound mind? Yes [1. Are you now or have you been adjudged, diagnosed or considered as: Are you now or have you been within five (5) years an inmate of a composition indigent persons? unty asylum or No Yes An Imbecile? No Yes If answer to 3 is "yes" has the cause of such condition been removed? Yes 🗌 Of Unsound Mind? No Yes 4. Are you afflicted with a transmissible disease? Yes 🗌 Note 2. Are you under guardianship as a person of unsound mind? No Yes 5. Are you related to the bride closer than second cousin? No Yes 6. Are you now under the influence of intoxicating liquor? Yes 🗌 3. Are you afflicted with a transmissible disease? No. No Yes 7. Are you now under the influence of a narcotic drug? Yes [4. Are you related to the groom closer than second cousin? No Yes 8. Are you able to support a family? Yes No 🗆 9. Are you likely to so continue? 5. Are you now under the influence of intoxicating liquor? Yes No No Yes 10. Do you have minor children from one or more former marriages? No 🗆 Yes 🗌 6. Are you now under the inflience of a narpotic drug! (If yes, answer questions a, b, c) (a) List their full names, ages and addresses 7. Full name of father. Age Address Occupation of father & DUK Birthplace of father (State or foreign country) 8. Full maiden name of mother Lerousa (b) Are you supporting or contributing to their support? Yes 🗆 No 🗆 (c) Are you complying with any court order or orders is their support? Residence of mother (if dec Yes 🗌 No 🗆 Occupation of mother Musewife Residence of father (if deceased so state) Birthplace of mother (State or foreign country) Occupation of father Michanic Birthplace of father (State or foreign count State of Indiana, depose and state the information given this application is true and correct. County of ... 12. Full maiden name of mother Markh Residence of mother (if Seceased so state) Occupation of mother Mouseur New Address Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given this application is true and correct. County of HENDRICKS .Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN New Address ed and sworn to before me this We, the parents, of this applicant hereby give consent for this marriage. If only one parent lande Jugues HENDRICKS . Clerk ... Circuit Court signs, state facts which render the consent of the other parent unnecessary... CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary... State of Indiana. State of Indiana, HENDRICKS County of ... County of ... Father Mothe 1962 19.0 COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, theCountyCourt by written order issued.....authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE, 1962, authorizing the joining together as husband and wife Be it further remembered, the following marriage certificate was filed in my office, to-wit: I, Eleven m. Williamshereby certify that on the..... one thousand nine hundred and State of Indiana, Groom Erment County, State of OndianaCounty, State of were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of Here day Dated this. Official Designation Mesenter Southeast

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE No. 567

HENDRI	CKS County File 26
MALE Medical Examination Report Dated July 11, 1962	July 20 196
Name of Physician 2.13. Lamb	FEMALE Medical Examination Report Dated Date of Application
	Name of Physician & B July 11, 1962
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)"	atement—Whoever process
ALL QUESTIONS MUST BE ANSWERED. Chapter 126. Indiana Acts 1905 prescribes "False st tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name Middle	procures the issuance of a license to marry by any false statement, represent
will a little	Name // First a
Qua 16 Year	Date of Birth Last
Place of Birth (State or foreign country)	month Day Service
Residence Address Hellerest Ort Daniel County States	Place of Birth (State or foreign country) Production of the State of 1942
Previous Marital Status: Never Married Number of Previous Marriages	Residence Address Street of R. R. City County
Sand Burn Dark Co. Die	Maiden Name if Different Work Salem Sund Such
	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	
Date of birth verified by: Birth Ort. Judicial Decree	Color or Race White A
Date of birth verified by: Birth Crt. Judicial Decree	Usual Occupation
1. Are you now or have you been adjudged, diagnosed or considered as:	Vall peresses
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes Yes	Date of birth verified by: Birth Cert. Judicial Decree
3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	No.
4. Are you afflicted with a transmissible disease? No Yes	No 60 V. 7
6. Are you now under the influence of intexicating liquor? 7. Are you now under the influence of a parcetic days?	2. Are you under guardianship as a person of unsound mind? No 4 Yes 3. Are you afflicted with a transmissible disease?
8. Are you able to support a family? Yes No	4. Are you related to the groom closer than second cousin? No Yes
9. Are you likely to so continue? Yes No	5. Are you now under the influence of intoxicating liquor?
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	6. Are you now under the influence of a narcotic daug?
Name Age Address	7. Full name of father Harrison English Laures Residence of father (if deceased so state)
	Occupation of father Constitution Race of Sather W.
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Mary Cathurine Jan Secal
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state) North Salem
11. Full name of father Claudy J. While	Occupation of mother
Residence of father (if deceased so state) W KI 107 386 Sufficience	Birthplace of mother (State or foreign country) Indianapales
Birthplace of father (State or foreign country) Musicular L	State of Indiana, I depose and state the information given
12. Full maiden name of mother Della mal Proctor	County of HENDRICKS 88: in this application is true and correct.
Residence of mother (if Accessed so state) Danville	Signed Harriette Jo Bewes
Occupation of mother City Cleaners Race of mother W.	New Address 23/2 7. Wenn,
Birthplace of mother (State or foreign country) Musseur	Subscribed and sworn to before me this 20lliday of July 19.62
State of Indiana. County of HENDRICKS as: I depose and state the information given in this application is true and correct.	Claude Hughes Clerk HENDRICKS Circuit Court
Signed John a White	
New Address 230 N. Penus.	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworn to before me this 30 they of July, 1922	We, the parents, of this applicant hereby give consent to this matters.
Claude Tregues Gerk MENDRICKS O Circuit Court	signs, state facts which render the constitution
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
signs, state facts which render the consent of the other parent unnecessary	
	State of Indiana, County of HENDRICKS Ss:
State of Indiana, County of HENDRICKS	SignedFather
Signed Father	SignedMother
SignedMother	Subscribed and sworn to before me thisday of, 19
Subscribed and sworn to before me thisday of	Subscribed and stock
Clerk	refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	T. A marriage license having been refused to the above named parties, the arrive by written order issued
	the semitton order issued
in Clubs Office authorizes and directs the issuance of	f a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE	Se issued by the clerk of the country authorizing the joining together as husband and wife
Be It Remembered, there was filed in my office a marriage them	se issued by the clerk of the
added the day of	. Harrelle A
Be it further remembered, the following marriage certificate was filed in my of	fice, to-wit: A gartify that on the 22 day of Artify the country of the state of t
1, Sew Ernest Shumaker +	ereoy of the County of
Oma Al	Liver to the contract of the c
State of Indiana, Groom John A hite of	Jenducks County, State of Indiana, Hendricks County, State of Indiana, hat murpose by the Clerk of the Circuit Court of Hendricks
were by me united in marriage as authorized by a marriage license issued for the County.	
County.	Signed Per Ernest Shamsker
Dated this 22 And day of July 1962	Signed Methodist Minister
	Official Designation, 19.2
Filed and recorded in accordance with the laws of the State of Indiana this	24th day of Clark Angles Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS ____County

by 23, 1962 Date of Application

MALE Medical Examination Report Dated poly 18, 1962	FEMALE Medical Examination Report Dated July 18, 1962
Name of Physician Muart S. Nuncan	Name of Physician Mustle J. Duncan
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False stion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	statement—Whoever procures the issuance of a license to marry by any false statement, representa-
MALE APPLICANT	FEMALE APPLICANT
Name Rumond D. Middle Last	Name Delseis Hiddle Date
Date of Birth Day Year	Date of Birth Month Day Year
Place of Birth (State or foreign/country)	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	Residence Address & Street or R. R. City County State
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name is Different Date - Suchen Sud, - Sucen
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
	Last Marriage Ended By: Death Divorce Annulment
(P) (O'C to	Dast Marriage Ended by. Death Divorce Annument
Date of birth verified by: Birth Cert. Undicial Decree	Color or Race White Negro Other (specify)
Other (Specify) Driver's License	Usual Occupation Unemployed
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Of Unsound Mind?	Date of birth verified by: Birth Cert. Undicial Decree
2. Are you under guardianship as a person of unsound mind? No Yes	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? Yes	An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed? No Yes 4. Are you afflicted with a transmissible disease? Yes	Of Unsound Mind?
5. Are you related to the bride closer than second cousin? 6. Are you now under the influence of intoxicating liquor? No Yes □ Yes □	2. Are you under guardianship as a person of unsound mind? No. Yes 3. Are you afflicted with a transmissible disease? No. Yes Ves. Ves
7. Are you now under the influence of a narcotic drug?	4. Are you related to the groom closer than second cousin? No Yes
9. Are you likely to so continue?	5. Are you now under the influence of intoxicating liquor? Now Yes
10. Do you have minor children from one or more former marriages? (If yes, answer questions a, b, c) (a) List their full remove any and different marriages?	6. Are you now under the influence of a narcotic drug? No Yes
(a) List their full names, ages and addresses Name Age Address	7. Full name of father of the first of the f
	Occupation of father Race of father
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes □ No □	8. Full maiden name of mother Bertha H. Hill
(c) Are you complying with any court order or orders issued for their support? Yes \(\) No \(\)	Residence of mother (if deceased so state) 139 SEast-9: Linton, And
11. Full name of father OSCAN MANAGEN STATE	Occupation of mother Housewife Race of mother White
Occupation of father (if deceased so state) Sultan Bud Race of father While	Birthplace of mother (State or foreign country) Conservelle, Indiana
Birthplace of father (State or foreign country) Kentuckey	State of Indiana, County of HENDRICKS State of Indiana, I depose and state the information given in this application is true and correct.
12. Full maiden name of mother of a minoul	County of HENDRICKS ss: in this application is true and correct.
Occupation of mother (if degeased so state) Similar, Sef.	Signed X Meloris Daley
Birthplace of mother (State or foreign country)	New Address
State of Indiana, County of HENDRICKS Section 1 depose and state the information given in this application is true and correct.	Subscribed and sworn to before me this 23 day of July 19 62
County of HENDRICKS in this application is true and correct. Signed X June 1 June 1	Classe Stuffes Clerk HENDRICKS Circuit Court
New Address.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before/me this 3 day of July 1963	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Claude Toughes Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
signs, state facts which render the consent of the other parent unnecessary	
State of Indiana,	State of Indiana, County of HENDRICKS ss:
County of HENDRICKS	County of HENDRICKS
SignedFather	SignedFather
Signed	Signed Mother
Clerk	Subscribed and sworn to before me thisday of
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER	Clerk
County Co	T. A marriage license having been refused to the above named parties, the
inauthorizes and directs the issuance of	r. A marriage license having been refused to the above named parties, the urt by written order issued
RETURN OF MAPPIACE LICENSE	
the may office a marriage incent	se issued by the clerk of the dendition of the
Raymond M. M. C.	, 19 authorizing the joining together as hysband and wife
I. A continuous entered the following marriage certificate was filed in my of	ffice, to-wit:
one thousand nine hundred and 62	nereby certify that on the 4th day of August.
	at Deswelle , Country of Frenchicks,
and, Bride Allong X. Dally	Gounty, State of Indiana
were by me united in marriage as authorized by a marriage license issued for t	hat purpose by the Clerk of the Circuit County, State of Judiciana
Dated this 6 th day of Assigned 1963	2 DO
	Signed To Deckeyel
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation
of Indiana Unis	Signed Caucle Hughes 119 62
Mark to the same and	Hendrick Clerk
	Circuit Court

.....Circuit Court

20172 St. 序。是. 用 屋 D

Form Prescribed By Indiana State Board of Health under Authority Chap. 126, Ind. Acts 1905

APPLICATION FOR MARRY

Chap. 126, Ind. Acts 1905 FOR	MARRIAGE LICENSE
HENDR	ICKS County File 26
MALE Medical Examination Report Dated Order 20 . G.	July 25 1912
Name of Physician M. M. Ciker	FEMALE Wate of Application
	Medical Examination Report Dated July 20 1962
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "Felso and the fined in any sum not exceeding five hundred 1905 prescribes "Felso and the first state of the f	Name of Physician 7.711. acken mg
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False stion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name Middle Middle	atement—Whoever procures the issuance of a license to marry be
Name Sirst Middle J. b Last	FEMALE Appro-
Date of Birth Month Day Year	Name First Middle Middl
Place of Birth (State or foreign country)	Date of Birth Month Duckay Bridge Last
Residence Address Street or R. R. City	Place of Birth (State or foreign country) Place of Birth (State or foreign country)
RR 1 Box 17 Pettstow Winds State	Residence Address Street Police 200
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different State
Last Marriage Ended By: Death Divorce Annulment	
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages.
Usual Occupation Carpberting Helli	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Norma D. Co.
Other (Specify) fluvers lecense	Usual Occupation Nogro Q (specify)
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?	Date of birth verified by: Birth Cert. Judicial Decree
Of Unsound Mind? No 1 Yes 2 2. Are you under guardianship as a person of unsound mind? No 1 Yes 2	Other (Specify) Judicial Decree
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons?	1. Are you now or have you been adjudged, diagnosed or small at
If answer to 3 is "yes" has the cause of such condition been removed?	No. El V.
4. Are you afflicted with a transmissible disease? No Yes 5. Are you related to the bride closer than second cousin? No Yes	or chaound mind?
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a parcetic days? Yes	2. Are you under guardianship as a person of unsound mind? No Yes 3. Are you afflicted with a transmissible disease?
8. Are you able to support a family? Yes No	4. Are you related to the groom closer than seem !
9. Are you likely to so continue? 10. Do you have minor children from one or more former manifestation.	5. Are you now under the influence of intoxicating liquor? No Yes Yes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	6. Are you now under the influence of a narcotic drug?
Name Age Address	7. Full name of father Jewnon Jew Budges
	Residence of father (if deceased so state) Fraples and Occupation of father level + Duje makes. Race of father 11
	Birthplace of father (State or foreign country) Indiana
(b) Are you supporting or contributing to their support? Yes□ No□	8. Full maiden name of mother. Wilma Snider
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state) Incliplic, And
11. Full name of father figle alexander Pineard	Occupation of mother Lousewife Race of mother W
Residence of father (If deceased so state) Little toro 2nd.	Birthplace of mother (State or foreign country) Lugh.
Occupation of father Just Driver Race of father TV	
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS Sas: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother of mother of the Mooden of	Sandra Bridger
Occupation of mother (if deceased so state) Little Co. Residence of mother (if deceased so state) Company Residence of mother TV	Signed Signed
Birthplace of mother (State or foreign country) Illinois	New Address.
State of Indiana, I depose and state the information given	Subscribed and sworn to before me this and any of HENDRICKS Circuit Court
County of HENDRICKS as this application is true and correct.	Circuit Court
Signed	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address Address Address Subscribed and sworn to before me this 25 The day of Gully 1962	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Claude Highes Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN	See allaghed notarized
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Statements -
signs, state facts which render the consent of the other parent unnecessary	
attached among	State of Indiana.
State of Indiana,	County of
County of HENDRICKS	Signed
Signed Father	Signed A5th July 62
Subscribed and sworn to before me this 25 th day of July 1962	Subscribed and sworn to before me this day of day of the control o
Claude Hughes Clerk	Illud Say
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T A marriage license having been refused to the above named parties, the
nauthorizes and directs the issuance o	f a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSI	AND MARRIAGE CERTIFICATE
Be It Remembered, there was filed in my office a marriage licen	se issued by the clerk of the the joining together as husband and wife
The state of the s	
Ella de la late	nerely certify that P
and nine hundred and	The adole County, State of
Indiana, Groom	County, Source
tate of Indiana, Groom Chall Pinkard nd, Bride Sandra Bulger of Screen by me writed	the Clerk of the Circuit Court of
nd, Bride Sandra Budges of of the series of me united in marriage as authorized by a marriage license issued for the series of t	hat purpose of the
Pated this 3 nel day of aug , 196	2. Signed Rolland
day of	Official Designation (Cestor 1962.

Signed.

Filed and recorded in accordance with the laws of the State of Indiana this

Form Indian	VERNON L. BRIDGES and VELMA S. BRIDGES		
Health Chap.	upon their oaths, despose and say that it		
	SANDRA KAY BRIDGES who was born on polis; affiants further state the	July 9, 1014	
	polis; affiants further state the	t SANDRA KAY is now a resident in the 25 1962	
1	home of aforesaid parents and	SANDHA KAY is now a resident in the	
ALL G	home of aforesaid parents and resi	des at R. R. 2, Box 280, Bridgeport,	
tion or	or hendricks		
Name	Affiants further state	that SANDRA KAY has their expressed	
Date of	and herein written permission to w	red CECIT. DWAYNE DIVINI	
Place o	daughter SANDRA KAY being 16 years	Of and Marine Pinkard, said	
Residen	Further officer	or age at time of affidavit	
Previou	Further affiants sayet	h not	
Last M		1/2000 1 R. 1	
Color o		Vernon L. Bridges	
Usual (Date of	and the second s	Velma & poil	
_ ·	SEY PUSA	Velma S. Bridges	
1. Are	STATE OF INDIANA)		
2. Are 3. Are	S (COUNTY OF MARION)		
hon If a			
4. Are 5. Are	Subscribed and sworn to before	re me this 24th day of July, 1962.	
6. Are 7. Are		1 , 6 , 10	
8. Are 9. Are	My Commission expires 4/18/65	Watery 6. Carson	
10. Do (If (a)		Motary	
(a)			
(b) Are	you complying with any court order or orders issued for	Positions of mathe (1)	
	ame of father Light alexander Pineard	Occupation of mother to use the Race of mother W	
	nce of father (If deceased so state) Jittistoro Gud.	Birthplace of mother (State or foreign country) Just	
	ace of father (State or foreign country) Illinois	State of Indiana, I depose and state the information given	
12. Full ma	aiden name of mother Elizabeth Woolens	County of HENDRICKS in this application is true and correct.	
	tion of mother	Signed Dandra Driaga	
	ace of mother (State or foreign country) Selection	New Address. Subscribed and sworn to before me this 25 than of July 1962	
State of Inc	I depose and state the information given	Claude Sugher Gerk HENDRICKS Circuit Court	
county of	Signed Oscil Campara		
	New Address Italian, Jud.	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
Subscribed	and sworn to before me this 2 May of July 1902 Well Jughes Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary	
CONSENT	OF PARENTS, PARENT OR GUARDIAN	See allaghed notarged	
We, the par	rents, of this applicant hereby give consent for this marriage. If only one parent	sluence -	
signs, state	facts which render the consent of the other parent unnecessary		
atta	ched	State of Indiana, County of	
State of Ind	200	Signed	
	Signed Father	Signed Mother Sulu 62	
Subscribed a	Signed a ligabeth funk and Mother and sworn to before me this 25 th day of July 1962	Subscribed and sworn to before me this 2 day of day of Gerk	
	Claude Hughes Clerk	Ilauca August	
COMPLE	TE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the	
authorizes and directs the issuance of a marriage and company			
DETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATION Circuit Court			
V	and the same of th	na	
1 / 4	elland I Smith	reregy certify + Rottest Church County of	
one thouse	Will Time hundred and	A A A A A A A A A A A A A A A A A A A	
County, State of Indiana, Groom			
and, Bride Sandra Bridges of Strategies of the Circuit Court of Were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of County.			
Dated this 3 rel day of aug , 196 2. Signed Collars			
		Official Designation	
Filed and	recorded in accordance with the laws of the State of Indiana this		

Signed....

The trade of the state of the s

MALE

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS _County Date of Application FEMALE Medical Examination Report Dated Name of Physician.

/endricks Circuit Court

Medical Examination Report Dated Name of Physician ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT FEMALE APPLICANT Name Date of Birth Place of Birth (State/ Residence Addr Previous Marital Status: Never Married Number of Previous Marriages Previous Marital Status: Never Married Number of Previous Marriages. Last Marriage Ended By: Death Divorce Annulment Death Divorce Annulment White Negro Other (specify). Last Marriage Ended By: Color or Race Negro Other (specify) Color or Race Date of birth verified by: Birth Cert. Judicial Decree Other (Specify). Date of birth verified by: Birth Cert. Judicial Decree Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes 🗌 Of Unsound Mind? Other (Specify). No Yes 🗌 2. Are you under guardianship as a person of unsound mind? No Yes 🗌 1. Are you now or have you been adjudged, diagnosed or considered as: 3. Are you now or have you been within five (5) years an inmate of a home for indigent persons? An Imbecile? If answer to 3 is "yes" has the cause of such condition been removed? Yes 🗌 No 🗆 Of Unsound Mind? 4. Are you afflicted with a transmissible disease? No Yes 🗌 2. Are you under guardianship as a person of unsound mind? Yes 🗆 5. Are you related to the bride closer than second cousin? No B Yes 🗌 6. Are you now under the influence of intoxicating liquor? 3. Are you afflicted with a transmissible disease? Yes 🗆 No Yes 🗌 No. 7. Are you now under the influence of a narcotic drug? No-Ex Yes 🗌 4. Are you related to the groom closer than second cousin? Nak Yes Yes 🗌 8. Are you able to support a family? No 🗆 5. Are you now under the influence of intoxicating liquor? 9. Are you likely to so continue? Yes No 🗆 10. Do you have minor children from one or more former marriages? No 🗆 Yes 6. Are you now under the influence of a narcotic (If yes, answer questions a, b, c) 7. Full name of father... (a) List their full names, ages and addresses Name Address Residence of father (if deceased so state) Occupation of father ... Mech am Birthplace of father (State or foreign country) (b) Are you supporting or contributing to their support? Yes 🗆 No 🗆 (c) Are you complying with any court order or of their support? Yes 🗆 No [Occupation of mother Mouseway 11. Full name of father. Residence of father (if deceased so state). Birthplace of mother (State or foreign country). Occupation of father... State of Indiana, I depose and state the information given in this application is true and correct. Birthplace of father (State or foreign country). County of. Residence of mother (if deceased so state) Occupation of mother & actory New Address Birthplace of mother (State or foreign country). State of Indiana. I depose and state the information given in this application is true and correct. ss: HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN 3201 We, the parents, of this applicant hereby give consent for this marriage. If only one parent Subscribed and sworn to before me this HENDRICKS signs, state facts which render the consent of the other parent unnecessary.. CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary..... State of Indiana. HENDRICKS State of Indiana. County of HENDRICKS County of Signed. ...Father Signed. .. Mother Subscribed and sworn to before me this.....day of.....day COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the County Court by written order issued and filed authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE

Be It Remembered, there was filed in my office a marriage license issued by the clerk of the Content Court of Indiana dated the .. authorizing the joining together as husband and wife Kohert I and Baltura ann medden Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the 2rd day of August one thousand nine hundred and, at Olpinfield County of Hendricks, of Hendricks County, State of Indiana and madden of Marion County, State of Indiana Official Designation Christian minister Filed and recorded in accordance with the laws of the State of Indiana this ... Claude Hughes Clerk Signed.

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDR	ICKS County File
MALE Medical Examination Report Dated 7-16 63	July 28-10%
of Contract of the Contract of	FEMALE Daty of Application
Name of Physician O C 2 oltz Sm D	Medical Examination Report Dated 7-16-62
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 process of the control of the con	Name of Physician A. S 24th
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False ston or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name Middle Lost	tatement—Whoever procures the issues of
Name Fiftst Middle	of a license to marry by any false statement, represents
Date of Birth Month Day Justin d	Name First PEMALE APPLICANT
Place of Birth (State or foreign copitry)	Date of Birth Mary Middle
Brown alvers	month, the Calling
Residence Address Street on R. R. Sity County State	Place of Birth (State or foreign country)
Soundleur Sud	Residence Address Street or R. R. Caldina
of frevious Marriages	Maiden Name if Different Kendellwill County
Last Marriage Ended By: Death Divorce Annulment	Previous Maries a
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages.
Usual Occupation That Sulver Deach	Last Marriage Ended By: Death Divorce Annulmora
Date of birth verified by: Birth Cert. Judicial Deerge	Color or Race White News Co.
Other (Specify) Mules Ficeuse	Usual Occupation
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?	Germaniary Nearly
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? Yes Not Yes Yes	Date of birth verified by: Birth Cert. Judicial Decre
3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as:
If answer to 3 is "yes" has the cause of such condition been removed?	
4. Are you afflicted with a transmissible disease? 5. Are you related to the bride closer than second cousin?	Of Unsound Mind?
6. Are you now under the influence of intoxicating liquor?	2. Are you under guardianship as a person of unsound mind?
7. Are you now under the influence of a narcotic drug? 8. Are you able to support a family? Note Yes	3. Are you related with a transmissible disease?
9. Are you likely to so continue?	4. Are you related to the groom closer than second country
10. Do you have minor children from one or more former marriages? (If yes, answer questions a, b, c) Yes	Are you now under the influence of intoxicating liquor? Note: You of the influence of a naroetic drug? Note: You of the influence of a naroetic drug?
(a) List their full names, ages and addresses	7. Full name of father Robert & Calle Note Ven D
Name Age Address	Residence of father (If deceased so state) Lindallville
	Occupation of father Construction Race of father W
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother annie Mang write En hos
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if degreesed so state). New delloylle
11. Full name of father Tloyd 13 Jufford	Occupation of mother housewefe Bace of mother W
Residence of father (if degeased so state) Trownsburg	Birthplace of mother (State or foreign country) Dalarne Reveden
Occupation of father January Amel Race of father W	
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS An: I depose and state the information given in this application is grace and sourcest.
12. Full maiden name of mother of mother for an graff fuller surfice	· Co & Paris
Residence of mother (if deceased, so state)	Signed A Later C. Children
Occupation of mother Tanhway Title Race of mother	New Address
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this and day of Hully 10ff
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Claude Trigles ark HENDRICKS Circuit Court
Signed Thomas & Thufford	
New Address	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this 2 day of MM, 1962	We, the parents, of this applicant hereby give consent for this marriage. If only one person
Chude 7 Jughto Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent sunscenary
CONSENT OF PARENTS, PARENT OR GUARDIAN	
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
signs, state facts which render the consent of the other parent unnecessary	
	State of Indiana,
State of Indiana,	County of
County of HENDRICKS 88:	Signed
Signed Father	Signed Mother
Signed	Subscribed and sworn to before me this day of 15
Subscribed and sworn to before me thisday of	Subscribed and sworn to be the control of the contr
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
Col	net by written order issues
nauthorizes and directs the issuance of	f a marriage license to the above named parties.
TO THE PARTY OF TH	AND MARKIAGE CERTIFICATION OF A STATE COUNTY
Be It Remembered, there was filed in my office a marriage licens	se issued by the clerk of the
Be It Remembered, there was filed in my office a marriage licens of Indiana dated the day of Current	, 1962, authorizing the joining topelar
Indiana dated the day of Cuzut Be it further remembered, the following marriage certificate was filed in my of	Es townt:
Be it further remembered, the following marriage certificate was filed in my of	fice, to-wit: pereby certify that on the 12 th day of August
ne thousand nine hundred and Listing trips	of Brownstring County of Bullion
thousand nine hundred and Alelia - 1110	County, State of manuscript
Indiana, Groom	County, State of
ero by in in in it is to the total	hat purpose by the Clerk of the Circuit Court of
ounty.	4 Prince
ated this 12th day of August , 1962	R. Simed destre Vally
	Official Designation Dunister 10 63
iled and recorded in accordance with the laws of the State of Indiana this	16 ch day of Clase Re Aughre Clork
recorded in accordance with the laws of the State of Indiana this	Signed The dicks Circuit Court

STATE OF INDIANA

HENDRICKS

APPLICATION FOR MARRIAGE LICENSE

County

No	57.	?
File_	26	political de

Date of Application MALE FEMALE Medical Examination Report Dated Medical Examination Report Dated Name of Physician Days Name of Physician ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". FEMALE APPLICANT MALE APPLICANT Name Date of Birth Date of Birtl Place of Birth (State Residence Address Previous Marital Status: Never Married | Number of Previous Marriages Last Marriage Ended By: Death Divorce Annulment Previous Marital Status: Never Married | Number of Previous Marriages... White Negro Death Divorce Annulment Color or Race Last Marriage Ended By: Other (specify) White Negro Other (specify). Date of birth verified by: Birth Cert. Judjejal Decree Usual Occupation Other (Specify) .. 2) rueis Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Birth Cert. | Judicial Decr Yes 🗆 Other (Specify) Of Unsound Mind? Yes 🗌 2. Are you under guardianship as a person of unsound mind? Yes 🗌 1. Are you now or have you been adjudged, diagnosed or considered as: 3. Are you now or have you been within five (5) years an inmate of a home for indigent persons? county asylum or An Imbecile? If answer to 3 is "yes" has the cause of such condition been removed? No 1 Yes 🗌 Of Unsound Mind? 4. Are you afflicted with a transmissible disease? No D Yes 🗌 2. Are you under guardianship as a person of unsound mind? 5. Are you related to the bride closer than second cousin? Yes 🗌 6. Are you now under the influence of intoxicating liquor? No 🗹 Yes 🗌 3. Are you afflicted with a transmissible disease? 7. Are you now under the influence of a narcotic drug? Yes 🗌 4. Are you related to the groom closer than second cousin? 8. Are you able to support a family? No 🗆 9. Are you likely to so continue? 5. Are you now under the influence of intoxicating liquor? No 🗆 10. Do you have minor children from one or more former marriages? No 🗆 Yes 🗆 (If yes, answer questions a, b, c) (a) List their full names, ages and addresses 7. Full name of father. Name Address Residence of father (if deceased so state). Occupation of father. Birthplace of father (State or foreign country) 8. Full maiden name of mother. (b) Are you supporting or contributing to their support? Yes 🗌 No 🗆 (c) Are you complying with any court order or orders issued for their support? Yes 🗆 No 🗆 11. Full name of father toward day Occupation of mother... Residence of father (if deceased so state) Birthplace of mother (State or foreign country) Occupation of father 3752 8 4 State of Indiana, Birthplace of father (State or foreign country). County of ... 12. Full maiden name of mother Jalasev Residence of mother (if deceased so state) 3752 say Gril Occupation of mother Touseurfe Race of mother ... Luhala New Address Birthplace of mother (State or foreign country) State of Indiana. I depose and state the information given in this application is true and correct. HENDRICKS County of .. CONSENT OF PARENTS, PARENT OR GUARDIAN New Address. Subscribed and sworn to before me this ... We, the parents, of this applicant hereby give consent for this marriage. If only one parent 19.62 Toughes HENDRICKS Clerk .Circuit Court signs, state facts which render the consent of the other parent unnecessary. We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana. HENDRICKS State of Indiana, County of HENDRICKS County of Signed ..Father Signed Subscribed and sworn to before me this. Subscribed and sworn to before me this...... COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the County Court by written order issued and filed authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Be It Remembered, there was filed in my office a marriage license issued by the clerk of the fundricks Circuit Court of Indiana dated theday of August, 1962, authorizing the joining together as husband and wife and Blora C. Castelter Be it further remembered, the following marriage certificate was filed in my office, to-wit: 1, Warren a. Tobbins hereby certify that on the 3rd day of August one thousand nine hundred and at Tlainfield , County of Hendricks B. Stout of Hendricks County, State of Indian State of Indiana, Groom .. astetter of Hendricks County, State of Indiana, August , 19 62 Dated this. Official Designation Christian Minister Filed and recorded in accordance with the laws of the State of Indiana this day of August , 19 62. 6 1 7Highes Clerk

APPLICATION FOR MARRIAGE LICENSE

HENDRI	CKS County File Book 26
MALE Medical Examination Report Dated	July 30-191
7 7 196	FEMALE Date of Application
Name of Physician Thomas Walker m.D.	Medical Examination Report Dated July 200-4
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905	Name of Physician Thomas 744
MALE APPLICANT	atement—Whoever procures the issue
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False strion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name First Middle	securice of a license to marry by any false statement, representa-
William Kry Daniel	Name FEMALE APPLICANT
Date of Birth Month Day Year	Middle
Place of Birth (State or foreign country)	Date of Birth Month Cudry & Honne
Residence Address Street of R. R. City Court	Place of Birth (State or Oreign country) Year 19 45
R-18 Bare 153 - Dod to County State	Residence Add Groester mas
Previous Marital Status: Never Married Number of Previous Marriages	Colo Street or R. R. OCity
Washing Redd Bree	Maiden Name if Different Dr. Johnshung Ind
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Name M
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages.
Usual Occupation	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White to
Other (Specify) Defreis Liceuse	Usual Occupation Other (specify)
1. Are you now or have you been adjudged, diagnosed or considered as:	mensels.
Of Unsound Mind?	Date of birth verified by: Birth Cert. Judicial Decree
2. Are you under guardianship as a person of unsound mind?	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county asylum or No Yes	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind?
5. Are you related to the bride closer than second cousin?	No FB V FB
6. Are you now under the influence of intoxicating liquor?	2. Are you under guardianship as a person of unsound mind? No Yes 3. Are you afflicted with a transmissible disease? No Description:
7. Are you now under the influence of a narcotic drug? No Yes	4. Are you related to the groom closer than second cousin?
9. Are you likely to so continue?	5. Are you now under the influence of intoxicating liquor?
10. Do you have minor children from one or more former marriages? No Yes	6. Are you now under the influence of
(a) List their full names, ages and addresses	
Name Age Address	Residence of father (if deceased so state) Brown burg Ind
	Osematica of the
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother Alexand & L' Homans
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for	
their support? Yes No	Residence of mother (if deceased so state) Mountaining & A.
11. Full name of father May and Dove	Occupation of mother Race of mother
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Race of father	State of Indiana,
Birthplace of father (State or foreign country)	County of
12. Full maiden name of mother.	Ocasino Budras L'Homme
Residence of mother (if deceased so state) R 7 8 20 3 3 3 4	Signed Add Red Ballette And Bal
Occupation of mother Race of mother Birthplace of mother (State or foreign country) In drampales and	New Address
State of Indiana	Subscribed and sworn to before me this 20 day of 19.6 1
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Claud, Michie Clerk HENDRICKS Circuit Court
Signed William R Dooling	DANING DANING OF CHARDIAN
New Address	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this 3 day of July 1992	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Olanda Verfos Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN	attacked Courses It To
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Lather & mathers,
signs, state facts which render the consent of the other parent unnecessary	
ittaked consect of mather.	
	State of Indiana, HENDRICKS
State of Indiana,	County of Father
County of HENDRICKS	Signed
Signed Ceased Father	Signed
Signed	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me this	Clerk
Comada Nights Clerk	and to the shave named narties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR!	art by written order issued
III. anthomized and directs life issuance	
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE
RETURN OF MARRIAGE LICENSE	se issued by the clerk of the together as husband and wife
of Indiana de la la comembereo, there was flied in my office a management	, 1962, authorizing the joining together
Be It Remembered, there was filed in my office a marriage licens of Indiana dated the day of and are are	rd Jeanne adulting
Poil ()	11 Ch Jan at Children Committee Comm
	County of
one thousand it is a second of the least	County, State of
State of Indiana Com Italia Pay Delia	County, State of
and, Bride Let a - a Gulley Lottomace of The	County, State of Andread, Lendricks Chat purpose by the Clerk of the Circuit Court of Headers &
were by me united in manifest and by a marriage license to	hat purpose by the Oterno,
County.	2 A Labernethy D + +
Dated this 6th day of August, 196	Signed Minister Isburnache Tressyer Chare
	ficial Design
Filed and	7 th day of Claude Slagher cont
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Offen State Read Circuit Court

Form Prescribed By Indiana State Board of Health under Authority Chap. 126, Ind. Acts 1905 MALE Medical Examina Date of Application Name of Physicia" ALL QUESTIONS MUST First any false statement, representa-Date of Birth Residence Address Previous Marital Status: 1 Last Marriage Ended By: Color or Race Whit Previous Marriages... Usual Occupation Date of birth verified by: pecify). Other (Specify) ... 1. Are you now or have yo An Imbecile? Of Unsound Mind? 2. Are you under guardian 3. Are you now or have y home for indigent person asidered as: If answer to 3 is "yes" h No Yes 4. Are you afflicted with a 5. Are you related to the bi Yes 🗆 6. Are you now under the 7. Are you now under the Yes 🗆 8. Are you able to support 9. Are you likely to so cor No Yes 10. Do you have minor childr No Yes (If yes, answer questions (a) List their full names No | Yes | Rolany Public this 20th day (b) Are you supporting (c) Are you complying w their support? 11. Full name of father Residence of father (if de Occupation of father. State of Indiana, Birthplace of father (State or foreign ss: I depose and state the information given in this application is true and correct. Residence of mother (if deceased so state) K = 18Bags, 53 Jeanne Cludrey & Homme Race of mother w Birthplace of mother (State or foreign country) In de an apulle) 30 day of Subscribed and sworn to before me this... State of Indiana. HENDRICKS O as: I depose and state the information given in this application is true and correct. Cloude Niches. HENDRICKS .. Clerk.Circuit Court William R Doolin CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent Subscribed and sworn to before me this 30 day of signs, state facts which render the consent of the other parent unnecessary Claude I trefes. Cork HENDRICKS attached consent CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent Lather & math signs, state facts which render the consent of the other parent unnecessary... State of Indiana, HENDRICKS County of State of Indiana, HENDRICKS County of Signed..... Signed Subscribed and sworn to before me this Subscribed and sworn to before me this. COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the in (1) County County County Court by written order issued July 30-1962 and filed in Court Court authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE, 19.62, authorizing the joining together as husband and wife Be it further remembered, the following marriage certificate was filed in my office, is wit: hereby certify that on the 4th at Indiana polish , County of Malian, 1, ahra K. alernethy State of Indiana, Groom Hilliam Pay Delia of Haddisks County, State of Indiana, Je and Guddey & Hommes of Headricks County, State of Sadiana, were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of Mendricks. day of Muguett, 19 62. Official Designation Minister Jahren aster Dated this. Filed and recorded in accordance with the laws of the State of Indiana this ... _____Circuit Court

- 7-26-62 Form Prescribed By I do heisty give my concent Indiana State Board of Health under Authority Chap. 126, Ind. Acts 1905 To my son William Roy Doslin MALE Medical Examina to get married. Date of Application Name of Physicia ALL QUESTIONS MUST tion or pretense shall be f duth E. Liville by any false statement, representa QQ18 Boy 153 Date of Birth Indianapolis 24 Indiana . Previous Marital Status: 1 Last Marriage Ended By: Subscribed and sworn to before Color or Race Previous Marriages... Usual Occupation Annulment [me, a notary Public, The 26th. Date of birth verified by: Other (Specify) 1. Are you now or have yo An Imbecile? Of Unsound Mind? 2. Are you under guardian 3. Are you now or have y home for indigent perso Frances E. Weller If answer to 3 is "yes" 1 No 🔃 Yes 🗆 4. Are you afflicted with a 5. Are you related to the b No 🔃 Yes 🗌 6. Are you now under the 7. Are you now under the 8. Are you able to support 9. Are you likely to so cor 2 10. Do you have minor childs No 🗂 Yes 🗆 (If yes, answer questions (a) List their full names ne Name Are you complying w their support? 11. Full name of father Residence of father (if d Occupation of father. ss: I depose and state the information given in this application is true and correct. Residence of mother (if deceased so state) K # 18Bdes 53 and fl Race of mother W Occupation of mother Birthplace of mother (State or foreign country) In diamage allel 30 day of ... 19.6.6 State of Indiana. as: I depose and state the information given in this application is true and correct. HENDRICKS William R Dooling CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent Subscribed and sworn to before me this 30 day of signs, state facts which render the consent of the other parent unnecessary... HENDRICKS Claude I tropes ark Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN Lather & math We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. ittacked consent of mather. State of Indiana, HENDRICKS State of Indiana. HENDRICKS County of.... Mother Father Signed..... Mother Subscribed and sworn to before me this... Signed... Subscribed and sworn to before me this. COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the in (1) County County Court by written order issued July 30-1962 and filed in Carrier Court authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE, 19.62, authorizing the joining together as husband and wife Be it further remembered, the following marriage certificate was filed in my office, is wit: hereby certify that on the 4 th at Dediana polis , County of Marian, 1, Stohan K. allernstoney Hadricks County, State of Indiana one thousand nine hundred and Stating and, Bride Je dance County, State of Dendricked County, State of Hendricked, were by me were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of County. day of Muguett, 19 62. Official Designation Minusten, Inbernach Pres Dated this. day of augus Filed and recorded in accordance with the laws of the State of Indiana this Circuit Court Signed ...

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No	574	
File	26	
7	-31-62	H
	Data of Annling!	

MALE Medical Examination Report Dated 7-30-62	FEMALE Medical Examination Report Dated 7 - 30 - 6 2
Name of Physician S. H. Ellis m D.	Name of Physician S. H. Ellis, M. D.
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)"	statement—Whoever procures the issuance of a license to marry by any false statement, represents
MALE APPLICANT	FEMALE APPLICANT
Name 10 Pirst Middle Last	Name First & Middle 1/ Last
Date of Birth Month Day Year	Date of Birth Month Day (Year
Place of Birth (State of foreign country)	aug 19 1946
Lebanon Ind.	Place of Birth (State of foreign Jountry)
Residence Address Breet or R. R. City Hends Island.	Residence Address Street or R.R. City County State
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different
Last Marriage Ended By: Death Divorce Annulment	Programs Manifel Status, News Manifel Ch. V
	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation ally Wall Construction	Color or Race White Negro Other (specify)
Date of birth verified by:	Usual Occupation Student
Other (Specify) All Clerke 1. Are you now or have you been adjudged, diagnosed or considered as:	
An Imbecile? Of Unsound Mind? No Yes Yes Yes Yes	Date of birth verified by: Birth Cert. Judicial Decree
2. Are you under guardianship as a person of unsound mind?	1. Are you now or have you been adjudged, diagnosed or considered as:
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? No ☐ Yes ☐	An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed? No Yes 4. Are you afflicted with a transmissible disease?	Of Unsound Mind?
5. Are you affected with a transmissible disease? No \(\bigverightarrow\) Yes \(\bigverightarrow\) 5. Are you related to the bride closer than second cousin? Yes \(\bigverightarrow\)	2. Are you under guardianship as a person of unsound mind? No Ves
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a narcotic drug? No Yes Yes Yes Yes Yes Yes Yes Ye	3. Are you afflicted with a transmissible disease?
8. Are you able to support a family? Yes Vo	4. Are you related to the groom closer than second cousin? No Ves
9. Are you likely to so continue? Yes No	5. Are you now under the influence of intoxicating liquor? No Q Yes
10. Do you have minor children from one or more former marriages? (If yes, answer questions a, b, c) Yes	6. Are you now under the influence of a narcotic drug? No Yes
(a) List their full names, ages and addresses Name Age Address	7. Full name of father Lalgh all Joseph
Name Age Address	Residence of father (if deceased so state)
	Occupation of father American Race of father American Race of father States of father State
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for	8. Full maiden name of mother William Strong
their supports Many search of orders issued for Yes No	Residence of mother (if deceased so state)
11. Full name of fathers and the same to t	Occupation of mother to useful, Race of mother
Residence of father (if deceased so state).	Birthplace of mother (State or foreign country) Hinds Co. Ind
Occupation of father Mac Mace of father A	State of Indiana,
Birthplace of father (State or foreign country) (1900) (6 July). 12. Full maiden name of mother Millie Wills)	County of HENDRICKS Ss: I depose and state the information given in this application is true and correct.
Residence of mother (if deceased so state) R/ Leston	la they black
Occupation of mother MAG. Race of mother W.	Signed 120 1 Care
Birthplace of mother (State or foreign country Lends. Co	New Address.
State of Indiana,	Subscribed and sworn to before me this day of 19
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Claude Hughle Clerk HENDRICKS Circuit Court
Signed & male yames Cooper	
New Address 5	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this 3 day of July 1962	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Fathers allached
signs state facts which render the consent of the other parent unnecessary.	
Tathers consent allached -	
F Selection Control	State of Indiana,
State of Indiana,	County of HENDRICKS
County of HENDRICKS ss:	Signed
Signed Tolli R Rosensky Father	Signed Ar Octto Alanan
Signed Mother Subscribed and sworn to before me this day of July	201 Only
Clayele Fund	Subscribed and sworn to before me this. 3 day of day of 1962
Jerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
000000000000000000000000000000000000000	urt by written order issued stood vill I m Carl Herm & and Glad
authorizes and directs the issuance o	f a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSI	E AND MARRIAGE CERTIFICATE
the first the my office a marriage licen	se issued by the clerk of the
Donald James Criber O 1	, 1962 authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my o	fice to wit.
, South the lake De X Othery	hereby certify that on the 3/st day of July
the tipe the state of the tipe of tipe of tipe of the tipe of tipe	it distant
State of Indiana, Groom Aprall James Coper	of the contraction of the contra
and, Bride Lant Lee Houses of	Hendriches County, State of Indiana,
County.	that purpose by the Clerk of the Circuit Court of Headicks
Pated this 3/st day of July 106	Da and the state of the state o
, 19 %	Signed Clarence L. Jollan
Filed and manufact in the control of	Official Designation Marister
iled and recorded in accordance with the laws of the State of Indiana this	2 nd day of Classist 10 62
	21 . [[]] 0 9 [] 1

STATE OF INDIANA APPLICATION FOR MAI

Chap. 126, Ind. Acts 1905 APPLICATION FOR	MARRIAGE LICENSE No. 575
MALE	RICKS County File 26
Medical Examination Report Dated	-Anly 31, 190.
Name of Physician Thomas P.C.	FEMALE Date of Application
	Medical Examination Report Dated July 23 - 196
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name Bollow Last	Statement W. Statement & Charle M. S.
MALE APPLICANT	Whoever procures the issuance of a license to marry by
	Name First FEMALE APPLICANT
Date of Birth Month Day Year	- CAL. O D MIAD.
Place of Birth (State or foreign country)	Date of Birth Day Johnson
Residence Address Street or R. R. City County State	Place of Birth (State or foreign country) Year 1943
Claylon Henduck In	Residence Address Street of R. B.
Trevious Marriages	Maiden Name if Different Lessburg and Name State
Last Marriage Ended By: Death Divorce Annulment Annulment	- Johnston
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
Usual Occupation Labour	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Negro C
Other (Specify) Privers Filense	Usual Occupation Unemplaced (specify)
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Of Unsound Mind? Yes	Date of birth verified by: Birth Cert. Judicial Decree
No 50	other (Specify) Newers And
2. Are you under guardianship as a person of unsound mind? 3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? If answer to 3 is "yes" has the cause of such condition here.	1. Are you now or have you been adjudged, disgressed
4. Are you afflicted with a transmissible disease?	An Imbecile? Of Unsound Mind?
5. Are you related to the bride closer than second cousin?	2. Are you under guardianship as a person of unsound mind?
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a parcetic drug? No Yes	3. Are you afflicted with a transmissible disease?
8. Are you able to support a family?	4. Are you related to the groom closer than second cousin?
9. Are you have minor children from one or more former marriages?	5. Are you now under the influence of intoxicating liquor?
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	6. Are you now under the influence of a narcotic drug?
Name Age Address	7. Full name of father Lewis Johnson &
	Residence of father (if deceased so state)
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support?	8. Full maiden name of mother Dorothy Dorone Con
(c) Are you complying with any court order or orders issued for their support? Yes No The Yes No The Yes No Their support?	Residence of mother (if deceased so state)
11. Full name of father. Alva Munk	Occupation of mother to use will Race of mother white
Residence of father (if deceased so state) R. R. 2 - Clainton, Ind.	Birthplace of mother (State or foreign country). Indiana
Occupation of father Tarmer Race of father White	
Birthplace of father (State or foreign country) Kentucky	State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother.	Paral Sur Dear
Residence of mother (if deceased so state) Occupation of mother Race of mother Culit	Signed X Wayn Ture 4750 000
Birthplace of mother (State or foreign country) Kentuckey	New Address
State of Indiana, I depose and state the information given	Subscribed and sworn to before me this day of 19 19 19 19 19 19 19 19 19 19 19 19 19
County of HENDRICKS ss: in this application is true and correct.	Claude Thughes Gerk HENDRICKS Circuit Court
Signed Company	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworn to before me this day of HENDRICKS Clause Country	signs, state facts which render the consent of the other parent unnecessary
Circuit Court	signs, state facts which could be a second state of the second sta
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
signs, state facts which render the consent of the other parent unnecessary	
	State of Indiana, HENDRICKS
State of Indiana, County of HENDRICKS	County of Father
	Signed
Signed Father Signed Mother	Signed
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of
Clerk	
COMPLETE AT ALL COLUMN OF COLUMN	A marriage license having been refused to the above named parties, the
nauthorizes and directs the issuance	of a marriage license to the above named parties.
Be It Remembered, there was filed in my office a marriage lices	use issued by the clerk of the Mindre the husband and wife
Be It Remembered, there was filed in my office a marriage licer of Indiana dated the day of	, 1962, authorizing the joining together as husband
Be it further remembered, the following marriage certificate was filed in my	office, could be the day of all grands
ne the pal I Day of t	at Carters bridge Country of Bendricks
he thousand nine hundred and	County, State of
date of Indiana, Groom & Alby D. Mink	of Alexander County, State of Andread, Stendards by the Clerk of the Circuit Court of Hendricks.
ond, Bride of one of the second of the secon	that purpose by the Clerk of the Circuit Court of
ounty.	2 Soul of Day
ated this 4th day of August, 19.6	Signed Slope
	Official Designation
iled and recorded in accordance with the laws of the State of Indiana this	1 th day of Bude Thypes Clerk
th accordance with the laws of the State of Manual	Signed Lendisks Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

8-2-62 Date of Application HENDRICKS County

MALE Medical Examination Report Dated July 31, 1962	FEMALE Medical Examination Report Dated Garles 31, 1962	
Name of Physician Hal D. Mc Comaughey	Name of Physician Sal D. Mc Camaugher	
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	statement—Whoever procures the issuance of a license to marry by any false statement, representa-	
MALE APPLICANT	FEMALE APPLICANT	
Name First Middle St. Last	Name Brirst R Middle B Last	
Date of Birth Month Day Year	Date of Birth Month Day Year	
Place of Birth (State or foreign country)	Place of Birth (State or Areign country)	
Illinois	Indianopolis, Ind.	
Residence Address Street or R. R. City County State	Residence Address Street or R. R. City County State	
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different	
	Tally sheets	
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Marited Number of Previous Marriages.	
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment	
Usual Occupation (112) altin Control		
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)	
Dother (Specify) Shows Liceace	Usual Occupation Sypkheiper at Slocks	
1. Are you now or have you been adjudged, diagnosed or considered as:	Date of birth verified by: Birth Cert. Judicial Decree	
An Imbecile? Of Unsound Mind? Yes Yes	Other (Specify)	
2. Are you under guardianship as a person of unsound mind? No P Yes 3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as:	
nome for indigent persons?	An Imbecile?	
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind?	
4. Are you afflicted with a transmissible disease? No	2. Are you under guardianship as a person of unsound mind? No Yes	
6. Are you now under the influence of intoxicating liquor?	3. Are you afflicted with a transmissible disease? No 🗗 Yes 🗆	
7. Are you now under the influence of a narcotic drug? 8. Are you able to support a family? Yes No D	4. Are you related to the groom closer than second cousin?	
9. Are you likely to so continue? Yes No	5. Are you now under the influence of intoxicating liquor? No Yes	
10. Do you have minor children from one or more former marriages? No Yes (If yes, answer questions a, b, c)	6. Are you now under the influence of a narcotic drug? No Yes	
(a) List their full names, ages and addresses	7. Full name of father Lannie nathan Sheet	
Name Age Address	Residence of father (if deceased so state) Carters buyer and.	
	Occupation of father Retired Race of father white	
	Birthplace of father (State or foreign country). Adipar	
	P-1 8-11 B 11	
(b) Are you supporting or contributing to their support? Yes ☐ No ☐ (c) Are you complying with any court order or orders issued for	8. Full maiden name of mother. The the state of the state	
their support? Yes No	Residence of mother (if deceased so state)	
11. Full name of father Well Tous	Occupation of mother Thuslande g. Race of mother white	
Residence of father (if deceased so state) Clastic Slenois	Birthplace of mother (State or foreign country)	
Occupation of father Salvad Implayed Race of father white		
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS Ss: I depose and state the information given in this application is true and correct.	
12. Full maiden name of mother Dywa The Courthy	County of in this application is true and correct.	
Residence of mother (if deceased so state) Alcalus, Illinies	Signed X Delly R. Dunlen	
Occupation of mother Achorl employely Race of mother white	New Address	
Birthplace of mother (State or foreign country) Illinois Subscribed and sworn to before me this 2 day of Ale		
State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct	7/0	
y O rull	Claude Handricks Circuit Court	
Signed \ JUX J Troup		
New Address	CONSENT OF PARENTS, PARENT OR GUARDIAN	
Subscribed and sworn to before me this. a day of cluquet, 1963	We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
Claude Aughes Clerk HENORICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary	
CONSENT OF PARENTS, PARENT OR GUARDIAN		
We, the parents, of this applicant hereby give consent for this marriage. If only one parent		
signs, state facts which render the consent of the other parent unnecessary	and the second s	
	State of Indiana,	
State of Indiana, County of HENDRICKS 88:	County of HENDRICKS ss:	
County of	SignedFather	
Signed Father	SignedMother	
Signed		
uay of	Subscribed and sworn to before me this	
Clerk	Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	RT. A marriage license having been refused to the above named parties, the	
County	Court by written order issued	
in authorizes and directs the issuance	of a marriage license to the chore nevel and filed	
Be It Remembered, there was filed in my office a marriage lice	SE AND MARRIAGE CERTIFICATE was issued by the clerk of the Kendruck Circuit Court	
of Indiana dated the day of Quest	Circuit Court	
Sang R Strong	, 19 6 , authorizing the joining together as husband and wife	
Be it further remembered, the following marriage certificate was filed in marriage	Factorial desired	
1, Colon Hant bak	hand a second of the	
the troubland hine hundred and		
Of Edward of Court Child		
of Market and		
were by me united in marriage as authorized by a marriage license issued for County.	that murnose by the Clark At 1 County, State of States,	
County. / th	The Circuit Court of	
Dated this 6th day of August , 196	2.	
	Signed Jancook	
Filed and recorded in accordance with the land of the	Official Designation Justice of the Peace	
Filed and recorded in accordance with the laws of the State of Indiana this	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
	Signed Claude Horghes Clerk	
	Hendricks Circuit Court	

Circuit Court

Form Prescribed By Indiana State Board of Health under Authority

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS _County MALE Medical Examination Report Dated_ FEMALE Name of Physician and P. Wa Medical Examination Report Dated ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False statement—Whoever procures the issuance of a license to marry by any false statement.

MALE ADDITIONS

MALE A FEMALE APPLICANT Date of Birth marc Place of Birth (State or foreign country Residence Address Previous Marital Status: Never Married Number of Previous Marriage Maiden Name if Diffe Death Divorce Annulment Previous Marital Status: Never Married Previous Marriages. White Negro Other (specify). Last Marriage Ended By: Death Divorce Annulment allison Usual Occupation Date of birth verified by: Birth Cert. Judicial Decree Color or Race White Negro Other (specify)... Other (Specify) .. Usual Occupation Are you now or have you been adjudged, diagnosed or considered as: Date of birth verified by: Birth Cert. Judicial Decree Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? Yes 🗌 3. Are you now or have you been within five (5) years an inmate of a home for indigent persons? 1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? If answer to 3 is "yes" has the cause of such condition been removed? Yes 🗌 No Yes 4. Are you afflicted with a transmissible disease? Of Unsound Mind? Yes 🗌 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? No Yes 🗆 6. Are you now under the influence of intoxicating liquor? No 💆 Yes 🗌 3. Are you afflicted with a transmissible disease? 7. Are you now under the influence of a narcotic drug? No D Yes 🗌 No D 4. Are you related to the groom closer than second cousin? Yes 🗆 8. Are you able to support a family? No 🗆 9. Are you likely to so continue? Yes 🗸 5. Are you now under the influence of intoxicating liquor? No 🗆 10. Do you have minor children from one or more former marriages? No Yes Yes 🗌 6. Are you now under the influence of a narcotic dr (If yes, answer questions a, b, c) (a) List their full names, ages and addresses 7. Full name of father Walter Address (b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for their support? Yes No No 11. Full name of father tack Residence of father (if deceased so state). Birthplace of mother (State or foreign country) Muduelle Occupation of father 1 4 4 4 - -State of Indiana, Birthplace of father (State or foreign country). 12. Full maiden name of mother Bette De Residence of mother (if deceased so state).... Occupation of mother Adams Race of mother..... Birthplace of mother (State or foreign country) unducles Co Subscribed and sworn to before me this day of A 19.62 State of Indiana, I depose and state the information given in this application is true and correct. HENDRICKS Circuit Court County of ... CONSENT OF PARENTS, PARENT OR GUARDIAN New Address We, the parents, of this applicant hereby give consent for this marriage. If only one parent Subscribed and sworn to before me this ... day of august signs, state facts which render the consent of the other parent unnecessary. CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary ... State of Indiana, HENDRICKS County of ... State of Indiana, HENDRICKS County of Mother Subscribed and sworn to before me this..... guet 1962 COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the Court by written order issued..... authorizes and directs the issuance of a marriage license to the above named parties.County..... Be It Remembered, there was filed in my office a marriage license issued by the clerk of the 10 the day of August 1962, authorizing the joining together as husband and wife Be it further remembered, the following marriage certificate was filed in my office, to-wit:

1, 26 th following marriage certificate was filed in my office, to-wit: 1, Debut 6. Mass. hereby certify that on the 26 th day of Greyst one thousand nine hundred and Sixty Time at Latterille Country of State of Indiana, Groom Michael Grey Stephenson of Jending, and, Bride Kare County, State of State and, Bride Kareen and Duenlee of Dendicks Courty, State of Lindricks were by me with it is a Court of Hindricks were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of Hendricks Signed Robert E. Maas August , 19.62. Dated this .. Official Designation Minister

Signed ...

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS ___County 4-62

	Date of Application
MALE Medical Examination Report Dated Quey 1, 1962	FEMALE Medical Examination Report Dated aug 1 1962
Name of Physician John Ellitt	Name of Physician John Ellett
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False s	tatement—Whoever procures the issuance of a license to marry by any false statement, represents
MALE APPLICANT	FEMALE APPLICANT
Name Eirst Middle Maga	Name 10 First Middle 10. Last
Date of Birth Month Day Year	Date of Birth Month Day Year
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)
Residence Address Street of R. R. O City County State	Residence Address Street or R. B. City Courty St.
R R 2 Box 161 Clayfon Trends Ind.	Maiden Name if Different State
Previous Marital Status: Never Married Number of Previous Marriages.	Marden Maine if Different
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation Survey -	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Emp. Security
1. Are you now or have you been adjudged, diagnosed or considered as:	Date of birth verified by: Birth Cert. Judicial Decree
Of Unsound Mind?	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind?
4. Are you afflicted with a transmissible disease? No Yes 5. Are you related to the bride closer than second cousin? No Yes	2. Are you under guardianship as a person of unsound mind? No Yes
6. Are you now under the influence of intoxicating liquor? No E Yes	3. Are you afflicted with a transmissible disease?
8. Are you able to support a family?	4. Are you related to the groom closer than second cousin?
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? Yes No Yes Yes	5. Are you now under the influence of intoxicating liquor? No Yes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	6. Are you now under the influence of a narcotic drug? 7. Full name of father Decare Franklin Gleason
Name Age Address	Residence of father (if deceased, so state) Alfanon Jud.
	Occupation of father mucking Super Race of father W.
	Birthplace of father (State or foreign country). Jova
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for.	8. Full maiden name of mother losting Dirivinede Alone Re
their support? Yes No	Residence of mother (if deceased so state) Caylon - R R
Residence of father (if deceased so state) Llayton - R R	Occupation of mother & Bally Bace of mother
Occupation of father Matur Freights Race of father W	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country) Hends Co. 2nd.	State of Indiana,
12. Full maiden name of mother Dafine Wing	County of HENDRICKS ss: in this application is true and correct.
Residence of mother (if deceased so state)	Signed Dosather Gleason
Occupation of mother & State or foreign country Litnam (1).	New Address & 9 to Clayton Incl.
State of Indiana.	Subscribed and sworn to before me this The day of Conquest, 1962
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Claude Sieghes Clerk HENDRICKS Circuit Court
New Address.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this Ath day of Quart 160	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Claude Juglies Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN	and the other parent directessary
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
signs, state facts which render the consent of the other parent unnecessary	ment and the end of the line o
Comment No. 64 No.	State of Indiana,
State of Indiana, County of HENDRICKS	County of HENDRICKS ss:
Signed Commoth P Succh	Signed Father
Signed Markey Smith Mother	SignedMother
Subscribed and sworn to before me this Landay of august, 162	Subscribed and sworn to before me thisday of
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	C. A marriage license having been refused to the charge round notice the
Cou	ord fled
authorizes and directs the issuance of	a marriage license to the above named parties.
Be It Remember of there was filed in my office a marriage line	
of Indiana dated the Sth day of August	e issued by the clerk of the Circuit Court
Be it further remembered the fall an	d. Do They I lead to the form of the standard and wife fice, to-wit:
Be it further remembered, the following marriage certificate was filed in my off I,	ice, to-wit:
a contract the second of the contract of the c	ereby certify that on the 10th day of august
State of Indiana, Groom Adary Smith	, The day , County of Chay.
01	JACKI JAK
County to the issued for the	nat purpose by the Clerk of the Circuit Court of Lindrick
Dated this 10th day of august, 1962	1 1 6 0 04
	Signed Samuel & Carlton
Filed and recorded in accordance with the laws of the State of Indiana this	fficial Designation Minister
The state of the s	190 L

...Circuit Court

Form Prescribed By Indiana State Board of	
Health under Authority Chap. 126, Ind. Acts 1905 APPLICATION FOR	OF INDIANA MARRIAGE LICENSE No. 579
TOR	MARRIAGE LICENSE
MALE	RICKS County File
Medical Examination Report Dated July 17, 1962	- Sugart 4 1
Name of Physician Aloud Deep	FEMALE Date of Application
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False strion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500,00)". MALE APPLICANT Name Warren Middle Lust	Medical Examination Report Dated July 17, 1962
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00); Talse s	statement when
Name First	whoever procures the issuance of a license to marry by
Warren Middle 5/ Lagt	Name First First
Date of Birth Month Day Next	- Akint Mian
Place of Birth (State or foreign country) /908	Date of Birth Month a. Uml 1+
Residence Address & Street or R. R. City County	Place of Birth (State or foreign country)
Previous Marital Status: Never Married Number of Previous	Residence Address Street or R. R. Street or R. R. City
of Previous Marriages	Maiden Name if Different Apt. 18 - Budpla & County State
Last Marriage Ended By: Death Divorce Annulment	Previous Marie a Christina ash harrow
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages Last Marriage Ended P.
Usual Occupation Salesman	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Negro C Cut
Other (Specify)	Usual Occupation And Wester (specify)
1. Are you now or have you been adjudged, diagnosed or considered as: Of Unsound Mind? No Yes	Date of birth verified by: Birth Cert. Judicial Decree
2. Are you under guardianship as a person of yearsh	Uther (Specify)
3. Are you now or have you been within five (5) years an inmate of a county asylum or No Yes	1. Are you now or have you been adjudged, diagnosed
If answer to 3 is "yes" has the cause of such condition been removed? No Yes No Y	
5. Are you related to the bride closer than second cousin?	or onsound mind?
7. Are you now under the influence of intoxicating liquor? No B Yes	Are you under guardianship as a person of unsound mind? No. Yes 3. Are you afflicted with a transmissible disease?
8. Are you able to support a family?	4. Are you related to the groom closer than second cousin?
10. Do you have minor children from one or more former marriage.	5. Are you now under the influence of intoxicating liquor?
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	6. Are you now under the influence of a narcotic drug?
Name Age Address	7. Full name of father Cenest J. Cesting
	Residence of father (if deceased so state) Leedeld
	Occupation of father. Race of father White
(b) Are you supporting or contributing to their support? Yes No No	Birthplace of father (State or foreign country) Kentuckey
(c) Are you complying with any court order or orders issued for	8. Full maiden name of mother. Thaking M. Leinhardt
11. Full name of father Milliam & Hest Yes No	Residence of mother (if deceased so state) 3415 Shelby Apt 18-8
Residence of father (if deceased so state) Deceased	Occupation of mother. The Kelker per Race of mother white
Occupation of father Race of, father white	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS Ss: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother allice Thomas	County of in this application is true and correct.
Residence of mother (if deceased so state) Wellasek	Signed & Siribitina A. Amhol
Occupation of mother Race of mother Race of mother	New Address.
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of All grant 196
County of HENDRICKS as: I depose and state the information given in this application is true and correct.	Claude Hughes Clerk HENDRICKS Circuit Court
Signed & Warren a Tert	THE RESERVE THE PARTY OF THE PA
New Address	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this 4 day of Cluquet, 1962	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Clauthe Hughes Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN	
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
signs, state facts which render the consent of the other parent unnecessary	
	State of Indiana,
tate of Indiana,	County of HENDRICKS
County of HENDRICKS	Signed Father
Signed Father	Signed
Signed Mother ubscribed and sworn to before me this day of 19	Subscribed and sworn to before me this
Clerk	Clerk
	license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	r. A marriage license naving been received and filed
County County	art by written order issued
authorizes and directs the issuance of	a marriage noons
Be It Remembered, there was filed in my office a marriage licens	AND MARRIAGE CERTIFICATE GENERAL Circuit Court issued by the clerk of the Sundricks
Indiana the Remembered, there was filed in my office a marriage licens	1962 authorizing the joining together as husband and wife
Indiana dated the day of an	d Christina a. umholly
e it family and the work of the state of the	Tice, to-wit:
Debige Ha Smith	ereby certify that the the
the thousand nine hundred and Sixter ture a	t County, State of Middle Man
ate of Indiana, Groom Massea a Hest 01	County, State of Sudiant,
ere by me united in marriage as authorized by a marriage license issued for the	but surpose by the Clerk of the Circuit Court of
ere by me united in marriage as authorized by a marriage license issued for thounty.	a of Line
ated this 8th day of August , 1962	Signed Sebriger
	ficial Designation Munisles , 19 62
	Ath sound billings in the

Signed...

Filed and recorded in accordance with the laws of the State of Indiana this

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

	Date of Application
MALE Medical Examination Report Dated Que 3 1963	FEMALE
	Medical Examination Report Dated Gueg 3/962
Name of Physician Heal & Bayter m.D.	Name of Physician Teal & Colyter 200
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False st	atement—Whoever procures the issuance of a license to marry by any false statement, represents
	Il
Name First Middle Last	FEMALE APPLICANT
Lloyd be mat	Name Delevely Middle De Last
Date of Birth Month Day Year	Date of Birth Month Day Year
Place of Birth (State of foreign country)	Place of Birth (State of foreign country)
Residence Address Street or R _y R _z City County State	Residence Address Street or R. R. City County Street
125 So Vine Tlampeld Hendr. And	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages.
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation fed aveation	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Frank 11/ School
Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as:	Caciny women
An imbedie 7 No Yes No	Date of birth verified by: Sirth Cert. Judicial Decree
2. Are you under guardianship as a person of unsound mind?	Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as:
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons?	An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind?
4. Are you afflicted with a transmissible disease? No Yes 5. Are you related to the bride closer than second cousin? No Yes	2. Are you under guardianship as a person of unsound mind? No Yes
6. Are you now under the influence of intoxicating liquor? No Yes	3. Are you afflicted with a transmissible disease?
7. Are you now under the influence of a narcotic drug? 8. Are you able to support a family? Yes V No V Yes V No V	4. Are you related to the groom closer than second cousin? No D Yes
9. Are you likely to so continue?	5. Are you now under the influence of intoxicating liquor? No Yes
10. Do you have minor children from one or more former marriages? No Yes (If yes, answer questions a, b, c)	6. Are you now under the influence of a narcotic drug? No Yes
(a) List their full names, ages and addresses	7. Full name of father Alandors Miles
Name Age Address	Residence of father (if deceased so state) K # 4 Bloomington
	Occupation of father
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Othella Moddows
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state & H Bloomissy ton
11. Full name of father Claude martin	Occupation of mother housewife Race of mother to
Residence of father (if deceased so state) B Coonsagton RR 9	Birthplace of mother (State or foreign country) Laurence Co. A
Occupation of father. Laborer Race of father. W	A second
Birthplace of father (State or foreign country) Juckson Co Ind	State of Indiana, County of HENDRICKS Ss: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Lucille Curre	County of in this application is true and correct.
Residence of mother (if deceased so state) 2000 manages and Rg	Signed Blinde of Miller
Occupation of mother Vouseunft Race of mother W	New Address
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this
State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Clark HENDRICKS Circuit Court
Signed Llayer of Martin	Clerk Circuit Court
New Address	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of and 1963	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Clark HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN	and render the consent of the other parent unnecessary
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
signs, state facts which render the consent of the other parent unnecessary	
000 200 Ht 62000 2	State of Indiana,
State of Indiana, County of HENDRICKS 88:	County of HENDRICKS 88:
	Signed Father
Signed Father Signed Mother	SignedMother
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of
Clerk	day of
	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	. A marriage license having been refused to the above named parties, the
County	rt by written order issued
inauthorizes and directs the issuance of	a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE	AND MARRIAGE GERMANICATION
the state of the s	e issued by the alank of the
aay of sugest	
Be it further remembered, the following marriage certificate was filed in my offi	1 Belinda don miller
1, Lev Marie Sargnett	makes and if it is the second of the second
01	
the state of the s	at mumana ha the all the areas as the state of the state
Dated this 16 th	The Pool of the Circuit Court of
Dated this 16th day of August, 1962	Signed Per Morris Darsnett
Filed and recorded in accordance with the laws of the State of Indiana this.	ficial Designation Saston Dellarelle Church

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENS

Health under Authority Chap. 126, Ind. Acts 1905 APPLICATION FOR 1	MARRIAGE LICENSE
HENDRIC	KC FIRE CO
MALE	-aug 6 1962
Medical Examination Report Dated Clig 2 1962	FEMALE Date of Application
Name of Physician Thomas Walker	Medical Examination Report Dated Queg 2 1962
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 presently, up a	Name of Physician Thomas Walley
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	tement—Whoever procures the issuance of a license to marry by and the
Name D First Middle Middle	FEMALE APPLICA
Date of Birth Month Day	Name First - Middle
Place of Birth (State or foreign country)	Date of Britis Month Day
Indianapoles (St Isancis, They !	Place of Birth (State or foreign country)
Residence, Address Breet or R. W. Street of R.	Residence Address Street or R. R. Street or R. Street o
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Clerment marion July
Last Marriage Ended By: Death Divorce Annulment	THE RESERVE THE PROPERTY OF THE PARTY OF THE
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
f b Bilt	Last Marriage Ended By; Death Divorce Annulment
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)
Other (Specify)	Usual Occupation
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes	Date of birth verified by: Birth Cert. Judicial Decree
Of Unsound Mind? No Yes 2. Are you under guardianship as a person of unsound mind? No Yes No Yes Yes Yes	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons?	Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind?
5. Are you related to the bride closer than second cousin? No the Yes	2. Are you under guardianship as a person of unsound mind? No Yes
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a narcotic drug? No Yes	3. Are you afflicted with a transmissible disease? No 🕒 Yes 🗆
8. Are you able to support a family?	4. Are you related to the groom closer than second cousin? No 🖯 Yes
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? Yes No Yes	5. Are you now under the influence of intoxicating liquor? No 🖰 Yes 🗆
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	6. Are you now under the influence of a narcotic drug? 7. Full name of father. Alvin Ray Real
Name Age Address	Residence of father (if, deceased so state Indianafales Jud
	Occupation of father Has Co. Race of father W.
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother than Thank konway
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state) Clermont Just
11. Full name of father. Soward Septem	Occupation of mother Alstawart Race of mother W
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father McClaca Race of father Race of father Right Race of father R	State of Indiana, HENDRICKS Bas: I depose and state the information given in this application is true and correct.
Birthplace of father (State or foreign country). The state of father (State or foreign country) is stated to state of father (State or foreign country). The state of father (State or foreign country) is stated to state of father (State or foreign country). The state of father (State or foreign country) is stated to state or father (State or foreign country). The state of father (State or foreign country) is stated to state or foreign country.	County of
Residence of mother (if deceased so state) ROR 8 - Inply	Signed Gonita Louise Keal
Occupation of mother Lousewife Race of mother W.	New Address
Birthplace of mother (State or foreign country) Indiana	Subscribed and sworn to before me this 6 th day of aug 162
State of Indiana, County of HENDRICKS as: I depose and state the information given this application is true and correct.	Claude Jughesterk HENDRICKS Circuit Court
County of Signer Tourse Pepler	DARRING PARENT OF CHARDIAN
New Address 477 7, Die lett, Plainfield, 9	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworn to before me this 6 the day of aug, 1962	we, the parents, of this applicant hereby give the other parent unnecessary.
Charles HENDRICKS Circuit Court	Father and mother Rivorced.
CONSENT OF PARENTS, PARENT OR GUARDIAN	mother has legal custody
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
signs, state facts which render the consent of the other parent unnecessary	
	State of Indiana, HENDRICKS
State of Indiana,	County of Father
County of HENDRICKS	Signed Joan Marie Wyatt Mother
SignedMother	Subscribed and sworn to before me this ball day of Sugar 1062
Signed Mother Subscribed and sworn to before me this day of 19	Subscribed and sworn to before the Quille Highest derk
Clla	the charge parties, the
	RT. A marriage license having been refused to the above hand filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	Court by written order issued
in authorizes and directs the issuance	of a marriage license to the above name
PETURN OF MARRIAGE LICEN	SE AND MARRIAGE CERTIFICATE Circuit Court ense issued by the clerk of the court in initial together as husband and wife
70 - 74 20 I fled in my office a mail	In 2 the migran of the Joining of
Of Indiana data 141	12 71 000
March Cople	office to-wit:
Be it further remembered, the following marriage certificate was filed in my 1, Levy Kornas & Blissey	hereby certify that on the County of County of
State of Indiana, Groom Renald Septer	County, State of County
and, Bride Souta James Real of were by me united in marriage as authorized by a marriage license issued for County.	that purpose by the Clerk of the Circuit Court of
were by me united in marriage as authorized by a marriage license issued jo	a le la
County. Dated this //Ih day of August, 196	Signed
day of	Official Designation Outgust 1962. Clerk
Filed and recorded in accordance with the laws of the State of Indiana this	14th Jan of Claude Duglis Circuit Court
rued and recorded in accordance with the laws of the State of Induna titles.	Signed J. Lindricks

MALE

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No	50	82	
File_		THE REAL PROPERTY.	No.
(Date of A	7-19 application	62

MALE Medical Examination Report Dated Quas 6 -1962	FEMALE Medical Exemination B. 1912 Aug. 6-1962
Name of Physician 7 M Connayaher m D.	Name of Physician A Mc Connau Chu, D
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False	statement—Whoever procures the issuance of a license to marry by any false statement, represent
MALE APPLICANT	
Name First Middle Last	Name First O Middle
Date of Birth Month Day Year	Date of Plath Rosalie Brown
Place of Birth (State or foreign country) 9 1934	Lept 2 Year
Residence Address Street or R. R. City County State O	Place of Birth (State or foreign country)
106 & Main of Brownsburg State.	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married Number of Previous Marriages Onel	Maiden Name if Different
Last Marriage Ended By: Death Divorce Annulment Divorce	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation Alexander Matin	
Date of birth verified by: Birth Cert. Judicial Decrey	Color or Race White Negro Other (specify)
Other (Specify) Driver Tiens	Usual Occupation Rey Punch Operator
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Of Unsound Mind?	Date of birth verified by: Birth Cert. Judicial Decree
2. Are you under guardianship as a person of unsound mind?	1. Are you now or have you been adjudged, diagnosed or considered as:
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? Yes	An Imbecile? Yes
If answer to 3 is "yes" has the cause of such condition been removed? No Yes 4. Are you afflicted with a transmissible disease? Yes	Of Unsound Mind?
5. Are you related to the bride closer than second cousin? No. Yes Yes	2. Are you under guardianship as a person of unsound mind?
7. Are you now under the influence of a narcotic drug?	3. Are you related to the ground state of the
8. Are you able to support a family? 9. Are you likely to so continue? Yes No	4. Are you related to the groom closer than second cousin? 5. Are you now under the influence of intoxicating liquor?
10. Do you have minor children from one or more former marriages? No ☐ Yes ☐ Yes ☐	6. Are you now under the influence of a nargotic drug? No Yes
(a) List their full names, ages and addresses	7. Full name of father of layer Stown
Dames M 3 Kingston Jenn	Residence of father (if deceased so state)
	Occupation of father Machine Race of father, &
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for their support? No No	8. Full maiden name of mother and the full len wo
their support? 11. Full name of father	Residence of mother (if deseased so state)
Residence of father (if deceased so state) 1000 usbury	Bace of mother
Occupation of father Altered Race of father 4	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country)	State of Indiana,
12. Full maiden name of mother H Mah Emily Walson	County of HENDRICKS ss: in this application is true and correct.
Occupation of mother (if deceased so state) Proudsburg	Signed Masalle Brown
Birthplace of mother (State or foreign country)	New Address
State of Indiana,	Subscribed and sworn to before me this day of duy 1962
application is true and correct.	Claude Tughes Clerk HENDRICKS Circuit Court
Signed Lack & Lilliand	CONSENT OF PARINTS PARINTS
Subscribed and sworn to before me this. 7 day of Que 1068	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents of this applicant bonds in the control of the parents of this applicant bonds in the control of the
Claude Tonghos Clerk HENDRICKS Circuit Court	We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN	the consent of the other parent unnecessary
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
signs, state facts which render the consent of the other parent unnecessary	- Committee of the committee of the control of the
Stranger West on	State of Tall
State of Indiana,	State of Indiana, County of HENDRICKS ss:
County of HENDRICKS 88:	Signed
Signed Father Signed Methor	Signed
Subscribed and sworn to before me thisday of	Mother
Clerk	Subscribed and sworn to before me thisday of
COMPLETE IF MARRIAGE LICENSE ISSUED DI	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT County	. A marriage license having been refused to the above named parties, the
in authorizes and directs the issuance of	rt by written order issued
RETURN OF MARRIAGE LICENCE	
Be It Remembered, there was filed in my office a marriage license	e issued by the clerk of the fundanche Circuit Court
of Indiana dated the day of August	160 authorizing the initial Circuit Court
Be it further remembered the following marriage certificate was filed in my offi	d. Rosale Goral the joining together as husband and wife
1, Ker Donald Tyler was freed in my offi	ce, to-wit:
	creby certify that on the 11 th day of august,
State of Indiana, Groom Jack Leinart of	Hendricks Country of Rendrickes,
were by me united in marriage as authorized by a marriage license issued for the	
were by me united in marriage as authorized by a marriage license issued for the	at purpose by the Clerk of the Circuit Court of Lendreck
Dated this day of August, 1962	
	Signed Cer Donald Tyler
Filed and recorded in accordance with the laws of the State of Indiana this	Ficial Designation Castor Betherda Baptist Church
(1) 25% 후 property 보고 있는데 100명 100명 100명 100명 100명 100명 100명 100	
and the second and the second	Clerk
	Stendricks Circuit Court

Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS County MALE Medical Examination Report Dated_ FEMALE Name of Physician_ au ul Medical Examination Report Dated ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False statement—Whoever procures the issuance of a license to marry by any false statement, representa-FEMALE APPLICANT Previous Marital Status: Never Married Number of Previous Marriage Death | Divorce | Annulment | Last Marriage Ended By: Previous Marital Status: Never Married Number of Previous Marriages. White Negro Other (specify). Color or Race Last Marriage Ended By: Usual Occupation Oler Death | Divorce | Annulment | Date of birth verified by: Birth Cert. Judicial Decree Color or Race White Negro Other (specify)... Other (Specify). Usual Occupation une modelo Are you now or have you been adjudged, diagnosed or considered as: Date of birth verified by: Birth Cert. | Judicial Decree No Yes Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No D Yes | Yes | Other (Specify)... 3. Are you now or have you been within five (5) years an inmate of a 1. Are you now or have you been adjudged, diagnosed or considered as: If answer to 3 is "yes" has the cause of such condition been removed? An Imbecile? 4. Are you afflicted with a transmissible disease? Yes 🗆 No Yes Of Unsound Mind? 5. Are you related to the bride closer than second cousin? Yes 🗆 2. Are you under guardianship as a person of unsound mind? No D 6. Are you now under the influence of intoxicating liquor? Yes 🗆 No D 7. Are you now under the influence of a narcotic drug? Yes 🗌 3. Are you afflicted with a transmissible disease? Yes [No 🗹 Yes 🗆 8. Are you able to support a family? 4. Are you related to the groom closer than second cousin? Yes No 🗆 9. Are you likely to so continue? 5. Are you now under the influence of intoxicating liquor? 10. Do you have minor children from one or more former marriages? No 🗆 (If yes, answer questions a, b, c) No 🗆 Yes 🗌 Yes 🗆 6. Are you now under the influence of a narcotic dr (a) List their full names, ages and addresses 7. Full name of father Mrank me Name Address Occupation of father mgv, Birthplace of father (State or foreign country (b) Are you supporting or contributing to their support? Yes 🗌 No 🗆 (c) Are you complying with any court order or orders issued for their support? Yes No No Residence of mother (if deceased so state) 142 30 Residence of father (if deceased so state) Birthplace of mother (State or foreign country) Occupation of father 10 C Birthplace of father (State or foreign country) State of Indiana 12. Full maiden name of mother... Residence of mother (if deceased so state). Occupation of mother Birthplace of mother (State or foreign country) Uklls Co State of Indiana, HENDRICKS CONSENT OF PARENTS, PARENT OR GUARDIAN New Address. Subscribed and sworn to before me this. We, the parents, of this applicant hereby give consent for this marriage. If only one parent august, 19.65 signs, state facts which render the consent of the other parent unnecessity HENDRICKS Clerk CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary... State of Indiana, County of ... State of Indiana, County of HENDRICKS Subscribed and sworn to before me this COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, theCourt by written order issued...County... authorizes and directs the issuance of a marriage license to the above named parties. Be It Remembered, there was filed in my office a marriage license issued by the clerk of the .., 19.6.2, authorizing the joining together as husband and wife august of Indiana dated the ... and Linda Kay Kearnes Be it further remembered, the following marriage certificate was filed in my office, to-wit:

hereby certif ()) Slevenson one thousand nine hundred and..... State of Indiang, Groom Allry Eugene Farthing of Wendrick Hay Received of Hendricks county, State of and, Bride Lunda were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of County. County. Dated this Official Designation Minister

Signed.

Filed and recorded in accordance with the laws of the State of Indiana this ..

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

Queg 7-1962
Date of Application

MALE Medical Examination Report Dated Quaguat 7-1962	FEMALE Medical Examination Report Dated Queent 7-196
Name of Physician 7. Scam aborn, 9n 10-	Name of Physician Thomas Walker 3.0
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	tement—Whoever procures the issuance of a license to marry by any false statement, representa-
MALE APPLICANT	FEMALE APPLICANT
Name First Middle R Last	Name Arist and Cant Last
Date of Birth Month Day Year	Date of Birth Month Day Year
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	Residence Address Street or R. R. City County State
526 w main Pittsboro Werds. Co dra	Maiden Name it Different are Brownsburg Skuds and
Previous Marital Status: Never Married Number of Previous Marriages	Marden Annue A Dinesent
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation Browned Services	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	
Other (Specify) Sid, Card- an Force	Usual Occupation Conk
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes	Date of birth verified by: Birth Cert. Judicial Decree
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes Yes	1. Are you now or have you been adjudged, diagnosed or considered as:
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? No Yes	An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind?
4. Are you afflicted with a transmissible disease? No Yes No Yes No Yes No Yes □	2. Are you under guardianship as a person of unsound mind? No ☐ Yes ☐
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a parentia days?	3. Are you afflicted with a transmissible disease? No Ves
7. Are you now under the influence of a narcotic drug? 8. Are you able to support a family? Yes No	4. Are you related to the groom closer than second cousin? No Ves
9. Are you likely to so continue? Yes No	5. Are you now under the influence of intoxicating liquor? No Ves
10. Do you have minor children from one or more former marriages? (If yes, answer questions a, b, c)	6. Are you now under the influence of a narcotic drug? No Yes
(a) List their full names, ages and addresses Name Age Address	7. Full name of father (if deceased so state) The state of father (if deceased so state)
	Occupation of father out worker Race of father w
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother Marma Whitaker
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for	Residence of mother (if deceased so state) Brownshing and
their support? Yes No	Occupation of mother house wife Race of mother 20
Residence of father (if deceased so state) Puttatone and	Birthplace of mother (State or foreign country) Somerset Ly
Occupation of father. Mariton Race of father. W.	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country) / Landrick Co Bud,	State of Indiana, Sa: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Vilna mustin	County of HENDRICKS ss: in this application is true and correct.
Residence of mother (if deceased so state)	Signed Jakes and Caram
Occupation of mother Clark Race of mother	New Address
Birthplace of mother (State or foreign country).	Subscribed and sworn to before me this 7 day of Clargerat, 19.62
State of Indiana, County of HENDRICKS State of Indiana, I depose and state the information given in this application is true and correct.	Planda Skuedes Clerk HENDRICKS Circuit Court
Signed James C. Kayselale	
New Address.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Claude Nugles Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN	
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Certified Statement attached
signs, state facts which render the consent of the other parent unnecessary	for both Carents.
	State of Indiana,
State of Indiana,	County of HENDRICKS 88:
County of HENDRICKS	SignedFather
Signed Signed Father	Signed Mother
Signed Mother Subscribed and sworn to before me this 7 day of Confederate 196	Subscribed and sworn to before me thisday of, 19,
Clauda A Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
County Co	urt by written order issued
	f a marriage license to the above named parties.
RETURN OF MARRIAGE LICENS	E AND MARRIAGE CERTIFICATE
of Indiana dated the 1 11th day of An MINT	se issued by the clerk of the Circuit Court Court, 1962, authorizing the joining together as husband and wife
am we will have a will	
Be it further remembered, the following marriage certificate was filed in my o	ffice, to-wit:
i, Jall Lille	
one thousand nine hundred and 62. State of Indiana, Groom James Edw Ragdale	at Clermant , County of marion,
and, Bride Allie Com Callton of	of Tendrecks County, State of Indiana
were by me united in marriage as authorized by a marriage license issued for	that purpose by the Clerk of the Circuit County, State of Indiana,
Dated this 12th day of august, 196	Signed Bill W Lewis
Control of the Contro	Official Designation Prolemel Elcles - Church of nas arene
Filed and recorded in accordance with the laws of the State of Indiana this	The state of the s
	Signed Classiff Dughio Clerk
	Tunducks Circuit Court

APPLICATION FOR MARRIAGE LICENSE

MALE HENDR	ICKS County File 26
Medical Examination Report Dated July 19	lug 9-196-
Name of Physician John W 1962	FEMALE Medical Examination Report Dated Sulv 23 191
ALL OURSTIONS MUST BE ANSWERED CO.	Name of Dr
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False stion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name First Middle Ja' Lost	statement who
MALE APPLICANT	Whoever procures the issuance of a license to marry by any felse
	Name First Page 1 First
Date of Birth Month Day Year	Middle
Place of Birth (State or foreign country)	Date of Birth Month Day
Residence Address Street or R. R. City Chalana	Place of Birth (State or foreign country)
I whawaka Stocky In	Residence Address Street or B. R. Street
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Stownshum Head State
Last Marriage Ended By: Death Divorce Annulment	Province Martin
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
Usual Occupation aux force	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White A Negro D
Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation Reg (specify)
An Imbecile? Of Unsound Mind? No Yes	Date of birth verified by: Birth Cert. Judicial Decree
No PV Yes	U Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? If answer to 3 is "yes" has the cause of such condition have	Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?
4. Are you afflicted with a transmissible disease?	Of Unsound Mind?
5. Are you related to the bride closer than second cousin? 6. Are you now under the influence of intoxicating liquor?	2. Are you under guardianship as a person of
7. Are you now under the influence of a narcotic drug?	3. Are you afflicted with a transmissible disease?
8. Are you able to support a family? 9. Are you likely to so continue? No	4. Are you related to the groom closer than second cousin?
10. Do you have minor children from one or more former marriages? (If yes, answer questions a, b, c) Yes No Yes	5. Are you now under the influence of intoxicating liquor?
(a) List their full names, ages and addresses	6. Are you now under the influence of a narcotic drug? 7. Full name of father Thanks Bernard Thanks
Name Age Address	Residence of father (if deceased so state) 5/75 green Brownshus
	Occupation of father Mally Sukskinge of father W.
	Birthplace of father (State or foreign country) Dudlana
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for	8. Full maiden name of mother Alora anna Claire
Yes No	Residence of mother (if deceased so state). Thousandurg
11. Full name of father 11 100 Cas Dathas Aline	Occupation of mother Rullsewife Race of mother W
Occupation of father Carty Completed Record father W	Birthplace of mother (State or foreign country)
Occupation of father State or foreign country	State of Indiana, I depose and state the information given
12. Full maiden name of mother anniel cella Blandford	County of HENDRICKS in this application is true and correct.
Residence of mother (if Gecensed so state) Mushawaka Jud	Signed Signed Marie Wood
Occupation of mother Sleaf Bank, Race of mother W.	New Address Mushawafal Adiana
Birthplace of mother (State or foreign country) Kentucky	Subscribed and sworn to before me this 9th day of aug 1062
State of Indiana, County of HENDRICKS as: I depose and state the information given in this application is true and correct.	Claude Trigher Gerk HENDRICKS Circuit Court
Signed John mark Kline	
New Address J 5 9450 Elm Rd. Michanola Jud	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this 9th day of aug, 1962	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN	
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
signs, state facts which render the consent of the other parent unnecessary	
	State of Indiana, HENDRICKS
State of Indiana,	County of
County of HENDRICKS ss:	Signed
Signed Father	Signed
Signed Mother ubscribed and sworn to before me this day of 19	Subscribed and sworn to before me thisday of
Clerk	
	T. A marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	urt by written order issued across and filed
Clarks office authorizes and directs the issuance of	f a marriage license to the above named parties.
/	AND MARRIAGE CENTIFICATION Circuit Court
Be It Remembered, there was filed in my office a marriage licen	se issued by the clerk of the
f Indiana dated the 9th day of all g	se issued by the clerk of the
John Mark Flight	fice to-wit:
e it further remembered, the following marriage certificate was filed in my of	day of the day of
	the Brownshung Country of Bridge Country of Bridge Country, State of Bridge Country, State of Bridge Country
tate of Indiana Comment and Mark Kline	County, State of
tate of Indiana, Groom John Mark Kline of	Lendrike County, State of Herbricks
ere by me united in marriage as authorized by a marriage license issued for tounty.	hat purpose by the Clerk of the Otto
ounty.	2. Ros m. g. De fearly
day of Allquet	Official Designation Paston & St. Malachy Commission Designation Paston & St. Malachy 19 62.
	Official Designation Tarlow Clerges to 19 62.
iled and recorded in accordance with the laws of the State of Indiana this	Signed Claude High Circuit Court
	July as the state of the state

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County File 26

MALE (1962	FEMALE (12 16 16 16 16 16 16 16 16 16 16 16 16 16
Medical Examination Report Dated Culput 1/62	Medical Examination Report Dated Muguel 1, 1962
Name of Physician A ester W. Worgt	Name of Physician O. A. H. Hoyt
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	atement—Whoever procures the issuance of a license to marry by any false statement, representa-
Name /First Middle Last	Name First Middle
Derald Lee Morgan	Essetta Lice Last
Date of Birth Month Day Year 1941	Date of Birth Month Day Year 8 1943
Place of Birth (State or foreign country) Washington Indiana	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation Machinist - allina	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Une on plane
Other (Specify)	Date of birth verified by: Birth Cert. Judicial Decree
An Imbecile? Of Unsound Mind? No Yes Yes	Other (Specify)
2. Are you under guardianship as a person of unsound mind? No Yes 3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?
home for indigent persons? No Yes If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind?
4. Are you afflicted with a transmissible disease? No Yes 5. Are you related to the bride closer than second cousin? No Yes	2. Are you under guardianship as a person of unsound mind? No Wes
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a narcotic drug? No Yes	3. Are you afflicted with a transmissible disease? No 🖫 Yes 🗆
8. Are you able to support a family?	4. Are you related to the groom closer than second cousin? No ✓ Yes ☐ 5. Are you now under the influence of intoxicating liquor? No ✓ Yes ☐
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? Yes No Ves	6. Are you now under the influence of a narcotic drug? No Yes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father Goland Luther Title
Name Age Address	Residence of father (if deceased so state) B. R. 7-B. 2495 N - Sadde
	Occupation of father Stall & Age Inspects Race of father White
	8. Full maiden name of mother Anna May Johnson
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state) R. R. 7-Bry 495 n- Indy
11. Full name of father	Occupation of mother Housewife Race of mother white
Residence of father (if deceased so state) R.R. 18 - By 1475 - In April	Birthplace of mother (State or foreign country) Mentuckey
Occupation of father At Man Race of father White	the second secon
Birthplace of father (State or foreign country)	County of HENDRICKS State of Indiana, HENDRICKS I depose and state the information given in this application is true and correct.
Residence of mother (if deceased so state) 1475 - R. P. 18 - In Aple	Signed & Basetta Fiel
Occupation of mother this filly -trappy Race of mother white	New Address.
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this 7 th day of diegust, 19 62
County of HENDRICKS I depose and state the information given in this application is true and correct.	Claude Hendricks Circuit Court
Signed & Herald Lear Moregan	CONSENT OF DADENTS DADENT OF SWADDIAN
New Address	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Claude Thugher Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN	
We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary	
segme, states which relater the consent of the other parent unnecessary.	
	State of Indiana,
State of Indiana, County of HENDRICKS	County of HENDRICKS
Signed Father	SignedFather
SignedMother	Signed
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of
	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	r. A marriage license having been refused to the above named parties, the
inauthorizes and directs the issuance of	art by written order issued
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE
The strength of the strength o	se isound has the alast of the Sales day and a
of Indiana dated the 12 day of august	, 19 authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my of	fice to-wit:
one thousand nine hundred and distinct	ereby certify that on the 18th day of August
one thousand nine hundred and Sistay ture of State of Indiana, Groom Derail Lee Morgani of	
01	senderche.
of the united the marriage as authorized by a marriage license issued for t	hat purpose by the Clerk of the Circuit Count of
Dated this 18th day of August, 1962	
그는 그는 그는 경기는 그는 그는 그는 그들은 그는 그들은 그는 그는 그들은 그는 그는 그들은 그는 그들은 그는	Signed B
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Methodest Minister
	Signed Clark 1 Clerk
	Lenduik Circuit Court

000000

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

No. 587

MALE	County
Medical Examination Report Dated 44 7-62	FEMALE Date of Application
Name of Physician Moved 13 700 g g and m. D	Medical Examination P
ALL QUESTIONS MUST BE ANSWERED. Chapter 126 Indian	Name of Physician
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False ston or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name First Middle	tatement—Whoever procures at the state of th
Name First 1 4 4 2 Middle	states the issuance of a license to marry by any false statement represent
Block of State	Name PEMALE APPLICANT
april 19 Jear	Date of Birth Quinderia Middle f. Last
Place of Birth (State or foreign country)	month Dane accumants
Residence Address Street or R. R. City O County (State	Place of Birth (State or foreign country) Year 1942
Previous Marital Status: Never Married Number of Previous Marital Status:	Residence Address Street of R. R. Street of R. R.
Various Foded But Dath 5	Maiden Name if Different & State Danville State
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Sant
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married R Number of Previous Marriages
Usual Occupation and Service	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)
1. Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation Clean Zani +
An Imbecile? Of Unsound Mind? No. Yes	Date of birth verified by: Birth Cert. Judicial Decrye
2. Are you under guardianship as a person of unsound mind?	U Other (Specify) Wwey See
home for indigent persons?	1. Are you now or have you been adjudged, diagnosed or considered as:
4. Are you afflicted with a transmissible disease?	Of Unsound Mind?
5. Are you related to the bride closer than second cousin?	2. Are you under guardianship as a person of unsound mind?
7. Are you now under the influence of a narcotic drug?	3. Are you afflicted with a transmissible disease?
8. Are you able to support a family?	4. Are you related to the groom closer than second course?
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages?	5. Are you now under the influence of intoxicating liquor?
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	6. Are you now under the influence of a narcotic drug?
Name Age Address	7. Full name of father flag. L. Swingston
	Residence of father (if deceased so state)
	Occupation of father Will Will fails Ref. Race of father W. Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Attallay Lucelly Masters
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state)
11. Full name of father Earl a Mouna	housewil.
Residence of father (if deceased so state) Place Bild	Birthplace of mother (State or foreign country)
Occupation of father Auspector Race of father W	Distribute of mother (State or toreign country)
Birthplace of father (State or foreign country) Audiana	State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Martha Suckly	9 1 10 0 +
Residence of mother (if deceased so state)	Signed Sundling Ward Sundylla
Occupation of mother Pulls Race of mother Race of m	New Address
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this
County of HENDRICKS as: I depose and state the information given in this application is true and correct.	Clauds) Judy W. Clerk HENDRICKS Circuit Court
Signed William B. Jourg	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworn to before me this day of HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CICIA COLLEGE	signs, state accounts
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
signs, state facts which render the consent of the other parent unnecessary	
	State of Indiana, HENDRICKS
State of Indiana, County of HENDRICKS	County ofFather
county of	Signed
Signed Father Signed Mother	Signed
Subscribed and sworn to before me thisday of, 19,	Subscribed and sworn to before me this
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
authorizes and directs the issuance of	
POTUDN OF MARRIAGE LICENSI	E AND MARRIAGE CERTIFICATE Loudrecks Circuit Court
Be It Remembered, there was filed in my office a marriage licen	se issued by the clerk of the
of Indiana dated the 15 day of Cugust	19.6%, authorizing the Livingston
William (Beaker mine a)	na
Be it further remembered, the following marriage certificate was filed in my of	the state of the day of day of
one thousand nine hundred and Sixty Live	at Sendricks County, State of Sudiana
State of Indiana Groom It Iliam Blaker Jaung	County, State of State
and, Bride Aunderia ann Livingston of	County, State of Services, County, State of Services, County of Services
were by me writed in marriage as authorized by a marriage license issued for t	hat purpose by the Clerk of the
County. Detect in marriage as authorized by a marriage as	3. Donne H. Ameth
Dated this 2nd day of September, 19 6	Signed Missister (2
	Official Designation Augustical 1963. 4th day of September 1963. Clerk
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Clauds Hughes Circuit Court
The state of the s	Signed / Gendricks

MALE

Medical Examination Report Dated_

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No. 388

File 26

Queg. 11, 1962

Date of Application

FEMALE
Medical Examination Report Dated Gugust 2, 1962

Name of Physician g, Van Fleet, M.A.	Name of Physician J. Van Fleet, m. D.
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	atement—Whoever procures the issuance of a license to marry by any false statement, representa-
MALE APPLICANT	FEMALE APPLICANT
Name First Middle Mi Last	Name Parist & Middle A. Last
Date of Birth Month Day Year	Date of Birth Month the Day Year
Place of Bigen (State or foreign country)	Place of Birth (State on foreign country)
Residence Address Street or R. R. City County Head State Ke	Residence Address Street or R. R. City County State
504 Den Jones Good - Plainfuld or	Maiden Name if Different Plainfield, Ind. Hendricke
Previous Marital Status: Never Married Number of Previous Marriages.	Maiden Name it Different
Last Marriage Ended By: Death Divorce Annulment D	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation Productions Contacts	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	ft of the state of
Other (Specify) Drivers Dicensel	Usual Occupation Slexographer
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes	Date of birth verified by: Bigth Cert. Judicial Decree
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes Yes	1. Are you now or have you been adjudged, diagnosed or considered as:
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons?	An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed? No Yes 4. Are you afflicted with a transmissible disease? No Yes	Of Unsound Mind?
5. Are you related to the bride closer than second cousin? No Yes	2. Are you under guardianship as a person of unsound mind? No Yes
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a narcotic drug? No Yes	3. Are you afflicted with a transmissible disease?
8. Are you able to support a family?	4. Are you related to the groom closer than second cousin? No Yes 5. Are you now under the influence of intoxicating liquor? No Yes
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? No Yes No Yes	6. Are you now under the influence of a narcotic drugs? No. Yes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father Edward Lee Claston
Name Age Address	Residence of father (if deceased so state) Residence
	Occupation of father Deschola Race of father white
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother have goldynaka
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state) 85/ Spance Champala
11. Full name of father Toister Miracle	Occupation of mother Saul Harris Office Race of mother Whater
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country) Tafagette malan
Occupation of father dawyer Race of father while Birthplace of father (State or foreign country) Kentucker	State of Indiana,
12. Full maiden name of mother Harl Mink	County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
Residence of mother (if deceased so state) 504 Day Jours Rd Plant	iel Signed X Patricia L. Claston
Occupation of mother Housekle face Race of mother while	New Address
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this 11 day of Jugust, 19 62
State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Claude Hughes Clerk HENDRICKS Circuit Court
Signed × Darry miracle	
New Address.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of Allgust, 1962	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Claude Haghes Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
signs, state facts which render the consent of the other parent unnecessary	
Vacents Dirocces	
	State of Indiana,
State of Indiana, County of HENDRICKS 88:	County of HENDRICKS
County of Signed Father	Signed Father
Signed X Thasel Thurry Mother	SignedMother
Subscribed and sworn to before me this // day of diagust 1963	Subscribed and sworn to before me thisday of, 19,
Claude Thighes Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	T. A marriage license having been refused to the above named parties, the
CountyCot	urt by written order issued
inauthorizes and directs the issuance of	f a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE	E AND MAPPIACE CEPTIFICATE
the state motted, there was filed in my office a marriage licens	se issued by the clerk of the
Married F. miracle	1962, authorizing the joining together as husband and wife
The state of the s	
1, Illusts treligenans h	nereby certify that on the 24 = day of
one thousand nine hundred and Sextes - two	, County of Actual County,
and, Bride Latricia L. Claston	of Meddrecker County State of Sadia
were by me united in marriage as authorized by a marriage light	Dendricks County, State of Indiana,
were by me united in marriage as authorized by a marriage license issued for t	nut purpose by the Clerk of the Circuit Court of Hendredan
Dated this 24 day of August , 1965	Signed on 5 7 7
	Official Designation Luther Party
Filed and recorded in accordance with the laws of the State of Indiana this	
	Signed Claude Lughes Clerk
	(Jerk

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County MALE Medical Examination Report Dated Date of Application FEMALE no orly Medical Examination Report Dated Name of Physician ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False statement—Whoever procures the issuance of a license to marry by FEMALE APPLICANT Date of Birth Previous Marital Status: Never Married Death | Divorce | Annulment | Last Marriage Ended By: Previous Marital Status: Never Married Number of Previous Marriages. White B Negro | Other | (specify)... Color or Race Last Marriage Ended By: Death □ Divorce □ Annulment □ Safo Usual Occupation Date of birth verified by: Birth Cert. Judicial Decree Color or Race Negro | Other | (specify)... Univers lecense Other (Specify)..... 1. Are you now or have you been adjudged, diagnosed or considered as: ☐ Birth Cert. ☐ Judicial Decree Of Unsound Mind? No D 2. Are you under guardianship as a person of unsound mind? 3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? Yes □ license 1. Are you now or have you been adjudged, diagnosed or considered as: If answer to 3 is "yes" has the cause of such condition been removed? No 🗆 Yes 🗌 4. Are you afflicted with a transmissible disease? No 🖾 Yes 🗆 Of Unsound Mind? No D Yes 🗌 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? No D 6. Are you now under the influence of intoxicating liquor? Yes 🗌 No 🖸 3. Are you afflicted with a transmissible disease? Yes [7. Are you now under the influence of a narcotic drug? Yes 🗆 No D Yes 🗌 4. Are you related to the groom closer than second cousin? No 🗆 8. Are you able to support a family? Yes 🖫 No 🗆 9. Are you likely to so continue? 5. Are you now under the influence of intoxicating liquor? Yes 🗆 Yes 🖸 No 🗆 10. Do you have minor children from one or more former marriages? No 🗆 Yes 🗌 (If yes, answer questions a, b, c) (a) List their full names, ages and addresses No D Address Occupation of father Willodian (b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for their support? Yes No Residence of father (if deceased so state) Birthplace of mother (State or foreign country) State of Indiana, Birthplace of father (State or foreign 12. Full maiden name of mother. Residence of mother (if deceased so Occupation of mother. Birthplace of mother (State or foreign co State of Indiana. HENDRICKS County of ... CONSENT OF PARENTS, PARENT OR GUARDIAN New Addres We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary... ... Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indiana, HENDRICKS County of ... State of Indiana, County of COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, theCourt by written order issued....County.....authorizes and directs the issuance of a marriage license to the above named parties. Be It Remembered, there was filed in my office a marriage license issued by the clerk of the Ludiche Circuit Court Janus Claine Winsted gay of august of Indiana dated the ... Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the 31st day of August at Clainfield , County of Hearden 1, Haven a Soffins Marion County, State of Delice one thousand nine hundred and Sixty two State of Indiana, Groom Hesbert Gaul Heiss, Jr. of Thester County, State of Internal and, Bride Janice Claime Winsted of Hesberks were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of Alexander Signed Harren a. Con Official Designation Christian Minister Dated this. day of Septem Filed and recorded in accordance with the laws of the State of Indiana this Circuit Court

Signed ..

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No	590	
File	aug.	11,1965
<u> </u>	ate of Applicat	. 3

MALE Medical Examination Report Dated Quegust 10, 1962	FEMALE Medical Examination Report Dated August 10, 1965
Name of Physician L. D. Horyt, M.A.	Name of Physician L. W. Wayt, M. 10.
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	stement—Whoever procures the issuance of a license to marry by any false statement, representa-
MALE APPLICANT	FEMALE APPLICANT
Name First P Middle Last	Name Offirst Middle Last
Date of Birth Month Day Year	Date of Birth Month Day Year
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	Residence Address Street or R. R. City County State
0024 M. Lenth Speedway Ind. Marion	Maiden Name if Different 90 - Danville, Indiana
Previous Marital Status: Never Married Number of Previous Marriages	and the second s
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation Pepe fitter	Color or Race White Negro Other (specify)
Date of birth verified by: Judicial Decree	Usual Occupation Unemployed
Other (Specify)	Date of birth verified by: Birth Cert. Judicial Decree
Of Unsound Mind?	Dother (Specify) Drive's License
2. Are you under guardianship as a person of unsound mind? No Yes 3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?
home for indigent persons? No Yes If answer to 3 is "yes" has the cause of such condition been removed? No Yes	An Imbecile? No Yes Of Unsound Mind?
4. Are you afflicted with a transmissible disease? No 🗗 Yes 🗆	2. Are you under guardianship as a person of unsound mind?
5. Are you related to the bride closer than second cousin? 6. Are you now under the influence of intoxicating liquor? No Yes	3. Are you afflicted with a transmissible disease?
7. Are you now under the influence of a narcotic drug?	4. Are you related to the groom closer than second cousin? No Yes
8. Are you able to support a family? 9. Are you likely to so continue? Yes No	5. Are you now under the influence of intoxicating liquor? No 🗸 Yes
10. Do you have minor children from one or more former marriages? No Yes (If yes, answer questions a, b, c)	6. Are you now under the influence of a narcotic drug-2
(a) List their full names, ages and addresses	7. Full name of father Than g & Banick
Name Age Address	Residence of father (if deceased so state) R. R. 3-13-12 90 - Danille
	Occupation of father Schwarz States Race of father white
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes□ No□	8. Full maiden name of mother Thomas Dennett
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state) R. 3-13-290-N an
11. Full name of father Henry G. Thechman Dath	Occupation of mother Housewife Race of mother White
Residence of father (if deceased so state) 5024 10 - Speedway	Birthplace of mother (State or foreign country).
Occupation of father breather Race of father lightles	State of Indiana,
Birthplace of father (State or foreign country).	County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
Residence of mother (if deceased so state) 5024 74.10 4 - Speeduras	and Dring Man Banish
Occupation of mother Advantage Race of mother Whater	Signed
Birthplace of mother (State or foreign country) Chio	New Address.
State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is toward to the information given	Subscribed and sworn to before me this day of the HENDRICKS Circuit Court
and approach is true and correct.	Cloude Trighes Clerk HENDRICKS Circuit Court
New Address.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this. // day of Queuet 1963	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Claude Hugher Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN	and consent of the other parent differences are
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	The second of the second secon
signs, state facts which render the consent of the other parent unnecessary	· Triple and some collection to the period of the collection of th
State of Indiana,	State of Indiana, County of
County of HENDRICKS 88:	County of
Signed Father	Signed Father
Signed Mother	Signed Mother
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of, 19,
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	. A marriage license having been refused to the above named parties, the
CountyCou	rt by written order issued
authorizes and directs the issuance of	a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE	AND MADDIAGE CERTIFICATION
Let at the little the there was filed in my office a marriage licens	a inqual to the state of the st
of Indiana dated the 15 day of August	, 19 6, authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my off	d Trina May Banick
1, des Max De glan	creby certify that on the 16th day of August
one thousand nine hundred and stifling lies	Brownshus a. 91. 1. 1
State of Indiana, Groom Lobiet of Diothe of	Marios Country St.
County and the control of the state of the s	at purpose by the Clerk of the Cinquit Court of
Dated this 16th day of August, 1962	. 8 2 1 1 0
	Signed ofer M. N. We feet
Filed and recorded in accordance with the laws of the State of Indiana this	ficial Designation Tastor a St. Malachy Church
	, P P
the state of the second section of the second section is the second section of the second section is	Clerk
	Circuit Court

Yes | Yes | Yes | Yes | Yes |

Yes D

Danville dite

o-Damile

, 19. 6. 2

cuit Court

ne parent

Father Mother 19..... ...Clerk

, the filed

Court

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STATE OF IN APPLICATION FOR MA

In.	
ARRIAGE TO	No. 591
ARRIAGE LICENSE	File 26
County	aug 11 101
FEMALE Medical E	Date of Application
Medical Examination Report Dated Name of Physician	aug 7 1962
ent-Whoever pro-	Ellett
ent-Whoever procures the issuance of a license	to marry by any false statement, represent
Name First FEMALE AP	PLICANT
Date of Birth Month	Kenna lad
Place of Birth (State or foreign country)	1943
Residence Address Street or R. B.	Indiana
Maiden Name if Different 49 Coats	will Hends India
Previous Marital Status: Never Married P Nu	
Last Marriage Ended Ry	orce Annulment
Color or Race White Day	
Jsual Occupation Secin - Chi	er (xpecify)
Oate of birth verified by: Birth Cert. Judi	cial Decree
U Other (Specify)	
 Are you now or have you been adjudged, diagn An Imbecile? 	The same of the sa
Of Unsound Mind?	State of the last
 Are you under guardianship as a person of un Are you afflicted with a transmissible disease? 	
4. Are you related to the groom closer than secon	nd cousin?
 Are you now under the influence of intexication Are you now under the influence of a narcotic 	ng liquor? No file V C
7. Full name of father Charles	augh Hamana
Residence of father (if deceased so state)	Deceased
Occupation of father Birthplace of father (State or foreign country	Race of father W
3. Full maiden name of mother Bertha	Jane Richardson
Residence of mother (if deceased so state)	Coalwille & R
Occupation of mother House	If Race of mother W
Birthplace of mother (State or foreign country	Indiana
tate of Indiana, ounty of HENDRICKS	I depose and state the information given in this application is true and correct.
Signed Sara and Ku	ineman
New Address / Spring S	Test Danville Ind
abscribed and sworn to before me this	any or august 1162
Claude Hughes	Clerk HENDRICKS Circuit Court
DISENT OF PARENTS, PARENT OR GUARDI	AN TO THE PERSON OF THE PERSON
e, the parents, of this applicant hereby give con-	sent for this marriage. If only one parent
ens, state facts which render the consent of the	other parent unnecessary
ate of Indiana, unty of HENDRICKS	
Signed	Fether
Signed	Mother
bscribed and sworn to before me this	day ofClerk
And the second s	d souther the
marriage license having been refused	to the above named parties, the
y written order issued arriage license to the above named parti	es.
D MARRIAGE CERTIFICATE	nducks circuit cour
	ng together as husband and wife
land anthorizing the soint	maman
co-wit: 25th day	of august
y certify that on the R.H. 3 &	County of Mandricker.
	State of Indiana
Luika County	, State of

	MARRIAGE LICENSE	NO. 27/
HENDRI	CKS County	File 26
MALE Medical Examination Report Dated Aug 7 100	County	aug 11 10
0.000 11962	FEMALE	Date of Application
Name of Physician John Ellitt	Medical Evaniant	
ALL QUESTIONS MUST BE ANSWERED. Chapter 100	Name of Dhank	dung 7 1960
tion or pretense shall be fined in any sum not exceeding five hundred dellars (False sta	tement w	Ellett
MALE APPLICANT	whoever procures the issuance of a license	
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name First Middle August Middle August August August Mark August Middle August Middle Midd	. intense	to marry by any false statement, represents
Date of Birth Month	Name First FEMALE A	PPLICANT
mine 25 Bear	Date of Birth	Micro
Place of Birth (Say or foreign country)	- Color	Vinnama
Residence Address Street or R. R. City Court	Place of Birth (State or foreign chantry)	24 Year
Eminence Morca State	Residence Address	2 1773
Previous Marital Status: Never Married Number of Previous Marriages	CR2 Bastreet or R. B.	o City Country
V. t. Manniaga Freded Bur. Doubt C.	Maiden Name if Different 49 Coal	levelle Hends Inde
Last Marriage Ended By: Death Divorce Annulment	Previous Marter a	The second second second
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married	Number of Previous Manual
	Last Marriage Ended By: Death D	THE RESERVE TO SHARE THE PARTY OF THE PARTY
Date of birth verified by: Birth Cert. Judicial Decree	Color on P	Ivorce Annulment
	White Negro O	ther (specify)
Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?	Usual Occupation Secien - CO.	Pin
An Imbecile? Of Unsound Mind? Noti Yes	Date of birth verified by: Birth Cert.	delly -
2. Are you under guardianship as a person of unsound minds	Other (Specify)	dicial Decree
3. Are you now or have you been within five (5) years an inmate of a county poylum or home for indigent persons?		
If answer to 3 is "yes" has the cause of such condition been removed.	 Are you now or have you been adjudged, diag An Imbecile? 	mosed or considered as:
4. Are you afflicted with a transmissible disease?	Of Unsound Mind?	No E Yes
5. Are you related to the bride closer than second cousin? No Yes Yes Yes		Ne B Yes
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a narcotic drug?	Are you under guardianship as a person of u Are you afflicted with a transmit it.	insound mind! No E You
8. Are you able to support a family?	3. Are you afflicted with a transmissible disease	No C - Yes D
9. Are you likely to so continue?	4. Are you related to the groom closer than sec	ond cousin?
10. Do you have minor children from one or more former marriages?	5. Are you now under the influence of intoxical	ting liquor? No D You D
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	6. Are you now under the influence of a narco	tie drug? No E Yes D
Name Age Address	7. Full name of father Charles	augh ternama.
	Residence of father (if deceased so state)	pleceased
	Occupation of father	Bace of father W
	Birthplace of father (State or foreign country	n Illinois
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Bertha	Jane Richardra
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state)	Continillation
11. Full name of father Marvin Richard Camphell	71.	- Lucione of the
Residence of father (if deceased so state)	Occupation of mother Abuseu	Race of mother
Comparison of the Light Co	Birthplace of mother (State or foreign countr	& Indiana
Occupation of father July Race of father 20	State of Indiana,	
Birthplace of father (State or foreign country)	County of HENDRICKS	I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Isllean Securion flor		I . I was a way to be a series
Residence of mother (if deceased so state) Thunkel and	SignedSougant	menge
Occupation of mother Assissibility Race of mother W.	New Address // Saring	Stut Vanville and
Birthplace of mother (State or foreign country) Sllenoca	Subscribed and owners to before me this III	was Because "60
state of Indiana, I depose and state the information given	On a selection to better the case	
County of HENDRICKS ss: in this application is true and correct.	Claude Sugar	Clerk HENDRICKS Circuit Court
Signed Manney amplely		
New Address.	CONSENT OF PARENTS, PARENT OR GUARD	
ubscribed and sworn to before me this 1/ The day of aug 1962	We, the parents, of this applicant hereby give co	nsent for this marriage. If only one parent
Carell Freghlesfierk HENDRICKS Circuit Court	signs, state facts which render the consent of the	e other parent unnecessary
ONSENT OF PARENTS, PARENT OR GUARDIAN		
Ve, the parents, of this applicant hereby give consent for this marriage. If only one parent		A STATE OF THE PARTY AND ADDRESS.
gns, state facts which render the consent of the other parent unnecessary		AND THE RESIDENCE OF THE PARTY
	State of Indiana,	
	County of HENDRICKS	
ate of Indiana,		Pather
ounty of HENDRICKS 88:	Signed	Maker
Signed Musik Campally Father	Signed	THE RESERVE AND ADDRESS OF THE PARTY OF THE
Signed hall to many the force of the force o	Subscribed and sworn to before me this	day of
abscribed and sworn to before me this 11 th day of 1962	AND THE RESIDENCE OF THE PARTY OF THE PARTY.	Cerk
Canale Hughes Clerk		
		to the above named parties, the
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT.	A marriage license liaving	and filed
authorizes and directs the issuance of	a marriage neemse to	-, ,
TOTAL TICENSE	AND MARKIAGE	nauck Circuit Court
Be It Remembered, there was filed in my office a marriage license	issued by the clerk of the	
The Memembered, there was filed in my office a marray to	issued by the clerk of the	ing together as human
Indiana dated the 6 th day of Chilgust	Scrapare 50	Construction of the Constr
e it further remembered, the following marriage certificate was filed in my offi	ce, to-wit:	not august
Donald the following marriage certificate was filed in my open	reby certify that on the 3 day	Country of Hendricker.
e thousand nine hundred and Sixty-Time at	New Hinchester	Sure of Indiana
e thousand nine hundred and Stifting - Live at	Moregand Count	y, State of Delione
ate of Indiana, Groom Maryer tichael Compalle, 51.01		y, State of Luicky
d, Bride Latajane Kinnaman of	the Clerk of the Circuit Cour	t of Headward
ere by me united in	at purpose by the Clerk of the	LE WALLSON
unty.	0 00 /00	aretymorn
ted this 25 the day of August , 1962	Signed Small The	Dinclester Cheeten
	Roial Designation Renesles Con	£ 10.62
		The Lead Clerk
led and recorded in accordance with the laws of the State of Indiana this	Claude	Sughes Circuit Court
State of the state	igned Leubricks	The state of the s
	Contraction of the Contraction o	

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

_County

HENDRICKS

No	2/2	Marie and
File	26	
r ne	1	

.....Circuit Court

age of Application MALE FEMALE Medical Examination Report Dated. Medical Examination Report Dated_ Name of Physician. Name of Physician. ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT FEMALE APPLICANT First Middle arry Name Middle Date of Birth Place of Birth (State or foreign country Residence Address Inda Previous Marital Status: Never Married Number of Previous Marriages Maiden Name if Different Last Marriage Ended By: Death Divorce Annulment Previous Marital Status: Never Married Number of Previous Marriages. Color or Race White Negro Other (specify).... Last Marriage Ended By: Death Divorce Annulment Usual Occupation Color or Race Date of birth verified by: Birth Cert. Judicial Decree Negro □ Other □ (specify). Other (Specify) Wunis Usual Occupation Are you now or have you been adjudged, diagnosed or considered as: Date of birth verified by: | Birth Cert. | Judicial Decree Yes 🗆 Of Unsound Mind? Yes 🗌 Other (Specify). 2. Are you under guardianship as a person of unsound mind? Yes 🗌 3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? No ☐ Yes ☐ 1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? If answer to 3 is "yes" has the cause of such condition been removed? No Yes Of Unsound Mind? 4. Are you afflicted with a transmissible disease? No Z Yes 🗆 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? No D Yes 🗌 No D Yes 🗌 6. Are you now under the influence of intoxicating liquor? No 🔃 Yes 🗆 3. Are you afflicted with a transmissible disease? 7. Are you now under the influence of a narcotic drug? No 💆 Yes 🗌 8. Are you able to support a family? 4. Are you related to the groom closer than second cousin? Yes 🗹 No 🗆 Yes 🗌 9. Are you likely to so continue? 5. Are you now under the influence of intoxicating liquor? No 🗆 10. Do you have minor children from one or more former marriages? No 🗆 Yes 🗆 6. Are you now under the influence of a narcotic drug? (If yes, answer questions a, b, c) (a) List their full names, ages and addresses 7. Full name of father of owners Name Age Address Residence of father (if deceased so state)...... Occupation of father Suck Driver Birthplace of father (State or foreign country) (b) Are you supporting or contributing to their support? Yes | No 🗆 (c) Are you complying with any court order or orders issued for their support? Residence of mother (if deceased so state). No 🗆 Yes 🗆 11. Full name of father... Occupation of mother Houseur Birthplace of mother (State or foreign country) Occupation of father ... Birthplace of father (State or foreign State of Indiana. I depose and state the information given in this application is true and correct. County of .. 12. Full maiden name of mother... Residence of mother (if deceased so state) R.R. 2-Box 2290 Occupation of mother Housewife Birthplace of mother (State or foreign country) Datal Bullant Subscribed and sworn to before me this. State of Indiana. ss: I depose and state the information given in this application is true and correct HENDRICKS HENDRICKS New Address. CONSENT OF PARENTS, PARENT OR GUARDIAN Subscribed and sworn to before me this ... We, the parents, of this applicant hereby give consent for this marriage. If only one parent HENDRICKS CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, State of Indiana, HENDRICKS County of ... County of HENDRICKS Signed Signed.Father .Father Signed. Signed. .Mother Subscribed and sworn to before me this ... Subscribed and sworn to before me this...... COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the Court by written order issued and filedauthorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Be It Remembered, there was filed in my office a marriage license issued by the clerk of the Sendresse Circuit Court of Indiana dated the , 19.63, authorizing the joining together as husband and wife Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the 28 th one thousand nine hundred and State of Indiana, Groom. A Arri were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of.County, State of Dated this. Signed ... Official Designation. Filed and recorded in accordance with the laws of the State of Indiana this...... 31 st

Health under Authority Chap. 126, Ind. Acts 1905 APPLICATION FOR	OF INDIANA R MARRIAGE LICENSE No. 593
	MARRIAGE LICENSE No. 593
	RICKS County File 26
Medical Examination Report Dated August 8, 1913	- aunt
Name of Physician Lloyd Lever 22 0	FEMALE Date of Application
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". Name MALE APPLICANT Name Middle Date of Birth Day	Medical Examination Report Dated Quant
MALE APPLICANTS.	statement Whom
Name First Middle	mover procures the issuance of a license to married
Date of Birth Day Sodia	Name FEMALE APPLICANT
Place of Birth (State or foreign country)	Date of Birth Middle
Residence Address Street or R. R. City, Louisiana	Jonth Quel of fant
R. K. 2 Clayton Indian County State	Place of Birth (State or foreign country) y
Previous Marital Status: Never Married Number of Previous Marriages.	Residence Address R. Street or R. R. Street of R. R. City Indian
Last Marriage Ended By: Death Divorce Annulment	Maiden Name if Different Clay County State
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Po
Usual Occupation Returns	Last Marriage End I D
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Color or Race
1. Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation
Of Chaoding Mind?	VID-01 22
2. Are you under guardianship as a person of unsound mind? 3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? If answer to 3 is "yes" has the cause of such condition been removed?	Date of birth verified by: Birth Cert. Judicial Decree
If answer to 3 is "yes" has the cause of such condition been removed?	Are you now or have you been adjudged, diagnosed or considered as:
5. Are you related to the bride the bride to	Of Unsound Mind?
No Ves T	2. Are you under guardianship as a person of unsound mind?
8. Are you able to support a family? No P Yes	amicted with a transmissible discourse
9. Are you likely to so continue?	4. Are you related to the groom closer than any
10. Do you have minor children from one or more former marriages? (If yes, answer questions a, b, c) (a) List their full names, ages and addresses	To you now under the influence of interjection !
Name	6. Are you now under the influence of a narcotic drug? 7. Full name of father
Age Address	Residence of father (if deceased so state) Tenfances
	Occupation of father
(b) Are you supporting or contributing to their support?	Birthplace of father (State or foreign country)
their support?	8. Full maiden name of mother. Helen Moss Beck
11. Full hame of father 1000 John	Residence of mother (if deceased so state) R. R. 2 - Clayton and
Residence of father (if deceased so state) Decumental	Occupation of mother Attack Respect Race of mother White
Birthplace of father (State or foreign country)	Birthplace of mother (State or foreign country)
12. Full maiden name of mother Blanche 21 Blanch	State of Indiana, County of HENDRICKS as: I depose and state the information given in this application to the information given
Residence of mother (if deceased so state) Declared	TO P 1/0
Occupation of mother Race of mother white	Signed A capal James Henson
Birthplace of mother (State or foreign country)	New Address. Subscribed and sworn to before me this 14 day of Quage 7 13
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Classe Hushes Got HENDRICKS
Signed & Clifferd O Budin	Gerk Court
New Address	CONSENT OF PARENTS, PARENT OR GUARDIAN
Chule The day of Mugust, 1962	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
CONSENT OF PARENTS, PARENT OR GUARDIAN	igns, state facts which render the consent of the other parent unnecessary
parents, of this applicant hereby give consent for this marriage. If only one parent	
signs, state facts which render the consent of the other parent unnecessary	
State of Indian	tate of Indiana, HENDRICKS
County of HENDRICKS	ounty of
Signed Father	Signed Mother
Signed	Signed Mother bscribed and sworn to before me this day of 15
	Discribed and sworn to before me this
COMPLETE COMPLETE	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A	marriage license having been refused to the above named parties, the
in	written order issued
authorizes and directs the issuance of a management	
Be It Remembered, there was filed in my office a marriage license issu	ued by the clerk of the He wheele Circuit Court
of Indiana dated the 18 day of August	, 19 62, authorizing the joining together as husband and wife
(l) Add. d () ()	Opal Tourse
Be it further fremembered, the following marriage certificate was filed in my office, to hereby	certify that on the 18 and any of august
one thousand nine hundred and Aidto tus	Alendre Namun County of
State of Indiana, Groom Cliffon Broken of	Jendricks County, State of Indiana
and, Bride Chal Lange of Sten	drichs County, State of Dintinks
County. County.	rpose by the Clerk of the Circuit Court of
Dated this 20 th day of any	R B Pickard
auty of many transfer of the state of the st	Designation P
Filed and recorded in	day of august 10 Clerk
Filed and recorded in accordance with the laws of the State of Indiana this	Clauds St. Ghis Circuit Court
	Hen arions

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

Jua.

County Date of Application MALE FEMALE Medical Examination Report Dated Medical Examination Report Dated Name of Physician Name of Physician. ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT FEMALE APPLICANT Name First Middle . First Date of Birt Date of Birth Place of Birth Previous Marital Status: Never Married Number of Previous Marriages Last Marriage Ended By: Death Divorce Annulment Previous Marital Status: Never Married Number of Previous Marriages. White Negro Other (specify) Last Marriage Ended By: Death | Divorce | Annulment | Usual Occupation Color or Race Date of birth verified by: Birth Cert. | Judicial Decree Usual Occupation Other (Specify)... Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Date of birth verified by: | Birth Cort. | Judicial Decree Yes 🗌 Of Unsound Mind? Other (Specify) .. Yes 🗌 2. Are you under guardianship as a person of unsound mind? Yes 🗆 1. Are you now or have you been adjudged, diagnosed or considered as: 3. Are you now or have you been within five (5) years an inmate of a home for indigent persons? county asylum or No Yes An Imbecile? No D If answer to 3 is "yes" has the cause of such condition been removed? No Yes Of Unsound Mind? 4. Are you afflicted with a transmissible disease? No 🗷 Yes 🗌 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? No Yes 🗌 6. Are you now under the influence of intoxicating liquor? Yes 🗌 No Z 3. Are you afflicted with a transmissible disease? 7. Are you now under the influence of a narcotic drug? 4. Are you related to the groom closer than second cousin? 8. Are you able to support a family? No 🗌 9. Are you likely to so continue? 5. Are you now under the influence of intoxicating liquor? No 🗆 10. Do you have minor children from one or more former marriages? No Yes 6. Are you now under the influence of a narcotic drug (If yes, answer questions a, b, c) (a) List their full names, ages and addresses 7. Full name of father .. Age Address Occupation of father ... Birthplace of father (State or foreign country). (b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for their support? Yes 🗌 No 🗆 Yes 🗆 No 🗆 Birthplace of mother (State or foreign country). Occupation of father. Birthplace of father (State or foreign country) State of Indiana. depose and state the information given this application is true and correct. 12. Full maiden name of mother. County of .. New Address. Birthplace of mother (State or foreign country) ... State of Indiana, Subscribed and sworn I depose and state the information given in this application is true and correct. HENDRICKS County of ... HENDRICKS CONSENT OF PARENTS, PARENT OR GUARDIAN Subscribed and sworn to before me this. We, the parents, of this applicant hereby give consent for this marriage. If only one parent 19.6 2 HENDRICKS .Circuit Court signs, state facts which render the consent of the other parent unnecessary. CONSENT OF PARENTS, PARENT OR We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary... State of Indiana, State of Indiana, HENDRICKS County of.... County of COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the in authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Be It Remembered, there was filed in my office a marriage license issued by the clerk of the Thanksells Circuit Court day of Cugus erry Edwin anderson ..., authorizing the joining together as husband and wife I and Barbara Ellen Cagle Be it further remembered, the following marriage certificate was filed in my office, to-wit: 1, Fall Taylor hereby certify that on the 24 d day of Assenst one thousand nine hundred and Sixty - two at Clayton , County of Herdricks, Jerry Educis anderson of Hendricke County, State of Indiana State of Indiana, Groom and, Bride Barbard Eller Cagle of Hudricks County, State of Indians, were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of Hendichs Dated this. Chiquest , 19 62 Official Designation Ministey Mithodist Church Filed and recorded in accordance with the laws of the State of Indiana this...... 1 st day of September , 19 62. Signed Claude Dryfus Clerk

Hendricks Circuit Court

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And Dug Dug

APPLICATION FOR MARRIAGE LICENSE

No	59	S		
File		1000	1000	
a	ma	5/	-11	2/

MALE	GCKS File
Medical Examination Report Dated Chu 13	County
Name of Physician Khu Ell. # 5	FEMALE Date of Application
	Modi
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana	Name of Physicial Dated Chang 17-1963
MALE	statement with
Name First	moeyer procures the Issuance of a license to
ALL QUESTIONS MUST BE ANSWERED. Chapter 126. Indiana Acts 1905 prescribes "False tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". Name MALE APPLICANT Name Date of Birth Month	Division to marry by any false statement, representa-
Date of Birth Day Year	Name FEMALE APPLICANT
Place of Birth (State or foreign country)	Date of Birth Marbrie Middle
Lerry Houte 21	// Month
Residence Address Street or R. R. City, County State /	State or foreign country) 1943
The state of the s	Residence Address Street or R. R.
of Frevious Marriages	Maiden Name if Different States of County States
Last Marriage Ended By: Death Divorce Annulment	Ond.
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
O 00 ' (specify)	Last Marriage Ended By: Death Co.
Date of birth verified by: Birth Cost	Death Divorce Annulment
O della Degree	Color or Race White Negro Cl Out
Other (Specify) Are you now or have you been adjuded at	Usual Occupation Walley (specify)
1. Are you now or have you been adjudged, diagnosed or considered as: Of Unsound Mind?	Data as the
2. Are you under guardianship as a person of	Date of birth verified by: Birth Pert. Dudicial Decree
3. Are you now or have you been within five (5) years an inmate of a county asylum or	Copecity)
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	1. Are you now or have you been adjudged, diagnosed or considered as:
Are you amicted with a transmissible disease?	Of Unsound Mind?
5. Are you related to the bride closer than second cousin? 6. Are you now under the influence of interferable No. Yes	
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a narcotic drug? No. Yes No. Yes	as a person of unsound mind?
8. Are you able to support a family?	Transmissible disease?
9. Are you likely to so continue? 10. Do you have minor children from one or any of the little of t	to the groom closer than second cousin?
(If yes, answer questions a, b, c) Yes	limited the influence of intoxicating liquor?
(a) List their full names, ages and addresses	under the influence of a naregtic drug?
Name Age Address	an name of rather left for All Vous
	Residence of father (if deceased so state) Stalesville
	Occupation of father Allisa state Race of father 4
	Birthplace of father (State or foreign country) Andliana
(c) Are you complying with any court order or orders issued for	8. Full maiden name of mother Blosses Emagline Fisher
Yes No	Residence of mother (if deceased so state). Dules wille
11. Full name of father Sum Yth Ress	Occupation of mother Park
Residence of father (if deceased so state) Challwille	Race of mother
Occupation of father Charles deacher Race of father W	Birthplace of mother (State or foreign country). In diana
Birthplace of father (State or foreign country) Andraud	State of Indiana,
12. Full maiden name of mother Margaret any Wamples	County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
Residence of mother (if deceased so state) Loalesville	y your 10 Hill
13/10/10/13/00/0-	Signed My Showard
Birthplace of mother (State or foreign country) Race of mother	New Address
State of Indiana.	Subscribed and sworn to before me this day of aug 1962
County of HENDRICKS I depose and state the information given in this application is true and correct.	Claude) Jughes Clerk HENDRICKS Circuit Court
Signed I head ore Une I ross	
New Address	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this 2/ day of Que 1962	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Claude I he dies - urunice	signs, state facts which render the consent of the other parent unnecessary
Circuit Court	signs, state racts which relief the consent of the other parent dimercessary.
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents of this services of this services.	
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	11
signs, state facts which render the consent of the other parent unnecessary	
State of Y to	State of Indiana, County of HENDRICKS 88:
State of Indiana, County of HENDRICKS	Father
Le 11	Signed
Signed A Slew On Grange Father	Signed
Subscribed and sworn to before me this 21 day of ONLY 1962	Subscribed and sworn to before me this day of the day o
	Clerk
Claude Hughes Clerk	The state of the s
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT.	A marriage license having been refused to the above named parties, the
Country	t by written order issued
in	a marriage license to the above named parties.
	COMPANIE CATE
Be It Remembered, there was filed in my office a marriage license	issued by the clerk of the
Me M Remembered, there was filed in my office a marriage icense	issued by the clerk of the
of Indiana dated the 25 day of August	Marie de le monte
Be it further remembered, the following marriage certificate was filed in my office	e, to-wit:
the following marriage certificate was field in my special to the following marriage certificate was field in my special to the following marriage certificate was field in my special to the following marriage certificate was field in my special to the following marriage certificate was field in my special to the following marriage certificate was field in my special to the following marriage certificate was field in my special to the following marriage certificate was field in my special to the following marriage certificate was field in my special to the following marriage certificate was field in my special to the following marriage certificate was field in my special to the following marriage certificate was field in my special to the following marriage certificate was field in my special to the following marriage certificate was field in my special to the following marriage certificate was field to the following marriage certificate was field to the following marriage with the following marriage certificate was field to the f	
one thousand nine hundred and Sinty two at	VIAI VIAI LONGRAMMINING
C. C	VID - A 1 1 PT COUNTY, DOWN
and Die	Huducks County, State of The Licher
and, Bride Maryrie De Silbanson	the Clerk of the Circuit Court of
were by me united in marriage as authorized by a marriage license issued for tha County.	t purpose by the comment
	() Stevenson
day of	Signed Minister St. ville Chris Ch.
Offi	cial Designation Minister 19 62
Filed and recorded in accordance with the laws of the State of Indiana this	31 day of 10 76 hest Clerk
Sie	med Clandle Growit Court
	Nemman

Dated this.

Filed and recorded in accordance with the laws of the State of Indiana this

Form Prescribed By Indiana State Board of Health under Authority

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE File. Chap. 126, Ind. Acts 1905 Date of Application HENDRICKS County Medical Examination Report Dated_ Medical Examination Report Dated. Name of Physician_ Name of Physician. ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False statement—Whoever procures the issuance of a license to marry by any false statement, representation or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT FEMALE APPLICANT Name 940 Place of Birth (State or foreign country) Residence Address Street or R. R. Residence Addres 7777W. Was Maiden Name if Diffe Previous Marital Status: Never Married Number of Previous Marriages Last Marriage Ended By: Death Divorce Annulment Number of Previous Marriages Previous Marital Status: Never Married Color or Race Negro 🗆 Last Marriage Ended By: Death | Divorce Annulment | White W Other (specify) Usual Occupation Negro Other (specify)... Color or Race Date of birth verified by: Birth Cert. Dudicial Decree Usual Occupation Other (Specify) .. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Date of birth verified by: Birth Cert. | Judicial Decree Yes 🗌 Of Unsound Mind? Yes 🗌 Other (Specify). 2. Are you under guardianship as a person of unsound mind? Yes [1. Are you now or have you been adjudged, diagnosed or considered as: 3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? An Imbecile? If answer to 3 is "yes" has the cause of such condition been removed? No 🗆 Yes 🗌 Of Unsound Mind? No Yes No Yes 4. Are you afflicted with a transmissible disease? 2. Are you under guardianship as a person of unsound mind? 5. Are you related to the bride closer than second cousin? No Yes No Yes 6. Are you now under the influence of intoxicating liquor? 3. Are you afflicted with a transmissible disease? No Yes 7. Are you now under the influence of a narcotic drug? No Yes 4. Are you related to the groom closer than second cousin? No Yes 8. Are you able to support a family? Yes No 🗆 5. Are you now under the influence of intoxicating liquor? 9. Are you likely to so continue? Yes No No Yes 10. Do you have minor children from one or more former marriages? No Yes 6. Are you now under the influence of a narcotic dru No Yes (If yes, answer questions a, b, c) (a) List their full names, ages and addresses Name Address Age Residence of father (if deceased so state) .. Birthplace of father (State or foreign country) (b) Are you supporting or contributing to their support? 8. Full maiden name of mother. Yes 🗌 No 🗆 (c) Are you complying with any court order or orders issued for their support? No 🗆 11. Full name of father Birthplace of mother (State or foreign country) Occupation of father ... State of Indiana. Birthplace of father (State or foreign I depose and state the information given in this application is true and correct. County of .. 12. Full maiden name of mother. Residence of mother (if deceased so state) Occupation of mother Birthplace of mother (State or foreign country). State of Indiana, ss: I depose and state the information given in this application is true and correct. HENDRICKS HENDRICKS CONSENT OF PARENTS, PARENT OR GUARDIAN ang We, the parents, of this applicant hereby give consent for this marriage. If only one parent 196 2 HENDRICKS signs, state facts which render the consent of the other parent unnecessary. CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary.. State of Indiana, HENDRICKS State of Indiana, County of HENDRICKS County of Signed. .Mother Mother Subscribed and sworn to before me this... Subscribed and sworn to before me this... COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, theCounty..... Court by written order issued..... authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Sending Circuit Court Be It Remembered, there was filed in my office a marriage license issued by the clerk of the Court , authorizing the joising together as husband and wife fered the following marriage certificate was filed in my office, to-wit: hereby certify that on the 2 one thousand nine hundred and State of Indiang, Groom. Nenducks County, State of Indianaof.....

Official Designation Thunester

.....Circuit Court

Signed.

Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS County MALE uta5-196 Medical Examination Report Dated Date of Application FEMALE Name of Physician Medical Examination Report Dated Change ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False statement—Whoever procures the issuance of a license to marry by any false state. FEMALE APPLICANT Last Date of Birth Month Year 3 Date of Birth Place of Birth (State or foreign country 194 Previous Marital Status: Never Married Number of Previous Marriager Death Divorce Annulment Last Marriage Ended By: Previous Marital Status: Never Married Number of Previous Marriages. White 2 Negro | Other | (specify)... Color or Race Last Marriage Ended By: Death □ Divorce □ Annulment □ Date of birth verified by: Birth Cert. Dudicial Decree Color or Race Negro Other (specify). Other (Specify). Usual Occupation 1. Are you now or have you been adjudged, diagnosed or considered as: Date of birth verified by:

Birth Cert.

Judicial Decree Of Unsound Mind? Yes 🗆 2. Are you under guardianship as a person of unsound mind? Yes | Yes | Other (Specify)..... 3. Are you now or have you been within five (5) years an inmate of a home for indigent persons? 1. Are you now or have you been adjudged, diagnosed or considered as: ounty asylum or No Yes If answer to 3 is "yes" has the cause of such condition been removed? An Imbecile? No 🛮 Yes 🗆 No [] Yes [] 4. Are you afflicted with a transmissible disease? Of Unsound Mind? Yes 🗆 No 🖭 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? No Yes 🗆 No D Yes 🗆 6. Are you now under the influence of intoxicating liquor? No D No [3 3. Are you afflicted with a transmissible disease? Yes 🗆 7. Are you now under the influence of a narcotic drug? Yes 🗆 No 🗖 Yes 🗌 Yes 🗆 4. Are you related to the groom closer than second cousin? 8. Are you able to support a family? Yes 🗌 No 🗆 9. Are you likely to so continue? No D Yes [Yes 🗌 5. Are you now under the influence of intoxicating liquor? No [10. Do you have minor children from one or more former marriages? No 🗆 Yes 🗆 Yes 🗌 6. Are you now under the influence of a narcotic drug? (If yes, answer questions a, b, c) (a) List their full names, ages and addresses No O Yes [Name Age Address Residence of father (if deceased so state 52/180 Occupation of father aborer Birthplace of father (State or foreign country (b) Are you supporting or contributing to their support? Yes 🗌 No [(c) Are you complying with any court order or orders issued for their support? Yes 🗌 No 🗆 11. Full name of father..... Occupation of mother Couleging Residence of father (if deceased so state) Birthplace of mother (State or foreign country) Occupation of father Setter State of Indiana. Birthplace of father (State or foreign country) County of ... 12. Full maiden name of mother mari Residence of mother (if deceased so state) Occupation of mother ouse und Birthplace of mother (State or foreign country) That in State of Indiana, I depose and state the information given in this application is true and correct. HENDRICKS County of .. CONSENT OF PARENTS, PARENT OR GUARDIAN New Address. We, the parents, of this applicant hereby give consent for this marriage. If only one parent Subscribed and sworn to before me this. signs, state facts which render the consent of the other parent unneces 2 ann Do 19 HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary... State of Indiana, HENDRICKS County of ... State of Indiana, HENDRICKS County of Signed... Father Signed.. Signed... Subscribed and sworn to before me this Subscribed and sworn to before me this...... COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the authorizes and directs the issuance of a marriage license to the above named parties. Be It Remembered, there was filed in my office a marriage license issued by the clerk of the .., 19.62, authorizing the joining together as husband and wife day of august Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the County, State of ... Andrew one thousand nine hundred and. mald Levery Morgan of Hendricke ... County, State of Andiene State of Indiana, Groom. Things of Marion were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of County. September, 19 62 Dated this Signed Official Designation. Clerk Filed and recorded in accordance with the laws of the State of Indiana this

Signed ..

MALE

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No	598
File	Book 26
6	Date of Application

......Circuit Court

MALE Medical Examination Report Dated and 25-1912	FEMALE Medical Examination Report Dated Que gust 7-1962
Name of Physician Loyd Zenry m D.	Name of Physician Lord on Verry on O
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False s	tatement—Whoever procures the issuance of a license to marry by any false statement, representa-
MALE APPLICANT	
Name Spirst Middle Last	Name O First Middle
Date of Birth Month Day Year	Date of Birth Month Kay Sentry
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State A	Residence Address Street or B. B. D. Bridiana
1933 Cunningham I'd Speedway Mar. dad	Maiden Name if Different Stage St. Danville Vends. Inc
Previous Marital Status: Never Married Number of Previous Marriages.	Marden Name it Different
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation armed Services	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree Other (Specify)	Usual Occupation Clerk
1. Are you now or have you been adjudged, diagnosed or considered as:	Date of birth verified by: Birth Cert. Judicial Decree
Of Unsound Mind?	Other (Specify) Drevers License
3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind?
4. Are you afflicted with a transmissible disease? No Yes 5. Are you related to the bride closer than second cousin? No Yes	2. Are you under quardianship as a person of uncount winds
6. Are you now under the influence of intoxicating liquor?	3. Are you afflicted with a transmissible disease? No Yes No
7. Are you now under the influence of a narcotic drug? 8. Are you able to support a family? Yes No Yes	4. Are you related to the groom closer than second cousin?
9. Are you likely to so continue? 10. Do you have minor children from one or more formance.	5. Are you now under the influence of intoxicating liquor? No Yes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	6. Are you now under the influence of a narcotic drug? No Yes
Name Age Address	7. Full name of father Suren & Ventry
	Residence of father (if deceased so state) 192 110 The Land
	Birthplace of father (State or foreign country) Indianapole &
(b) Are you supporting or contributing to their support? Yes \(\) No \(\)	8. Full maiden name of mother Markine Walle
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state) 192 200 Wigh Janvel
11. Full name of father when N. Okers	Occupation of mother Clerk Race of mother W
Residence of father of deceased so state) 93 3 Curringhan RA Speed	cay Birthplace of mother (State or foreign country Ludlang golis Ind.
Occupation of father (State of State of Father W	State of Indiana,
Birthplace of father (State or foreign country) Washington Sudeau 12. Full maiden name of mother Communication of marking Hammil	County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
Residence of mother (if deceased so state) hand when he sheet was	1
Occupation of mother dus ingle Race of mother w.	Signed Mandra Kay Senty
Birthplace of mother (State or foreign country) Brockton Illo.	New Address
County of HENDRICKS I depose and state the information given in this application is true and correct.	
Signed Donald Ray Cheix	Claude Mudes Clerk HENDRICKS Circuit Court
New Address	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this 25 day of Caragant, 165	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Claude Hangled : Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
signs, state facts which render the consent of the other parent unnecessary	
to targed Statement of Marky	
attack of	State of Indiana,
State of Indiana, County of HENDRICKS Ss:	County of HENDRICKS ss:
Signed Yokan IL Colors	Signed Father
Signed Mother	SignedMother
Subscribed and sworn to before me this 2 day of august, 1962	Subscribed and sworn to before me thisday of
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	A marriage license having been refused to the above named parties, the
County	t by written order issued
inauthorizes and directs the issuance of	a marriage license to the above named parties
RETURN OF MARRIAGE LICENCE	
- the my office a marriage license	isomed by the last cut
Day of Direction	19. 6. authorizing the joining together as head and wife
The remembered, the following marriage certificate was filed in my offi	to to the
he he	reby certify that on the 2 nd day of September
(/) at	a sample.
nd, Bride Sandia Kais Senter	County, State of Indiana
overe by me united in marriage as authorized by a marriage license issued for the	Lendricke County, State of Indiana,
pated this 2nd	purpose by the Clerk of the Circuit Court of Lenducker
day of Deplember , 19 63	Pa Da
Offi	Signed Artest D. Clayton icial Designation Netholist Division
iled and recorded in accordance with the laws of the State of Indiana this	4 th day of September 1962
	gned Claude Highes Clerk
	Teadricke Circuit Court

dra Hay Leutry Be it further remembered, the following marriage certificate was filed in my office, to-wit: Labert B. Clayton hereby certify that on the and day of September one thousand nine hundred and Souty - two at Denirle , County of Hendicko, State of Indiang, Groom Worseld akers of Marion County, State of Indiana Dentey of Hendricke County, State of Indiana, and, Bride Sandia Dated this .. Official Designation methodist minister Filed and recorded in accordance with the laws of the State of Indiana this. 4th day of September , 1962

Signed Claude Highes Clerk Headricke Circuit Court

Indiana State Board of Health under Authority Chap. 126, Ind. Acts 1905 APPLICATION FOR	MARRIAGE LICENSE No. 599	
HENDR	ICKS File	
MALE	County	
Medical Examination Report Dated (Ug 27-62 Name of Physician David B 77000	FEMALE Date of Application Medical Examination	
ALL QUESTIONS MUST BE ANSWERED CO.	Medical Examination Report Dated Que 9 16-1962	
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False s tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name First Middle, Loston	statement—Whoever program of the Haggard	
Name First Middle	procures the issuance of a license to marry by any false statement, represent	
Date of Birth Month Prederick Parsons Oh	Name FEMALE APPLICANT	
Place of Birth (State or foreign country)	Date of Birth Andra Middle 2 Last	
St Touis	month Day trakes	
Residence Addrass Street of R. R. City County State	Place of Birth (State or foreign country) Residence Address Residence Address	
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Average of City County State	
Last Marriage Ended By: Death Divorce Annulment	- tungue our.	
Color of Rece White News 7 Cu	Previous Marital Status: Never Married Number of Previous Marriages	
Usual Occupation Bank 7 18 161	Last Marriage Ended By: Death Divorce Annulment	
Date of birth verified by: Birth Cert. Dudicial Decree	Color or Race White Street	
Other (Specify)	Usual Occupation Other (specify)	
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Of Unsound Mind? Yes	Date of birth verified by: Birth Cert. Judicial Decree	
2. Are you under guardianship as a person of unsound mind?	U Other (Specify)	
home for indigent persons?	Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?	
A Are you afflicted with a transmissible discuss? No Yes	Of Unsound Mind?	
5. Are you related to the bride closer than second cousin? Yes Yes	2. Are you under guardianship as a person of unsound mind?	
7. Are you now under the influence of a narcotic drug? NOW Yes Yes	3. Are you afflicted with a transmissible disease?	
9. Are you likely to so continue?	4. Are you related to the groom closer than second cousin?	
10. Do you have minor children from one or more former marriages?	5. Are you now under the influence of intoxicating liquor? No Yes	
(11 yes, answer questions a, b, c) (a) List their full names, ages and addresses	6. Are you now under the influence of a narcotic drug? 7. Full name of father	
Name Age Address	Residence of father (if deceased so state) Plainfull	
	Occupation of father Contractor Race of father to	
	Birthplace of father (State or foreign country) Maigua	
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for	8. Full maiden name of mother. Margary Hunds	
1. Full name of father Warra Frederick Porcos	Residence of mother (if deceased so state)	
Residence of father (if deceased so state) William Hore Mo.	Occupation of mother Tousewife Race of mother W	
Occupation of father Plaf Eslatt Bace of father U	Birthplace of mother (State or foreign country)	
Birthplace of father (State or foreign country) MIMMUSO Ca	State of Indiana, County of HENDRICKS as: I depose and state the information given in this application is true and correct.	
2. Full maiden name of mother pane ann stavens	County of	
Residence of mother (if deceased so state) Wells for Mo	Signed Sandru Karaw Trakes	
Occupation of mother Housewife Race of mother Birthplace of mother (State or foreign country)	New Address.	
state of Indiana,	Subscribed and sworn to before me this day of HENDRICKS	
ounty of HENDRICKS ss: in this application is true and correct.	Claud May Gerk Revolutes Circuit Court	
Signed Name Tibling Far sousp.	CONSENT OF PARENTS, PARENT OR GUARDIAN	
New Address. ubscribed and sworn to before me this. 2 5 day of Quo 19.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
Claude Hendricks Circuit Court	signs, state facts which render the consent of the other parent unnecessary	
ONSENT OF PARENTS, PARENT OR GUARDIAN		
e, the parents, of this applicant hereby give consent for this marriage. If only one parent		
gns, state facts which render the consent of the other parent unnecessary		
	State of Indiana, HENDRICKS	
ate of Indiana,	County of Father	
ounty of HENDRICKS	Signed	
Signed Father	Signed	
Signed	Subscribed and sworn to before me thisday of	
Clerk		
an count	r A marriage license having been refused to the above named parties, the	
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	T. A marriage license lawing and filed art by written order issued	
authorizes and directs the Issuance of		
DETURN OF MARRIAGE LICENSE	AND MARRIAGE Curcuit Court	
RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Circuit Court Be It Remembered, there was filed in my office a marriage license issued by the clerk of the ioning together as husband and wife		
Be It Remembered, there was filed in my office a marriage license issued by the clerk of the joining together as husband and wife Indiana dated the 30 day of and Sandra Harris and Sandra		
oredereck and the office to-wit:		
it further remembered, the following marriage certificate was flea in my of	ereby certify that on the day of Alexbricks	
e thousand nine hundred and Seiter - 1000	If Laure County, State of	
ate of Indiana, Groom Haves Fleduck Tarsons, 11,0)	County, State of the	
d, Bride Sandra Karen Frakes of	hat marpose by the Clerk of the Circuit Court of	
d, Bride	9 I S -1	
sted this 1st . September , 19.00	Signed Deage the Smith	
ed this Decignation Milysles 10 63		

Official Designation.

Signed.

... Circuit Court

Filed and recorded in accordance with the laws of the State of Indiana this