STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

Q Octobe 1965
Date of Application HENDRICKS County FEMALE
Medical Examination Report Dated MALE Medical Examination Report Dated Name of Physician_ Name of Physician

tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	tement—whoever produces the issuance of a needed to marry by any raise statement, representa-
MALE APPLICANT	FEMALE APPLICANT
Name First Middle Last	Name First Middle Ldyt
Date of Birth Month Day Year	Date of Birth Month Day Year
Place of Birth (State or foreign country)	Place of Birth (State of foreign country)
Residence Address Street er R. R. City County State	Residence Address Street or R. R. City County State
Residence Address Street of R. R. City County State	138 Bx 229 Indrangoly Hew Ind
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
Dast Marriage Ended by: Death Divorce Annument	
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation Factors Works - Allson	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Via Republication
Other (Specify)	ON SHEET STATE OF THE STATE OF
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 Yes	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county aylum or home for indigent persons?	An Imbecile? 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 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?	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? 9. Are you likely to so continue? Yes No	5. Are you now under the influence of intoxicating liquor? No TYes
10. Do you have minor children from one or more former marriages? No ☐ Yes ☐	6. Are you now under the influence of a narcotic lrug? No Yes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father Leyou Charles hinder
Name Age Address	Residence of father (if deceased so state) K.R. L. D. Sanapala L. L.
	Occupation of father Race 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 Lauctta Mae Holcam 6
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state) RR lade 15, Lnd;
11. Full name of father. Alfred Earl Walker	Occupation of mother Race of mother White -
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country) Now castle India
Occupation of father Factor works Allowa of father White	
Birthplace of father (State or foreign country)	State of Indiana, Sea: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother. Grace Ada, Blair	county of
Residence of mother (if deceased so state) TRI Ludes lud.	Signed Donno L Lender
Occupation of mother than 3 cust Race of mother white	New Address
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me mis Stday ofday of
State of Indiana, County of HENDRICKS I depose and state the information given in this application is true and correct.	X () M ()()() HENDRICKS
I I D M IA	Clerk Circuit Court
Signed J. Madore a. Matter	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address X 8 Ox 130 Ln Jz 8 Ln 0. Subscribed Add sworn to before AMA & 45 day of Octobr 1965	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
TO CO VIVI	
	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 88:
County of HENDRICKS	Signed Erro Father
Signed Officed E. Walker Father	Signed Lavetta M. Linder Mother
Signed Anna an walker Mother	Subscribed and sworn to before mathis 8th day of Qctob 1965
Subscribed and sworn to before me this	X 20 Ma (ADJ)
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
	urt by written order issued
inauthorizes and directs the issuance of	
RETURN OF MARRIAGE LICENSE	E AND MARRIAGE CERTIFICATE
Be It Remembered, there was filed in my office a marriage licen	se issued by the clerk of the
	, 196 J, authorizing the joining together as husband and wife
The arlone a Walker	2 1
Be it further remembered, the following marriage certificate was filed in my o	ffice, to-wit:
1, New John Thomas Weble	nereby certify that on the 15th day of October,
one thousand nine hundred and harman franchis	Shiloh Methodist Cherch County of Hendricks,
State of Inavana, Groom State Vo Partielle	of Hendricks County, State of Judiana
and, Bride Arman all sunder of Ne	ndricks County, State of Indiana
were by me united in marriage as authorized by a marriage license issued for t County.	that purpose by the Clerk of the Circuit Court of Mesidricks
Dated this 15 th day of October , 1965	m. 10 0 11 51
	Signed Keer John Thomas Welle, Townister of
	Official Designation Shiloh Methodists Church
Filed and recorded in accordance with the laws of the State of Indiana this	
	Signed John Lambold to

Hendricks) Circuit Court

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRIC	CKS File Sock 28
MALE	County 9 October 1965
Medical Examination Report Dated 9 Octobe 1905	FEMALE Date of Application
Name of Physician 1880 Cohen M.D.	Medical Examination Report Dated 4 Qc To 5 1965
ALL QUESTIONS MUST BE ANSWERED, Chapter 198 1-11	
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 issues
MALE APPLICANT	the issuance of a license to marry by any false statement, representa-
Name Bobby General Last	Name FEMALE APPLICANT
Date of Birth Day Year	Tess Middle C Last 1
Place of Birth (State or foreign country)	Date of Birth Month Day Year
Residence Address (Street or R. R.)	Place of Birth State or (oregn country)
Crawto solle Martanen (5 1)	Residence Address Street or R. R. City
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different X 74 Clay to Hend. In O.
Last Marriage Ended By: Death Divorce P Annulment	Tena A. wheat
Color or Race White Negro Other (specify)	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: Delich Cert. Judicial Decree	Color or Race White Negro Cother Consider
Date of birth verified by: Detrth Cert. Judicial Decree	Regro Other (specify)
1. Are you now or have you been adjudged, diagnosed or considered	Usual Occupation Nattress - Cobbs Truck Stop.
Of Unsound Mind?	Date of birth verified by: Birth Cert. Dudicial Decree
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 sylum or home for indigent persons?	Other (Specify)
No Ves	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 P Yes	Of Unsound Mind?
5. Are you related to the bride closer than second cousin? No Ves	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 narcotic drug? 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 second cousin?
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? No 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
Name Age Address	Residence of father (if deceased so state).
Terry Lavan 5 Russellville In	
3	Birthplace of father (State or foreign country) Chatts wath Georgia
(b) Are you supporting or contributing to their support? Yes W No I	8. Full maiden name of mother Willie Lee Silves
(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) La Fayette Ca
11. Full name of father helane willard Shrow to	Occupation of mother
Residence of father (if deceased so state) Ladaga (nd.	Birthplace of mother (State or foreign country) Soaz, Alban
Occupation of father Dables Race of father White	All college and a large contract and a finished and
Birthplace of father (State or foreign country) Ladega, Ind.	State of Indiana, HENDRICKS Sa: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Genivere Rith Hoad	County of Q
Residence of mother (if deceased so state) A Ladaga Ind.	Signed Lena a: Xuovuv
Occupation of mother bousewife ace of mother wife Te	New Address.
Birthplace of mother (State or foreign country). (Sandeson, Indiana	Subscribed and syorn to before m 19 12 day of October 19 12
State of Indiana, HENDRICKS I depose and state the information given in this application is true and correct.	Clerk Clerk Circuit Court
County of Balley Dene Shows	The second secon
New Address RIC Clay Ton Inv.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subcribed and sworth to before math Math day of Qetoby 1965	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	
signs, state facts which render the consent of the other parent unnecessary	
	State of Indiana, State of Ind
	County of
State of Indiana, County of HENDRICKS	Signed
Father	SignedMother
Signed Mother	Subscribed and sworn to before me thisday of, 19
Subscribed and sworn to before me thisday of, 19	Clerk
Clerk	and position the
COMPLETE AGRIED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
in authorizes and directs the issuance of	of a marriage license to the above named parties.
OF MARRIAGE LICENS	E AND MARRIAGE CERTIFICATE Court
Be It Remembered, there was filed in my office a marriage licen	use issued by the clerk of the
of Indiana detail the semembered, they day of Octobe	, 19. 19. authorizing the joint of Gravitti
Be it further remembered, the following marriage certificate was filed in my of the following marriage	hereby certify that on the latte day of Colombia
1, Chigene to Crawley	at Plainfield County of Actions
one thousand nine hundred and Sisty fice Shrout. State of Indiana, Groom Bobby Edgene Shrout.	of Hendricks County, State of Indiana,
State of Indiana, Groom Bobby Ellgene Smoul	of Mendrick S. County, State of Indiana, Kendrick S. County, State of Indiana, that purpose by the Clerk of the Circuit Court of Kendricks.
and, Bride Lena C. Marille Lines is great for	that purpose by the Clerk of the Circuit
and, Bride of Indiana, Groom Debug Charitte of were by me united in marriage as authorized by a marriage license issued for County.	Signed Eugene & Crawley
Dated this	Official Designation Justice of the Please, 1965.
	Official Designment
Etate of Indiana this	Signed John Sambold Gircuit Court
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No	29		7	
File_	Boo	X	28	2
1	SOc.	to	or	1965

MALE Medical Examination Report Dated 11 October 1965	FEMALE Medical Examination Report Dated 11 Octobe 1965
Name of Physician ND. Gaddy MD.	Name of Physician N-D. (Taddy 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)".	tement—Whoever procures the issuance of a license to marry by any false statement, representa-
MALE APPLICANT	Name First Middle Last
Name Rirst Middle Sullast	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
Residence Address Street ork. R. Street ork. R. Norian Ind.	Maiden Name if Different Scownbury Head, In J.
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	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert, Judicial Decree	Usual Occupation Jesk Clerk - House Johnson
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? 2. Are you under guardianship as a person of unsound mind? No Yes \(\) Yes \(\) Yes \(\)	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county solum 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? No Yes	Of Unsound Mind? No Yes 2. Are you under guardianship as a person of unsound mind? No Yes Yes Yes
5. Are you related to the bride closer than second cousin? 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 No	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? No Yes Yes	5. Are you now under the influence of intoxicating liquor? 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 Creage Linzey Regce
Name Age Address	Occupation of father (cal
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes ☐ No ☐	8. Full maiden name of mother The lane Savasta 31kg
(c) Are you complying hith any court order or orders issued for their support? Yes \(\) No \(\)	Residence of mother (if deceased so state)
Residence of father (if deceased so state)	Occupation of mother Race of mother
Occupation of father = leetrician Race of father White	of the light war to make the second and the second
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS State of Indiana, I depose and state the information given in this application is true and correct.
Residence of mother (if deceased so state)	Signed Deverly K. Berown
Occupation of mother white	New Address.
State of Indiana, I depose and state the information given	Subscribed and sworn to before my his day of Octo Hendricks
County of HENDRICKS in this application is true and correct.	Clerk Circuit Court
New Address 110 E. Franklin, Bibuy hu	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before morth A 3th day of Q to 19 19 19 19 19 19 19 19 19 19 19 19 19	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
CONSENT OF PARENTS, PARENT OR GUARDIAN	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 ss:
State of Indiana, County of HENDRICKS	County of
SignedFather	Signed
Signed	Subscribed and sworn to before me thisday of
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	RT. A marriage license having been refused to the above named parties, the
County Co	ourt by written order issued
authorizes and directs the issuance of	
See Si Kelliette, there was filed in my office a marriage licer	The AND MARRIAGE CERTIFICATE
of manage the day of any	(10)
Be it further remembered, the following marriage certificate was filed in my	office, to-wit:
one thousand nine hundred and sixty line.	hereby certify that on the 22 nd day of Colsher,
State of Indiana, Groom Richard Rean Sullwan	of Marion County, State of Indiana,
County.	that purpose by the Clerk of the Circuit Court of Wendricks
Dated this 22 nd day of October, 1965	Signed Robert J. Burgbacher,
Filed and recorded in accordance with the laws of the St	Official Designation Pastor - Oak Park Baptist Church
the accordance with the laws of the State of Indiana this	
	29th day of October 1965
	Signed John Hambell, Je Clerk Signed John Hambell, Je 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 Thomas 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)". FEMALE APPLICANT Date of Birth Previous Marital Status: Never Married Number of Previous Marriages. Death | Divorce | Annulment | Last Marriage Ended By: Previous Marital Status: Never Married Number of Previous Marriages Negro | Other | (specify). Last Marriage Ended By: 1001 Death Divorce Annulment Usual Occupation Date of birth verified by: Birth Cert. Judicial De Other [(specify Other (Specify). Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile? Date of birth verified by: Birth Cert. Delicial Decree Of Unsound Mind? 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 home for indigent persons? 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? No 🗆 4. Are you afflicted with a transmissible disease? Of Unsound Mind? No Yes 5. Are you related to the bride closer than second cousin? Yes 🗌 2. Are you under guardianship as a person of unsound mind? 6. Are you now under the influence of intoxicating liquor? Yes 🗆 Yes 🗆 7. Are you now under the influence of a narcotic drug? 3. Are you afflicted with a transmissible disease? ^Yes □ 8. Are you able to support a family? 4. Are you related to the groom closer than second cousin? No 🗆 No Yes 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) (a) List their full names, ages and addresses Birthplace of father (State or foreign co (b) Are you supporting or contributing to their support? 8. Full maiden name of mother dewel No 🗆 Yes 🗆 (c) Are you complying with any court order or orders issued for their support? Residence of mother (if deceased so state) Race of mother W hore Birthplace of mother (State or foreign country) Rock Castle 6 , 14 Occupation of father Nelder - Chapte Birthplace of father (State or foreign country) Yearsa III State of Indiana, I depose and state the information given in this application is true and correct. 12. Full maiden name of mother . lie County of .. Occupation of mother. Birthplace of mother (State or foreign country) day of ... O CTO County of... 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..... 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..... HENDRICKS State of Indiana. HENDRICKS County of..... Signed. Subscribed and sworn to before me this ______day of ______19_____ Subscribed and sworn to before me this ______day of ______, 19.____ 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.....County..... 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 Circuit Court of Indiana dated the 19 day of October and Brevla Ballou

Be it further remembered, the following marriage certificate was filed in my office, to-wit:

1, Billy J. Marland day of October

One thereby certify that on the 33rd day of October

One thereby certify that on the 33rd day of October

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One one thousand nine hundred and sifty-five at Central Baptist Church, County of Marion, State of Indiana, Groom Duright & Park of Mendricks County, State of Indiana and, Bride Brenda L. Ballow of Marion 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 Court of Nendrich Signed Billy & Garland Dated this 23 rd day of October, 1965 Official Designation Dinester Filed and recorded in accordance with the laws of the State of Indiana this 26th day of Cotshito, 1963.

Signed John Barrhold Jr Clerk Jenskinks Circuit Court

STATE OF INDIANA

County

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

No. 299
File Book 28
Date of Application

.....Circuit Court

MALE LO Tola 19/05	Medical Examination Report Dated 6 October 1965
Medical Examination Report Dated	Name of Physician Donald D. Cheesman M.D.
Name of Physician ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	ement—Whoever procures the issuance of a license to marry by any false statement, representa-
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False states that the presence of the first states of the presence o	FEMALE APPLICANT
MALE APPLICANT	Name Fire Hast Middle Last
Name First Middle Sirva	Date of Birth Month Day Year
Date of Birth October 3 1945	Place of Birth (State or foreign country)
Place of Birth (State or foreign country) W- V:Winia. State	Residence Address Street or R. City County State
Residence Address Street or R. R. D. City Cont. State Viv. J.	Maiden Name if Different
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
or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment Divorce
Euro (024 Boy - IndPG, News	Color or Race White Negro Other (specify)
erified by : Mirth Cert. Judicial Decree	Usual Occupation Reference Clark - Indr's New
we you been adjudged, diagnosed or considered as:	Date of birth verified by: Birth Cert. Judicial Decree
No Yes	Other (Specify)
hip as a person of unsound mind? No Ves ou been within five (5) years an inmate of a county a ylum or	1. Are you now or have you been adjudged, diagnosed in No Yes No Yes
has the cause of such condition been removed?	Of Unsound Mind?
h a transmissible disease?	2. Are you under guardianship as a person of unsound mind? No Yes
er the influence of intoxicating liquor?	3. Are you afflicted with a transmissible disease? No Yes \ 4. Are you related to the groom closer than second cousin? No Yes \ Yes \
support a family?	4. Are you related to the groom closer than second country 5. Are you now under the influence of intoxicating liquor? No Yes
to so continue? to so continue? Yes No Yes	6. Are you now under the influence of a narcotic drug?
wer questions a, b, c) leir full names, ages and addresses	7. Full name of father Oxxille
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Race of father Birthplace of father (State or foreign country)
	8. Full maiden name of mother Evelyn Miller
Are you supporting or contributing to their support? Are you complying with any court order or orders issued for	Residence of mother (if deceased so state) Samuelle, Ind.
their support?	Occupation of mother House Keops Race of mother White
Residence of father (if deceased so state)Charleston, W. Va.	Birthplace of mother (State or foreign country). Manager (01, 140.
Occupation of father Faxenau - D. Pont Race of father White	State of Indiana. I depose and state the information given
Birthplace of father (State or foreign country) Clay Co., W. Va	County of HENDRICKS 88: I depose and state of the same and correct.
12. Full maiden name of mother Year Marie W. Vo	Signed Qudith Ann Hughes
Occupation of mother (it deceased so state) Race of mother white	New Address
Birthplace of mother (State or foreign country) Clay 6, W. Ja.	Conscriber and sweet to before me this Athan day of October 1963
State of Indiana. HENDRICKS I depose and state the information given in this application is true and correct.	Clerk Circuit Court
Signed Paul Pavid Bind	The state of the s
New Address R3 5x109A Wooresville IN	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subserted and sporn to order me till day of October 1995	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
Clerk Court	signs, state facts which render the consent of the other parent different differences
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	
Varenty separated, Mothers, as	State of Indiana
State of Indiana. athebu.	State of Indiana, County of HENDRICKS
County of HENDRICKS	Signed Father
Signed Father	SignedMother
Subscribed and sworn to before me We hat day of Qs take 1903	Subscribed and sworn to before me thisday of
Jah James K. Clerk	Clerk
COMPLETE IF VARRIAGE LICENSE ISSUED BY ORDER OF COL	JRT. A marriage license having been refused to the above named parties, the
	Court by written order issued 100ctols 1940, and filed
77 6 111	e of a marriage license to the above named parties. 3 Day Warrer
RETURN OF MARRIAGE LICEN	ISE AND MARRIAGE CERTIFICATE
Be It Remembered, there was filed in my office a marriage lie	
of Indiana dated the land Bird October	
Be it further remembered, the following marriage certificate was filed in my	
	hereby certify that on the 17th day of October,
one thousand nine hundred and Auglig-Leve	at Danville , County of Hendricks ,
State of Indiana, Groom Paul Dakid Bird	of I lake a second of the seco
State of Indiana, Groom Paul David Bind and, Bride Judith ann Hughes of	Hendrick County State of Della Man
were by me united in marriage as authorized by a marriage license issued for	Trendricks County, State of Indiana,
were by me united in marriage as authorized by a marriage license issued for County.	or that purpose by the Clerk of the Circuit Court of Nendricks
were by me united in marriage as authorized by a marriage license issued for	or that purpose by the Clerk of the Circuit Court of Nendricks Signed Maxwin W. Cook
and, Bride Jewith Class Neights of of were by me united in marriage as authorized by a marriage license issued for County. Dated this 124 day of Cotober 1966	or that purpose by the Clerk of the Circuit Court of Nendricks

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

Chap. 124, Ind. Acts 1905	HENDRICE	County Date of Application
		FEMALE (October 1065
MALE Medical Examination Report Dated Octo	Se 19/28	Medical Examination Report Dated
David D. Ch	eesman Mb	Name of Physician Donald D. Cheesman M.D.
Name of Physician	5 prescribes "False stat	tement—Whoever procures the issuance of a license to marry by any false statement, representa-
tion or pretente that the more	ars (\$500.00)".	FEMALE APPLICANT
MALE APPLICANT	Last	Name First Middle Last
Name First Middle	Bird	Date of Birth Month Day Year
Date of Birth Month Day	945	Place of Birth (State & foreign country)
Place of Birth (State or foreign country)	nia.	Residence Address Street on R. City County State
Residence Address Street or R.R. Dr. City	May Ind.	Maiden Name if Different
Previous Marital Status: Never Married Number of Previous Marrie	ages	
Last Marriage Ended By: Death Divorce Annulment		Previous Marital Status: Never Married Number of Previous Marriages
Color of Race White Negro Other (specify)	****************************	Last Marriage Ended By: Death Divorce Annulment
(> 1dale 1)	Cus	Color or Race White Negro Other (specify)
Usual Occupation Date of birth verified by 1		Usual Occupation Reference Clark - Indr's New
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? Of Unsound Mind?	No Yes 🗆	Other (Specify)
2. Are you under guardianshin		re you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes
4201 Il. Ha Charleston 3 charleston 13	0 - 2	Se Of Unsound Mind?
12 pl 3/2	shington,	re you under guardianship as a person of unsound mind? No Yes No Yes
4 de la ton 3	W. The	e you afflicted with a transmissible disease? No Yes e you related to the groom closer than second cousin? No Yes
Charleston october 13	3.1963	e you now under the influence of intoxicating liquor?
1 October 3		you now under the influence of a narcotic drug?
I Pearl marie Si	mmans	I name of father Drville
I Feare of ga	ul Dan	idence of father (if deceased so state)
Guardian of a	ie my	inplace of father (State or foreign country) Brown Co. 1-w
Bird Do hereby of	Gaul Da	maiden name of mother Evelyn Miller
1 fer plant	2/4	there dence of mother (if deceased so state) Danville, Ind.
consent gred Judy	ann Ay	pation of mother. House Keep & Race of mother. White
Marina Marina	" en lever	(17) In a mother (State or foreign country) Many an (01, 140.
on October the se	ner Lar	Indiana, I depose and state the information given
all melen of	21	Indiana, HENDRICKS ss: I depose and state the information given in this application is true and correct.
In The Sundred a	nec ~	Signed Qudith Ann Hugher
Wineteen Hundred	P	New Address
Five Pres Do mar	ie finn	and swon to before me his A That day of October 1963
St. Jeans Jane		Clerk Circuit Court
001141905		The state of the s
John Fambold fr.	1 1-	OF PARENTS, PARENT OR GUARDIAN arents, of this applicant hereby give consent for this marriage. If only one parent
so Junea CUEX HOPENING TON MY	Tyme	facts which render the consent of the other parent unnecessary
= 10 121 Land	Whatin	5)
w. This 13th day	cour	
do 121 x Alexanor	Tisse	er
1963 Henry	itary	jana,
State of Section 1990	the same	HENDRICKS 88:
com My Commission la	pers)	SignedFather
THE STARY STARY	1979,	SignedMother
Subm Cyprus 2H	1110	ed sworn to before me thisday of
		Clerk
COM THE RESIDENCE LEGISLES THE PROPERTY OF THE		e license having been refused to the above named parties, the
the contraction that there was		Court by written order issued October 1940, and filed
in CIANS Offer authorizes and	directs the issuance	e of a marriage license to the above named parties. S Day Watter.
RETURN OF M	MARRIAGE LICE	NSE AND MARRIAGE CERTIFICATE
of Indiana dated the day	Octoby	cense issued by the clerk of the Circuit Court of t
Paul David Bird		and Suchth Ann Hunkes
Be it further remembered, the following marriage certific	cate was filed in m	y office, to-wit:
one thousand nine hundred and sixty five		at Danville Country of Hendricks.
State of Indiana, Groom Paul Dabid Bi	nd	of Marion County, State of Indiana
and, Bride Judith ann Hughes		Hendricks County, State of Indiana,
were by me united in marriage as authorized by a marria County.	age license issued f	or that purpose by the Clerk of the Circuit Court of Nenducks
Dated this 12th day of October) , 194	5 m . m ? !
		Official Designation Messester
Filed and recorded in accordance with the laws of the St	ate of Indiana this	
Line and the state of the state	or Makes and Assess	Signed John Hambold Jd Clerk
		Rendricks Circuit Court

her

Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE No. 300 File 306 28 HENDRICKS

MALE Medical Examination Report Dated 48 cto 2010	County 15 October 1965
Name of Physician Rob T Mars	FEMALE Medical Examination
IVIETI IN OF MILE	Medical Examination Report Dated 4 October 1965
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False structured five hundred dollars (\$500.00)". MALE APPLICANT Name First Middle	atement Whose & ND.
Name Frat	representa-
Date of Birth Month	Name First First
Place of Birth (State r foreign country) Day Year 1926	Date of Birth Month
Residence Address Street of M. R.	Place of Birth (Sate or foreign country) Day Year 1926
AAI A le Hesse De County State	Residence Address (o. Ind)
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different State
Last Marriage Ended By: Death Divorce Annulmen Divorce	552/2 7. 6000 1111
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
Usual Occupation Foresham, Pagkin hands	Last Marriage Ended By: Death Divorce Annulment Annulment 58
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 Globe mounter, Cramm.
Of Unsound Mind? No Yes 2. Are you under guardianship as a person of unsound mind? No Yes	Date of birth verified by: Birth Cert. Judicial Decree 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?	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 Yes	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 uncound minds
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a narcotic drug? 8. Are you able to support 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? Yes W No	4. Are you related to the groom closer than second cousin?
10. Do you have minor children from one or more former marriages? No Yes No Yes No	5. Are you now under the influence of intoxicating liquor? No Yes 6. Are you now under the influence of a narcotic drug? No Yes Yes
(a) List their full names, ages and addresses	7. Full name of father Sames OHO No Yes
Debra Lynn 8 Santa Manca Cold	Residence of father (if deceased so state)
Axthur Theo. 3	Birthplace of father (State or foreign country) Reconstruction of father white
(b) Are you supporting or contributing to their support? Yes You	8. Full maiden name of mother
(c) Are you complying with an court order or orders issued for their support? Yes No	Residence of mother (if deceased so state)
11. Full name of father Soc Sanders	Occupation of mother School teacher Race of mother white
Occupation of father (artificensed so state)	Birthplace of mother (State or foreign country) 120 1200 1200
Birthplace of father (State or foreign country) Lawye , ludgua.	State of Indiana, HENDRICKS sa: I depose and state the information given
12. Full maiden name of mother E the Ford	County of in this application is true and correct.
Occupation of mother (if deceased so state)	Signed a strategy totty
Birthplace of mother (State or foreign country)	New Address
State of Indiana, I depose and state the information given	HENDRICKS
County of Signed Leaves in this application is true and correct.	Clerk Circuit Court
New Address St. Soseph, M.o.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of day of 19.00	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
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 ss:
County of HENDRICKS	SignedFather
Signed Father Signed Mother	Signed
Subscribed and sworn to before me thisday of	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
Lendricks County Crevit Cour	t by written order issued
in Carly authorizes and directs the issuance of a	CER CERTIFICATE
RETURN OF MARRIAGE LICENSE.	
of Indiana dated the day of October	, 1992, disthorizing the joining together as husband and wife
and and	
1, Lasurence Glenn It hitsere her	reby certify that on the lath day of October
one thousand nine hundred and sifty fine at	Dondricks County, State of Indiana
State of Indiana, Groom Led Sausalle	County, State of State and
were by me united in marriage as authorized by a marriage license issued for that	t purpose by the Clerk of the Circuit Court of Rendricks
County.	Signe Lawrence Glen Whitacre
Dated this 16th day of October, 1965.	The Tex Nour Merchesland Merchangy
	1 - 1 - 1 //27 -1.04/
Filed and recorded in accordance with the laws of the State of Indiana this	gned John Samuell Jel Clerk
The second secon	gned Jendricks Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

County HENDRICKS

No.	<	3	0	1		
File_	3	06	K		28	
	6	Q e of .	Ann	icat	tion	1965

- 4 Non- in

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Distriction of the latest the lat

MALE Medical Examination Report Dated 12 October 1965	FEMALE Medical Examination Report Dated 12 October 1865
Name of Physician Sw. Karten ND.	Name of Physician Rw. Krtley N'D.
	tement-Whoever procures the issuance of a license to marry by any false statement, representa-
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	FEMALE APPLICANT
Name First Middle Last	Name First Middle Walls
Date of Birth Month Day Year	Date of Birth Month Day Year
Place of Birth (State or fereign country)	Place of Birth (Stat of 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 Press man. Tippancane Press	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Typred - Aero Nayflows
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? 2. Are you under guardianship as a person of unsound mind? No Yes 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 sylum 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? 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? No Yes	3. Are you afflicted with a transmissible disease? No Yes
7. Are you now under the influence of a narcotic drug? No Yes No Yes No No	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? No Yes Ves	5. Are you now under the influence of intoxicating liquor? No Yes 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 Wilbur V Walls
Name Age Address	Residence of father (if deceased so state)
	Occupation of father State or foreign country) Race of father A land.
	8. Full maiden name of mother the leas Tutt le
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for their support? Yes \Boxedom No \Boxedom	Residence of mother (if pleceased so state
11. Full name of father Ooks Kussell Ok	Occupation of mother. White Race of mother. White
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father	State of Indiana, HENDRICKS Section 1 Section 2 Section 2 Section 3 Sectin 3 Section 3 Section 3 Section 3 Section 3 Section 3
12. Full maiden name of mother Exclusion	County of
Occupation of mother (if deceased so state) Race of mother Race of mother	Signed Signed Same
Birthplace of mother (State or foreign country)	Subscribed and sworm to before no Mil At 6 day of October 19 65
State of Indiana, County of HENDRICKS State of Indiana, I depose and state the information given in this application is true and correct.	Clerk HENDRICKS Circuit Court
Signed Ronald S. Cap	
New Address 762 W. Locast Apt 3. Shellywill	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 day of 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, County of HENDRICKS ss:
State of Indiana, County of HENDRICKS 88:	Signed Father
Signed Father	Signed Mother
Signed	Subscribed and sworn to before me thisday of
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	RT. A marriage license having been refused to the above named parties, the
	ourt by written order issuedand filed
in authorizes and directs the issuance	
Be It Remembered, there was filed in my office a marriage lice	E AND MARRIAGE CERTIFICATE nse issued by the clerk of the Circuit Court
of Indiana dated the and day of Oclober	19.65, authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my	and Ince Mae Walls office, to-wit:
1, George a Harres	hereby certify that on the 23rd day of October,
State of Indiana, Groom Ronald Stay	of Shelby County, State of Indiana
and, Bride Isa Malls of J	dendricks County, State of Indiana,
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 Mendricks
Dated this 2311 day of Actober, 1965	E Pu U DY
ment to married Lange For House Samon and a little for	Official Designation Maristry
Filed and recorded in accordance with the laws of the State of Indiana this	23, day of Catober , 1965
State of the state	Signed John Barrhold Jr. Clerk
	Hendricks Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County MALE Medical Examination Report Dated FEMALE Medical Examination Report Dat 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, representa-FEMALE APPLICANT Nea Previous Marital Status: Never Mar Number of Previous Marriages Last Marriage Ended By: Death Divorce Annulment Previous Marital Status: Never Married | Number of Previous Marriages. White Negro | Other | (specify)... Color or Race Last Marriage Ended B Peath Divorce Date of birth verified by Other (Specify) Drives Lice Usual Occupation Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Date of birth verified by: Yes 🗌 ☐ Birth Cert. ☐ Judicial Decree Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? Yes | Other (Specify) ... chire 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: um or 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? Yes 🗆 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? Yes 🗌 6. Are you now under the influence of intoxicating liquor? Yes 🗌 3. Are you afflicted with a transmissible disease? 7. Are you now under the influence of a narcotic drug? Yes 🗌 8. Are you able to support a family? 4. Are you related to the groom closer than second cousin? No 🗆 9. Are you likely to so continue? No 🗆 10. Do you have minor children from one or more former marriages? Yes 🗆 (If yes, answer questions a, b, c) (a) List their full names, ages and addresses Address Residence of father (if deceased so state). Birthplace of father (State or foreign country) (b) Are you supporting or contributing to their support? Yes 🗆 № П (c) Are you complying with any court order or orders issued their support? Yes 🗌 No 🗆 of mother white Residence of father (if deceased so state) 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. HENDRICKS 12. Full maiden name of mother aviola Residence of mother (if deceased so state) Occupation of mother ... Birthplace of mother (State or foreign country) Okce choose C: ty - 19 160 State of Indiana, HENDRICKS HENDRICKS Circuit Court County of 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. 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... State of Indiana, HENDRICKS State of Indiana, HENDRICKS County of..... Mother Signed. Subscribed and sworn to before me this......day of...... 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.County..... Be It Remembered, there was filed in my office a marriage license issued by the clerk of the Sendreks Circuit Court of Indiana dated the 2 day of Octobe 3, 1965, authorizing the joining together as husband and wife

Be it further remembered, the following marriage certificate was filed in my office, to wit: 1, R B Pickard hereby certify that on the 232 day of October one thousand nine hundred and sixty-five at Danville , County of Hentricks. State of Indiana, Groom Billy Hood of Hendricks County, State of Indiana, and, Bride Derothy a Cooley of Hendriches County, State of Island, were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of New County Signed PB Pickard Dated this 25 th day of Clother , 1965. Official Designation Justice of Peace Filed and recorded in accordance with the laws of the State of Indiana this 26th day of Cotolic , 1965.

Signed Standrick Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE Date of Application HENDRICKS ___County

Name of Physician Sames Black, MD. Name of Physician Sames Black, MD.	MALE Medical Examination Report Dated S October 1965 Name of Physician Sames Black, MD.	FEMALE Medical Examination Report Dated Name of Physician
--	---	---

Name of Physician.	When a property the issuence of a license to marry by any false statement, representa-
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 Wirst Middle Last
Name Pirst Middle Middle	Name Patricia hourse Clem
Date of Birth Month Day Year	Date of Birth Month Day
Place of Birth (State or Breign 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
Clerman, Marian, Indiana	Maiden Name if Different
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
Color of Race White Market Color of Race	Color or Race White Negro Other (specify)
Date of birth verified by: Dirth Cert. Dudicial Decree	COID OF Make
Other (Specify)	Usual Occupation (askie 107PS
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? 2. Are you under guardianship as a person of unsound mind? No Yes Yes	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county assum or	An Imbecile?
home for indigent persons? 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 No	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?
(a) List their full names, ages and addresses	7. Full name of father (if deceased so state)
Name Age Address	Occupation of father Mech. Au Can Dace of father.
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother Clarence lung Bringe
(b) Are you supporting or contributing to their support? Yes ☐ No ☐ (c) Are you complying with any court order or orders issued for	Residence of mother (if deceased so state) Clermont Ind.
their support?	No. 12
II. Full haine of facilet	ul. 1-20
Occupation of father.	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country)	State of Indiana, HENDRICKS 88: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Eurod Yvonne Allen	County of Of . Of
Residence of mother (if deceased so state)	Signed Tablelly house Clen
Occupation of mother. Bank Telle Race of mother white	New Address
Birthplace of mother (State or foreign country) a Crosse Mo	Susscribed and sweet to before the his day of October 1963
State of Indiana, State of Indiana, HENDRICKS SS: I depose and state the information given in this application is true and correct.	HENDRICKS Circuit Court
County of Signed Sand aller Willhit	
New Address	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and swirn to before AMAL 6th day of Qetole 1965	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	
signs, state facts which render the consent of the other parent unnecessary	
E CONTROL DE LA CONTROL DE	Charles of Tableson
	State of Indiana, County of
State of Indiana, County of HENDRICKS	Signed. Father
Signed Billy C. Willkite Father	Target Control of the
Signed Johns Willite Mother	
Subscribed and sworn to before not his	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
	Court by written order issuedand filed
inauthorizes and directs the issuance	of a marriage license to the above named parties.
RETURN OF MARRIAGE LICEN	SE AND MARRIAGE CERTIFICATE
	ense issued by the clerk of the
of Indiana dated the day of Oalobe	, 19.65, authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my	and Patricia Louise Clem
1, Chauncey (Dattimer)	hereby certify that on the 22 nd day of October
one thousand nine hundred and Septy-Leve	at (lermont Country of Marine)
State of Indiana, Groom Aland Willhit	of Marion) County State of Indiana
and, Bride Fatracias Louise Clera of	Hendrichs 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 Court of Heridricks
Dated this 22 May of October 196	5
, 1952.	Signed Chausely & Fatherner
and the second s	Official Designation Ministry
Filed and recorded in accordance with the laws of the State of Indiana this	day of Povember , 1965

lother Clerk = the filed

ourt vife

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRIG	CKS County File Sook 28
MALE	County Ractabe 1965
Medical Examination Report Dated 13 Octo by 1965	FEMALE Date of Application
Name of Physician Irra Cohen M	Medical Examination Report Dated 13 October 1965
ALL QUESTIONS MUST BE ANSWERED Charter to	
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500 00).	tement—Whoever pressure in the second
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	procures the issuance of a license to marry by any false statement, representa-
Name Middle Last	FEMALE APPLICANCE
Date of Birth Month Day Wern Sing	Name Pirst Middle Last
Place of Birth (State or foreign country)	Date of Birth Month Day
In diamapo de Indiana	Place of Birth (State r foreign country)
Residence Address Street or R. R. City County State	Residence Address Street P. J.
Previous Marital Status: Never Married Number of Previous Marriages	City County State
Total Power Date Trevious 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)	Marting Communication
V 10 ametics Manda and 1 1 2	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by:	Color or Race White Negro Other (specify)
Other (Specify) Drives Iccase	Usual Occupation
1. Are you now or have you been adjudged, diagnosed or considered as:	MODES OFFICEN COPY. Gen HOSP.
Of Unsound Mind?	Date of birth verified by: Birth Cert. Judicial 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 syvium or home for indigent persons?	1. Are you now or house you have
NO IV Vac	Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes C
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?
6. Are you now under the influence of intoxicating liquor? No D 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?
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 Yes	6. Are you now under the influence of a narcotic drug?
(a) List their full names, ages and addresses	7. Full name of father Kalah Carl Carl
Pake at Warms Age Address June 12	Residence of father (if deceased so state)
Long and a secondarion	Occupation of father. Mechanic: Eyour Race of father
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes V No	8. Full maiden name of mother E 13 Easth Mae Stores
(c) Are you complying with any court order or orders issued for their support? Yes \(\subseteq \text{No } \subseteq \)	Residence of mother (if deceased so states Mo
11. Full name of father Touch George Wernsing	Occupation of mother Rad of mother Waste
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father	The beautiful to the last the Particle Property of the Particle Propert
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 May A Same Kubley	0 th of '11 Can
Residence of mother (if deceased so state)	Signed XXXX
Occupation of mother	New Address.
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of day of 19.4.
State of Indiana, Govern of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Clerk HENDRICKS Circuit Court
Signed William O. Werns in	The second secon
New Address Char Clemont Ht B'by	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribe Tand storn to be con dettis 18+2 day of October 1960	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	
signs, state facts which render the consent of the other parent unnecessary	
	Cuts of Indiana
	State of Indiana, County of
State of Indiana,	SignedFather
County of HENDRICKS	Mother
SignedMother	Signed day of 19, 19
Subscribed and sworn to before me thisday of	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 COUR	T. A marriage license having been recommended and filed urt by written order issued
CountyCo	f a marriage license to the above named parties.
RETURN OF MARRIAGE LICENS	se issued by the clerk of the Levelracka Circuit Court
of Indiana dated the 22 day of October Be it further remembered, the following marriage certificate was filed in my of the control of the co	se issued by the clerk of the Sudrucka Circuit Court , 1964, authorizing the joining together as husband and wife
Indiana dated the day of a	nd Kuth dancette
Be it further remembered, the following marriage certificate was filed in my o	haveby certify that on the 231 day of October
Be it further remembered, the following marriage certificate was filed in my of the state of Indiana, Groom Milliams of Mariana, of the state of Indiana, Groom Milliams of the state of	at Plansfield Country of Hendricks,
one thousand nine hundred and sixty fine	of Marione County, State of Andrand
State of Indiana, Groom William O It ernsing	Hendrick & County, State of Andrews,
State of Indiana, Groom Milliams of Mensing of and, Bride Reth Lecelle Cope of were by	that purpose by the Clerk of the Circuit Court of Mendeles
and, Bride Reich Levelle Cope of were by me united in marriage as authorized by a marriage license issued for County.	
County. Dated this 23.1.d. day of October, 19.6.2	Official Designation Minister , 19.6.5.
day of day	Official Designation Minister
Filed and recorded in accordance with the laws of the State of Indiana this	26. The day of Clerk
Filed and recorded in accordance with the laws of the State of Indiana this	24th day of Colored Ja Clerk Signed Jahn Barnsteld, Ja Circuit Court
	Rend Mandella Mandell

we, the understand w

do hereby give our our

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

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No	305
File	B001,28
-	Date of Application

MALE Medical Examination Report Dated 18 Octobe 1965 Name of Physician Exam behavior MD.	Medical Examination Report Dated 18 octobe 1965 Name of Physician Franches
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, representa-
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	FEMALE APPLICANT
Name First Middle Last	Name First 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 of 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 Lab Teal : Real	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Cas : + Assertant Sant
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? No Yes Yes Yes	Pother (Specify)
2. Are you under guardianship as a person of unsound mind? No Yes anow or have you been within five (5) years an inmate of a county anylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?
to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind?
unlicted with a transmissible disease? No Yes Yes Yes	2. Are you under guardianship as a person of unsound mind? No Yes
ow under the influence of intoxicating liquor? No Yes ow under the influence of a narcotic drug? No Yes	3. Are you afflicted with a transmissible disease?
ble 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 Yes
kely to so continue? Yes No e minor children from one or more former marriages? No Yes swer questions a, b, c)	6. Are you now under the influence of a narcotic drug?
eir full names, ages and addresses	7. Full name of father Children desky Meadows
Name Age Address	Residence of father (if deceased so state)
	Birthplace of father (State or foreign country)
u supporting or contributing to their support? Yes□ No□	8. Full maiden name of mother. The long, Mae Pindenbyr
the complying with any court order or orders issued for upport? Yes No port? Yes No Port?	Residence of mother (if deceased so state) New Whiteland (md.
of father leave homes Jess up.	Occupation of mother & cy - Rece Dan Racol mother Why to
father (if deceased so state)	Birthplace of mother (State or foreign country) Valpanaso, Ind.
of father (State or foreign country)	State of Indiana,
name of mother. Many as the Louis Pike	County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
mother (if deceased so state)	Signed Sandra D. Meadows
mother (State or foreign country)	New Address
HENDRICKS I depose and state the information given in this application is true and correct.	Subscribed and sworn to before ne time. day of HENDRICKS
Signed Si	Clerk Circuit Court
New Address 5653 A. W. athrop Indals Ind.	CONSENT OF PARENTS, PARENT OR GUARDIAN
to before to he 19th day of October 1963	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
PARENTS, PARENT OR GUARDIAN of this applicant hereby give consent for this marriage. If only one parent	
which render the consent of the other parent unnecessary	
attacker)	
	State of Indiana, County of
Signed	SignedFather
Signed Mother Mother	SignedMother
worn to before me this day of 2413 1943	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 above named parties, the
in authorizes and directs the issuance of	
RETURN OF MAPPIACE LICENSES	
RETURN OF MARRIAGE LICENSE was filed in my office a marriage licens	e issued by the clerk of the Vendrake Circuit Court
of Indiana dated the 23 day of October Be it further remembered the following as	
one thousand nine hundred and	day of Cathery
State of Indiana, Groom Land &	County of Almson
and, Bride Sandra A. Meadows	County, State of Sudana
were by me united in marriage as authorized by a marriage license issued for the	hat murrous by the Cl. is a County, State of Sidiana,
1965	
	Signed Ray a. Burchfold
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Missister
County Married	Signed John H. J. J. J. 1965
A STATE OF THE PARTY OF THE PAR	Signed John Hambold Is Clerk

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

Date of Application

MALE Medical Examination Report Dated 18 Octobe 1965	Medical Examination Report Dated 18 October 1965 Name of Physician Franchischman
Name of Physician F Van Lehman MD.	tement—Whoever procures the issuance of a license to marry by any false statement, representa-
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00).	FEMALE APPLICANT
Name First Middle Last	Name First 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 of R. R. City County State
R2 Bx 340 Plaintield, Hand, Ind.	Maiden Name if Different
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	
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)
Other (Specify)	Usual Occupation Celit Approval. Seas
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? No Yes 3	1. Are you now or have you been adjudged, diagnosed or considered as:
No Yes No Yes No Yes	An Imbecile? No E Yes Of Unsound Mind?
4 No. 1 No. 1 Yes No. 1 Yes No. 1 Yes 1	2. Are you under guardienship as a person of unsound saind?
6 A white profess the reference of intersecting liquer? No 18 Act	3. Are you afflicted with a transmissible disease?
8 Yes W No 🗆	4. Are you related to the groom closer than second cousin? 5. Are you now under the influence of interleating liquer? Yes
We, the undersigned paren	
do hereby give our consent	for him to marry
Sandra Sue Meadows.	Occupation of table (1977)
- Sandra Sue Meadows:	the the later of father Chiate or foreign country) Slooms land the lind.
	easure of down where
Sorg	e T. Jessup
	to appropriate the same of the
Marga	ret P. Jessup
the same many your many of because a day to a	don given correct.
1 The same of reason Williams with the transfer to the	
State of Indiana	
County of Hendricks	October 18, 1965
	cuit Court
This is to south a division in	
This is to certify that the	above George T. Jessup
and Margaret P. Jessup pers	onally appeared before
me and signed the above ins	trument.
And the second control of the second	
Land of Many half and the second of the second	
and the second s	Print and the designation of the second of t
Not.	ary Public Pardall Father
Consideration of the large species of the property of the second	- Addied
My commission expires	Mother than and same to be to a constant and the constant
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	
Cou	irt by written order issued
authorizes and directs the issuance of	a marriage license to the above named posting
Be It Remembered, there was filed in my office a marriage licens	AND MARRIAGE CERTIFICATE se issued by the clerk of the Sendricks Circuit Court
of Indiana dated the 23 day of October David Deocup	
Be it further remembered, the following marriage certificate	a dandra D. Weed - 1
one thousand nine hundred and	ereby certify that on the 23 12 day of October
State of Indiana, Groom Days &	County of Johnson
and, Bride Sandra S. Meadows	County, State of Sodiana
County.	pur pose by the Clerk of the Circuit Court of
Dated this day of Clebbly	
	Signed Ray a Burchfuld
Filed and recorded in accordance with the laws of the State of Indiana this	Incral Designation Themisters
Marie Darke Language with the party of the	Signed Jel (Gelolite , 1965.

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS County MALE Medical Examination Report Pated Date of Application FEMALE 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)". FEMALE APPLICANT Date of Birt Previous Marital Status: Never Married W Number of Previous Marries 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 Date of birth verified by: Color or Race Negro 🗆 Other [(specify). Other (Specify). Usual Occupation Are you now or have you been adjudged, diagnosed or considered as: No Yes | Yes | Yes | Yes | Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? Other (Specify) Yes 🗌 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? No 🗆 Yes 🗌 4. Are you afflicted with a transmissible disease? Of Unsound Mind? No [Yes 🗌 Yes 🗆 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? Yes 🗆 Yes 🗆 6. Are you now under the influence of intoxicating liquor? Yes 🗌 3. Are you afflicted with a transmissible disease? 7. Are you now under the influence of a narcotic drug? 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 🗆 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 narcotic drug? (If yes, answer questions a, b, c) Yes 🗆 (a) List their full names, ages and addresses 7. Full name of father. Residence of father (if deceased so state) Occupation of father Lab Tech, All Race of father whete Birthplace of father (State or foreign country) 8. Full maiden name of mother Sevel (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 deceased so state). No 🗆 Occupation of mother. Language. Birthplace of mother (State or foreign country) State of Indiana, Birthplace of father (State or foreign co untry) Newman III ss: I depose and state the information given in this application is true and correct. HENDRICKS 12. Full maiden name of mother. Sandra K. Ward Residence of mother (if deceased so state) Race of mother. toosemite Birthplace of mother (State or foreign country) 3,421, MU. (Octoba State of Indiana. HENDRICKS as: I depose and state the information given in this application is true and correct. .Circuit Court HENDRICKS mas J. Windler CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent day of October signs, state facts which render the consent of the other parent unnecessary 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, HENDRICKS County of State of Indiana. County of HENDRICKS Father 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.....authorizes and directs the issuance of a marriage license to the above named parties.County..... 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 authorizing the joining together as husband and wife day of and and wife andricks Circuit Court hereby certify that on the 231d day of October, one thousand nine hundred and Sixty fund at Plainfield , County of Hendricks, State of Indiana, Groom James & Winkley of Tigo County, State of Indiana and, Bride Landra K Ward of Hendricks County, State of Internal were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of New Michael County. Signed Marren D. Pobless County. 231d day of Catalier, 1965. Official Designation Christian Minister

Filed and recorded in accordance with the laws of the State of Indiana this 26th day of October, 1963 Clerk
Signed John Gardel Circuit Court

APPLICATION FOR MARRIAGE LICENSE

STATE OF INDIANA HENDRICKS ____County

	Date of Application
MALE Medical Examination Report Dated Oct 18-1965	FEMALE Medical Examination Report Dated Oct 18 - 1965
Name of Physician George Ostheimu MD	Name of Physician George Ostheimer M.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)".	atement—Whoever procures the issuance of a license to marry by any false statement, representa-
MALE APPLICANT	FEMALE APPLICANT
Name First Marvin Satterly	Name Brist da Parlene Jones
Date of Birth (State or foreign country) Place of Birth (State or foreign country)	Place of Birth (State or foreign country)
Residence Address Street or R. R. Gity County State	Residence Address Street or R. R. Cly County Side
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 Inspector: Stewart-Warner.	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Un angloged.
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? 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 around or	Other (Specify)
home for indigent persons? No Yes If answer to 3 is "yes" has the cause of such condition been removed? No Yes	An Imbecile? 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? 7. Are you now under the influence of a narcotic drug? No Yes	3. Are you afflicted with a transmissible disease? No P Yes 4. Are you related to the groom closer than second cousin?
8. Are you able to support a family? 9. Are you likely to so continue? Yes No No No 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? (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	Residence of father (if deceased so state)
	Occupation of father. Comment Open Rice of father. As here
(b) Are you supporting or contributing to their support? Yes□ No□	8. Full maiden name of mother
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state)
11. Full name of father	Occupation of mother
Occupation of father Neekante	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country).	State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.
Residence of mother (if deceased so stule)	Signed Brenda Darlene Jones
Occupation of mother Race of mother Race of mother Birthplace of mother (State or foreign country)	New Address
State of Indiana, County of HENDRICKS Ss: I depose and that the information given in this application in true and depose and that the information given	Subaribed and sworn to before mathis
Signed James Marry Sally Ir.	Clerk Circuit Court
New Address. Nove Svile Ind. O	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn thefore me this day of 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 We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Mathe Deceased. Fall
signs, state facts which render the consent of the other parent unnecessary	has custady.
has custody worked. Mother	
State of Indiana, County of HENDRICKS 88:	State of Indiana, County of HENDRICKS
Signed	Signed Wade ones ft. Father
Signed Mother Subscribed and sworn to before me this Subscribed and sworn to be subs	Signed
Clerk	Subscribed and sworn to before me this day of Carton 1993.
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	A mayrings live Clerk
in Clark's County Carcy t	rt by written order issued
RETURN OF MARRIAGE ANGENES	a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE
of Indiana dated the 21st day of Colored Be it further remembered the following Sattedy Same	19 2, authorizing the joining together as husband and wife
I. Along I English the following marriage certificate was filed in my offi	ice, to-wit:
one thousand nine hundred and	do colony that on the
and, Bride Drenda Dones of James of	Hendricks County State of Degram,
County.	at morning but a significant county, State of Suddenside
Dated this 23 rd day of October, 1965	The Post of the Circuit Court of
A STATE OF THE STA	Signed Bonald Endsley
Filed and recorded in accordance with the laws of the State of Indiana this	29 The day of O-Thenister

Circuit Court

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

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

No. 308
File Book 28 HENDRICKS County

MALE Medical Examination Report Dated 2000	Date of Application
Medical Examination Report Dated 1 Sector 190	FEMALE
Name of Physician Sames Black Mh	Medical Examination Report Dated 13 October 1965
ALL QUESTIONS MUST BE ANSWERED. Chapter 196 1.	Name of Physician James Black M
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500 any)	atement—Whoever programmed in the state of t
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	li procures the issuance of a license to marry by any false statement, representa-
Name Charles E Middle Q Jasts	FEMALE APPLICANT
Date of Birth Month Eugene Callahan	Name Wirst Middle C Last
Place of Birth (State of foreign country)	Date of Birth Month
Felkhorn, Kentucky	Place of Birth (State or foreign country)
Residence Address Street of R. R. City County State	
Marion Indels Marion In	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Plainticid, Hand, Ind.
Last Marriage Ended By: Death Divorce P Annulment Divorce P.	The second secon
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
Color of Race Waite Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation Landscape Foreman. Fitz Loons	Bea Colon on Day
Date of birth verified by: Birth Cert. Judicial Decree	Negro Other (specify)
Other (Specify) Drivers License.	Usual Occupation Laundress: Mach. Laundress:
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?	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county a flum 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? No Yes	An Imbecile?
4. Are you afflicted with a transmissible disease? No	Of Unsound Mind?
5. Are you related to the bride closer than second cousin? No Yes 8. Are you now under the influence of intexicating liquor? No Yes	2. Are you under guardianship as a person of unsound mind? No Yes
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? Yes No	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? No Yes	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?
(a) List their full names, ages and addresses Name Age Address	7. Full name of father Trong Willram Carr.
Chas Europe & A Vous America	Residence of father (if deceased so state)
Teldy Gene 2	Occupation of father Court oction with the of father with the
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Conces
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state)
11. Full name of father Ethel Callahan	Occupation of mother
Residence of father (If deceased so state) Blooming ton, III	Birthplace of mother (State or foreign country) Keokee, Viginia.
Occupation of father Hosp. Waint, Foreman of father white.	
Birthplace of father (State or foreign country)	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 Some Selle East ridge.	Park Park
Residence of mother (If deceased so state) Chrcago, III	Signed 1000000000000000000000000000000000000
Occupation of mother Keg. N. Race of mother White	New Address
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me the lay of October 1965
State of Indiana,	Subscribed and sworn to before me the day of Octown, 1945 HENDRICKS Clerk Circuit Court
State of Indiana, County of HENDRICKS as: I depose and state the information given in this application is true and correct.	HENDRICKS
State of Indiana. County of HENDRICKS Signed Associate the information given in this application is true and correct.	HENDRICKS
State of Indiana. County of HENDRICKS Signed Signed New Address New Address New Address	HENDRICKS Circuit Court
State of Indiana. County of HENDRICKS Signed Sign	Clerk HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN
State of Indiana. County of HENDRICKS Signed Sign	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
State of Indiana. County of HENDRICKS Signed Sign	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Signed New Address Superiord and sworm to before me discovered and sworm to be discovered an	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
State of Indiana. County of HENDRICKS Signed Sign	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Signed New Address Superiord and sworm to before me discovered and sworm to be discovered an	Clerk HENDRICKS Clerk 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
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State of Indiana. County of HENDRICKS Signed New Address Successed and sworn to before me discovered and sworn to before me this day of the state the information given in this application is true and correct. Signed New Address Clerk HENDRICKS Circuit Court County of Hendricks State of Indiana, County of Hendricks Signed Signed Subscribed and sworn to before me this day of 19	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. Signed. Father Signed. Mother
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STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS ____County

FEMALE

Date of Application

.Circuit Court

MALE Medical Examination Report Dated 190 ctoler 1965	Medical Examination Report Dated 19 October 1965
Name of Physician Rott. L. Rulesill, MD	Name of Physician Kolt L. Kudesili M. D.
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False stattion or protonne shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	ement—Whoever procures the issuance of a license to marry by any false statement, representa-
MALE APPLICANT	FEMALE APPLICANT
Stame Robert Riddle Rodgers St.	Name Privet Middle Knoll
Data of Birth Month Day Year	Date of Birth Moreth 12 1901
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 of R. R. St. Plannight Hend Ind.
Provious Marital Status: Newer Married Number of Previous Marriages.	Maiden Name if Different M. Souder
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 Accounting Super. PSCI	Color or Race White Negro Other (specify)
Dute of birth verified by: Birth Cert Dudicial Decree	Usual Occupation Sales lady: Kost Jewlry.
1. Are you now or have you been adjudged, diagnosed or considered as: No . Yes	Date of bigth verified by: Birth Cert. Judicial Decree
Of Unaound Mind? 2. Ate you under guardianable as a person of unsound mind? No Yes	1. Are you now or have you been adjudged, diagnosed or considered as:
5. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons?	An Imbedie? No [7] Yes No [7] Yes No [7] Yes
If answer to 2 is "yes" has the cause of such condition been removed? No X Yes	Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes
i. Are you related to the bride closer than second cousin? No Yes 4. Are you now under the influence of intextesting liquor? No Yes	3. Are you afflicted with a transmissible disease? No 🗗 Yes 🗆
7. Are you now under the influence of a narcotic drug? No Yea No	4. Are you related to the groom closer than second cousin? No Yes 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 Yes
(Mf yes, answer questions a, b, c) (a) List their full names, ages and addresses	T. Full name of father Bert Souges
Name Age Address	Residence of father (if deceased so state)
	Birthplace of father (State or foreign country) Ken a d Ind.
Y.C. Y.C.	8. Full maiden name of mother Ethelyne Bayge
(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) Deceased
11. Full name of father Sames Polleck Rodgers	Occupation of mother Race of mother White
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country) Spice land, In Oian
Occupation of father (State organizes country) Echanburagh, Scotton	State of Indians. HENDRICKS as: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Hatte Mac Maple	County of m K-all
Compation of mother (If deceased so state) Race of mother White	New Address Saw
Birthplace of mother (State or foreign country) Clay 6, Indiana	Abribarad away to before on 2121 day or Octobe 162
State of Indiana, Countr of HENDRICKS O as I depose and state the information given	Gerk HENDRICKS Circuit Court
Colort & Rodges by	
Now Address 110 Kaines St. P. FIL.	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Clerk MENDRICKS Clerett Court	signs, state facts which render the consent of the other parent unnecessary
CONSET 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, Oounty of HENDRICKS
State of Indiana. County of HENDRICKS	Bigned Fether
Signed Father	Signed
Signal Mather Subscribed and evers to before me this day of	Subscribed and sworn to before me this
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUL	RT. A marriage license having been refused to the above named parties, the
County	ourt by written order issued and filed
in 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 lice	ne issued by the clark of the Steedreels
of Indiana dated the 25 day of Colober	, 1963, authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my	office, to wit:
1, Narrens a. Robbins	hereby certify that on the 2.7. The day of October
	40. 1. 11
one thousand nine hundred and highly figel	or Plainfield, Country of Hendricks.
State of Intiana, Grown Robert He Rodgers, Sr	or Plainfield, County of Hendricks, of Hendricks County, State of Indiana Hendricks County, State of Indiana
state of Indiana, Grown Robbett He Rodgers, Le und, Bride Raine Dr. Knoll of wave by me united in marriage as authorised by a marriage license issued for	Mendricks County, State of Indiana,
State of Intium, Grown Robert HP Rodgers, Sr. und. Brite Rewa M. Knoll	of Newdricks County, State of Indiana, Hendricks County, State of Indiana, that purpose by the Clerk of the Circuit Court of Hendricks
State of Indiana, Grown Robbett He Rodgers, Le und, Bride Rassa Dr. Knoll of wave by me united in marriage as authorised by a marriage license issued for County.	Signed Warren Q Robbins
State of Indiana, Grown Robbett He Rodgers, Le und, Bride Rassa Dr. Knoll of wave by me united in marriage as authorised by a marriage license issued for County.	Signed Warren a Robbins Official Designation Christian Denister 2 22 22 22 22 22 22 22 22 22 22 22 22
State of Indiana, Grown Robert He Rodgers, Lr. and, Bride Research 12, Knoll of were by me united in marriage as authorized by a marriage license issued for County. Dutod this 21.Th day of October, 106	Signed Warren a Robbins Official Designation Christian Property

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS County MALE Medical Examination Report Dated 12 October 1965 FEMALE Medical Examination Report Dated 12 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, representa-FEMALE APPLICANT ollock 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 White Negro Other (specify). Color or Race Date of birth verified by: Birth Cert. Other (Specify) 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 | Yes | 2. Are you under guardianship as a person of unsound mind? Drived Licent 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? No 🗆 Yes 🗆 4. Are you afflicted with a transmissible disease? Yes 🗆 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? Yes 🗌 6. Are you now under the influence of intoxicating liquor? 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? 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 dr (If yes, answer questions a, b, c) (a) List their full names, ages and address Residence of father (if deceased so state) (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? 11. Full name of father Birthplace of mother (State or foreign country) Oak landon Residence of father (if deceased so state) Occupation of father. State of Indiana. Birthplace of father (State or foreign country) Big lastock, Kussen County of .. December). Residence of mother (if deceased so state) Race of mother. Who Te Occupation of mother .. Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given in this application is true and correct. Circuit Court HENDRICKS County of ... 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...... HENDRICKSCircuit 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 State of Indiana, 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 County......Court by written order issued..... 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 day of authorizing the joining together as husband and wife and all further remembered, the following marriage certificate was filed in my office, to-wit: 1, Mayne Pressy one thousand nine hundred and Sifty fine at Lebanon , County of Boone,
State of Indiana, Groom Bernald & Pollock of Hendricks County, State of Indiana, and, Bride Mary & ashare of Beare,

Filed and recorded in accordance with the laws of the State of Indiana this L.g. day of Cletolical 19.65.

Signed Designation 19.65.

Clerk

Signed Links Links Circuit Court

Dated this 24 the day of October, 1965.

Signed J. Wayne Pressy

Official Designation Mexister

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No. 311
File Book 28
220-tola 1965
Date of Application

MALE Medical Examination Report Dated 18 Octobe 1965	FEMALE Medical Examination Report Dated 13 October 1965
Name of Physician Edward F. Cain MD.	Name of Physician L.E. HOITZ MD.
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	Name First Middle Last
Name First Middle Folder Dete of Right Month Day Year	Date of Birth Month Day Year
Date of Birth Month Day Place of Birth (State or fereign country)	Place of Birth (State or foreign country)
Residence Address Street or R. d. City County State	Residence Address Street or R. R. City County State
331 N. Drake Are Fullerton, Orange lale	Maiden Name if Different
Previous Marital Status: Never Married Number of Previous Marriages	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment Annulment 1963
Usual Occupation E lectrones Engr. Simplex lin	Color or Race White Negro Other (specify)
Date of birth verified by: Rirth Cert. Judicial Decree	Usual Occupation Assambler: Arrent & Flect.
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 3. Are you now or have you been within five (5) years an inmate of a county advlum or	1. Are you now or have you been adjudged, diagnosed or considered as:
home for indigent persons? If answer to 3 is "yes" has the cause of such condition been removed? No Yes	An Imbecile? Of Unsound Mind? No Yes Yes
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? 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? Yes No	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 Yes
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? Yes 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 Henry Descensed:
Terry Eugene (Tong) 16 Connasvill, Ind	Residence of father (if deceased so state) 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 Elica Ann Good
(e) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state)
Residence of father (if deceased so state)	Occupation of mother
Occupation of father Race of father White	alvalue and a second of the se
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS Ses: I depose and state the information given in this application is true and correct.
Residence of mother (if deceased so state)	Signed Desice D. De Hoff.
Occupation of mother A P Race of mother White	New Address
Birthplace of mother (State or foreign country).	Substribed and sworth to before months 122 2 day of October 1963
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Clerk HENDRICKS Circuit Court
New Address POBx 279, Fullerton Calif.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this 22 and day of October 19 05	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	
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 Signed.	Signed Father
Signed Mother	Signed
Subscribed and sworn to before me this	Subscribed and sworn to before me thisday of, 19,
COMPLETE IN WARPINGS INCOME.	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	RT. A marriage license having been refused to the above named parties, the
in Cleks of authorizes and directs the issuance	ourt by written order issued
RETURN OF MARRIAGE LICENS	E AND MARRIAGE CERTIFICATION
Set St Remembered, there was filed in my office a marriage lice	nse issued by the derk of the Circuit Court
iale leil E	and session the joining together as husband find wife
1. Clubres I blarres	
one thousand nine hundred and sixty-five	at Pittsburg , County of Hendricks ,
State of Indiana, Groom Wendell & Holden	of Change County, State of California
were by me united in marriage as authorized by a marriage lieuwing	Headrick County, State of California,
County. Dated this 23 /rd day of October, 1965	that purpose by the Clerk of the Circuit Court of Alexanderches
, 196 c	Signed Queleron Marria
Filed and recorded in accordance with the laws of the State	Official Designation of the
Filed and recorded in accordance with the laws of the State of Indiana this	day of October 1965
	Signed John Gumbold, John Clerk Thendricks Circuit Court
	Circuit Court

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STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

County

No. 312
File Book 28
25 October 1965
Date of Application

MALE	Date of Application
Medical Examination Report Dated 120 tobs 196	FEMALE
Name of Physician KW Kortley MA	Medical Examination Report Dated 120 to les 1860
ALL QUESTIONS MUST BE ANSWERED, Chapter 196 T- 11	Name of Physician RW. Krytley all
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
	the issuance of a license to marry by any false statement, representa-
Name Charles Aiddle Last	Name FEMALE APPLICANT
Date of Birth Month Day Year	Shall T Middle S Last
Place of Birth (State or foreign country) 1945	Date of Birth Day Year
Craw fordsuille In land	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	Residence Address Street on P. P.
Previous Marital Status: Never Married Number of Previous Marriages	City County State
Various Foded Press Post II II	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 Pro
Usual Occupation 118 A	Death Divorce Annulment
Date of birth verified by: Birth Cert. Luncial Decree	Color or Race White Negro Other (specify)
Other (Specify) Drivers livery	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? 2. Are you under guardianship as a person of unsound mind? Yes Yes Yes Yes Yes Yes Yes Yes	Dother (Specify) Notes License.
3. Are you now or have you been within five (5) years an inmate of a county of	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 have	An Imbecile?
4. Are you afflicted with a transmissible disease? No Yes 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?
7. Are you now under the influence of intoxicating liquor? No Yes \(\) Yes \(\) No \(\) Yes \(\) 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?
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? No Yes	5. Are you now under the influence of intoxicating liquor?
(If yes, answer questions a, b, c)	6. Are you now under the influence of a narcotic drug?
(a) List their full names, ages and addresses Name Age Address	7. Full name of father.
Age Address	Residence of father (if deceased so state)
	Occupation of father. Race 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. Se 85.1.
(c) Are you complying with any court order or order issued for their support?	Residence of mother (if deceased so state)
11. Full name of father Charles Joseph Kinnaman	Occupation of mother Cook . H.C. How. Race of mother. Ukit
Residence of father (if deceased so state).	Birthplace of mother (State or foreign country) Crothes wille, and.
Occupation of father	STAN MARKET LAND CONTRACTOR OF THE PARTY OF
Charles ton	State of Indiana, I depose and state the information given
Birthplace of father (State or foreign country)	N. HENDRICKS Ss: in this application is true and correct.
12. Full maiden name of mother. Bortho Sene Richard	County of Ss: in this application is true and correct.
3- +6- 1- 3-1-	N. HENDRICKS Ss: in this application is true and correct.
12. Full maiden name of mother. Bortha Jane Richard	N. HENDRICKS Ss: in this application is true and correct.
Residence of mother (if deceased so state) paterning for the state of mother (if deceased so state)	County of Signed Shelled F Reed
Residence of mother (if deceased so state) Occupation of mother (State or foreign country) State of Indiana, Lidence and state the information given	County of Signed Shell A Read New Address.
Residence of mother (if deceased so state) Occupation of mother (State or foreign country) State of Indiana, County of HENDRICKS Residence of mother (State or foreign country) I depose and state the information given in this application is true and correct.	County of Signed She Address in this application is true and correct. New Address day of Subscribed and sworn to before me this A Subscribed and sworn to before me this A Subscribed and sworn to be subscribed as a subsc
Residence of mother (if deceased so state) Occupation of mother (State or foreign country) State of Indiana, State of Indiana, Residence of mother (State or foreign country) Race of mother (State or foreign country) State of Indiana, I depose and state the information given in this application is true and correct.	Signed New Address Subscribed and sworn Defore me this Address Clerk Consent of Parents, Parent or Guardian
Residence of mother (if deceased so state) Occupation of mother (State or foreign country) State of Indiana, County of HENDRICKS Residence of mother (State or foreign country) I depose and state the information given in this application is true and correct.	Signed Services and correct. Signed Services and correct. Signed Services and several deposition is true and correct. Subscribed and sworn deposition in this application is true and correct. Signed Services and several deposition is true and correct. Signed Services and several deposition is true and correct. Signed Services and several deposition is true and correct. Signed Services and several deposition is true and correct. Signed Services and several deposition is true and correct. Signed Services and several deposition is true and correct. Subscribed and sworn deposition is true and correct. Subscribed and sworn deposition is true and correct. Clerk Circuit Court
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Residence of mother (if deceased so state) Occupation of mother Birthplace of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed New Address	Signed New Address Subscribed and sworn to before me this A contract. Clerk Consent of Parents, Parent or Guardian We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Residence of mother (if deceased so state) Occupation of mother Birthplace of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed New Address Subscribed and sworm to before of this Clerk Clerk CONSENT OF PARENTS, PARENT OR GUARDIAN	Signed New Address Subscribed and sworn to before me this A contract. Clerk Consent of Parents, Parent or Guardian We, the parents, of this applicant hereby give consent for this marriage. If only one parent
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Residence of mother (if deceased so state) Occupation of mother Birthplace of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed New Address Subscribed and sworn to before of this American day of HENDRICKS Clerk Consent 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 Signed
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Residence of mother (if deceased so state) Occupation of mother Birthplace of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed New Address Subscribed and sworn to before of this 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 unnecessity State of Indiana, County of HENDRICKS Signed Signed Signed Signed Signed Signed Signed Mother Subscribed and sworn to before in this day of the other parent unnecessity Mother Signed Subscribed and sworn to before in this day of the other parent unnecessity Clerk Clerk Clerk Clerk Clerk Clerk Clerk Clerk Clerk	Signed New Address Subscribed and sworn before me this Address Clerk HENDRICKS Clerk 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, County of Signed Signed Signed Signed Mother Subscribed and sworn to before me this day of the above named parties, the
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Residence of mother (if deceased so state) Occupation of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed May of Mender (State or foreign country) New Address Subscribed and sworn to before this of this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessity Signed Mother Signed May of Mender or this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessity Signed Mother Subscribed and sworn to before multis day of Mother Subscribed and sworn to before multis and any of Mother Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTRY of MARRIAGE LICENSE BY Remembered, there was filed in my office a marriage lice of Indiana dated the May of May of Marriage License of Indiana dated the May of May of May of Marriage License of Indiana dated the May of May of May of Marriage License of Indiana dated the May of May of May of May of Marriage License of Indiana dated the May of May o	County of Signed Signed Subscribed and sworn to before me this signs, state facts which render the consent of the other parent unnecessary Signed Mother Signed Mother Signed Mother Signed Mother Subscribed and sworn to before me this day of Subscribed
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Residence of mother (if deceased so state) Occupation of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed New Address Subscribed arg sworn to before the day of 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 Subscribed and sworn to before me dis. Signed Subscribed and state the information given in this application is true and correct. Clerk Complete the consent of the other parent unnecessary Subscribed and state the information given in the subscribed and state the informatio	County of HENDRICKS Signed Address Subcribed and sworn defore me this County of 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. County of Signed Mother Signed Mother Signed Mother Signed Mother Signed Mother Signed Mother Subscribed and sworn to before me this. Clerk Clerk Clerk ET. A marriage license having been refused to the above named parties, the parent unity written order issued and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE Mother Circuit Court me issued by the clerk of the marriage license to the above named parties. E AND MARRIAGE CERTIFICATE Mother Circuit Court me issued by the clerk of the marriage license to the above named parties. Le And Marriage License to the above named parties.
Residence of mother (if deceased so state) Occupation of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed New Address Subscribed and sworn to before the consent of the other parent unnecessary Signed S	Signed Suberbed and sworn before me this County of MENDRICKS Suberbed and sworn before me this County of Mendricks 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 Indians. County of Signed Mother Signed Mother Signed Mother Subscribed and sworn to before me this day of 19 Clerk CIerk ET. A marriage license having been refused to the above named parties, the nourt by written order issued and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE Circuit Court may be issued by the clerk of the shown in the size of the substant and wife of the substant office, to wit: hereby certify that on the Solk day of Catalogue, at Multipless has been at the substant and substant office, to wit: hereby certify that on the Solk day of Catalogue, at Multipless has been and substant and substant of the substant of the substant substant and substant substa
Residence of mother (if deceased so state) Occupation of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed New Address Subscribed and sworn to before the consent of the other parent unnecessary Signed S	Signed Address Suberbed and sworn Abefore in this application is true and correct. New Address Suberbed and sworn Abefore in this Address Suberbed and sworn Abefore in this Address Suberbed and sworn Abefore in this application and 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. County of Signed Mother Subscribed and sworn to before me this day of Clerk Clerk Clerk Clerk Mother Signed Mother Signed Mother Mo
Residence of mother (if deceased so state) Occupation of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed New Address Subscribed and sworn to before the consent of the other parent unnecessing the signed Signed	Signed Address Suberbed and sworn Abefore in this application is true and correct. New Address Suberbed and sworn Abefore in this Address Suberbed and sworn Abefore in this Address Suberbed and sworn Abefore in this application and 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. County of Signed Mother Subscribed and sworn to before me this day of Clerk Clerk Clerk Clerk Mother Signed Mother Signed Mother Mo
Residence of mother (if deceased so state) Occupation of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed New Address Subscribed and sworn to before the consent of the other parent unnecessary Signed S	County of Signed Signed Subarbed and sworn before me this Subarbed and sworn before me this Cark 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. County of Signed Mother Signed Mother Subscribed and sworn to before me this day of 19. Clerk CIrcuit Court by written order issued and filed of a marriage license to the above named parties, the new issued by the clerk of the authorizing the joining together as husband and wife and subscribed certify that on the Salk day of Clabbar and filed of the Salk day of Clabbar and filed of the Salk day of Clabbar and suffice, to-wi: All Clabbar and Salk day of Clabbar and Salk day of Clabbar and Salk day of County, State of Salkarana and Salk day of Salkarana and Salkara
Residence of mother (if deceased so state) Occupation of mother (if deceased so state) Occupation of mother (State or foreign country) State of Indiana, County of MENDRICKS Signed Substribed and sworn to before the consent of the other parent unnecessity. Signed Signed Substribed and sworn to before the consent of the other parent unnecessity. Signed Substribed and sworn to before the consent of the other parent unnecessity. Signed Subscribed and sworn to before the consent of the other parent unnecessity. Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTRY in. authorizes and directs the issuance RETURN OF MARRIAGE LICENSE Of Indiana dated the day of day of marriage certificate was filed in my office a marriage license issued for were by me united in marriage as authorized by a marriage license issued for were by me united in marriage as authorized by a marriage license issued for were by me united in marriage as authorized by a marriage license issued for were by me united in marriage as authorized by a marriage license issued for were by me united in marriage as authorized by a marriage license issued for were by me united in marriage as authorized by a marriage license issued for were by me united in marriage as authorized by a marriage license issued for were by me united in marriage as authorized by a marriage license issued for were by me united in marriage as authorized by a marriage license issued for were by me united in marriage as authorized by a marriage license issued for were by me united in marriage as authorized by a marriage license issued for were by me united in marriage as authorized by a marriage license issued for were by me united in marriage as authorized by a marriage license issued for were by me united in marriage as authorized by a marriage license issued for were by me united in marriage as authorized by a marriage license issued for were by me united in marri	County of Signed Sheller County of State of Indiana. County of Signed Sheller County of Sheller County of Signed Sheller County of Sheller County State of Sheller County Sheller County State of Sheller County Sheller County State of Sheller County
Residence of mother (if deceased so state) Occupation of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed Cork 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 unnecessity. State of Indiana, County of HENDRICKS Signed Subscribed and sworn to before in this application is true and correct. Signed Country of HENDRICKS Signed Subscribed and sworn to before in this Signed Subscribed and sworn to before in this Signed Subscribed and sworn to before in this Signed S	County of Signed Sheller Research New Address Rame Indiana. 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. Signed Signed Father Signed Mother Signed Mother Subscribed and sworn to before me this day of 19. Clerk T. A marriage license having been refused to the above named parties, the parent of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE And and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE And Signed Subscribed and wife issued by the clerk of the same issued by the clerk of the same issued of
Residence of mother (if deceased so state) Occupation of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed Cork 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 unnecessity. State of Indiana, County of HENDRICKS Signed Subscribed and sworn to before in this application is true and correct. Signed Country of HENDRICKS Signed Subscribed and sworn to before in this Signed Subscribed and sworn to before in this Signed Subscribed and sworn to before in this Signed S	County of Signed Sheller Research New Address Rame Indiana. 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. Signed Signed Father Signed Mother Signed Mother Subscribed and sworn to before me this day of 19. Clerk T. A marriage license having been refused to the above named parties, the parent of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE And and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE And Signed Subscribed and wife issued by the clerk of the same issued by the clerk of the same issued of
Residence of mother (If deceased so state) Occupation of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed Mendress Subscribed arfleworn to before the Consent of the other parent unnecessiry. State of Indiana, County of 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 reader the consent of the other parent unnecessiry. State of Indiana, County of HENDRICKS Signed Subscribed and sworn to before in this County of County in authorizes and directs the issuance RETURN OF MARRIAGE LICENSE Signed in my office a marriage license of Indiana dated the day of the other was filed in my office a marriage license issued for thousand nine hundred and state the information given in this application is true and correct. Signed County In According to the following marriage certificate was filed in my one thousand nine hundred and state of Indiana, Groom Charless Read of marriage icense issued for were by me united in marriage as authorized by a marriage license issued for County. Dated the consent of the state of Indiana, Groom County. Occuption of the other partiage license issued for County. Occuption of marriage as authorized by a marriage license issued for County. Occuption of the other partiage in the same and state the information given in this application is true and correct. Signed Signed Grek HENDRICKS Circuit Court County of Marriage Indiana Father Subscribed and sworn to before in this Signed Father Signed Father Subscribed and sworn to before in this Signed Father Signed Father Subscribed and sworn to before in this Signed Father Subscribed and state the information given in this applicant her of the same and correct. Signed Father Subscribed and state the information given in this applicant her of the same and co	County of Signed Sheller Research New Address Rame Indiana. 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. Signed Signed Father Signed Mother Signed Mother Subscribed and sworn to before me this day of 19. Clerk T. A marriage license having been refused to the above named parties, the parent of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE And and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE And Signed Subscribed and wife issued by the clerk of the same issued by the clerk of the same issued of
Residence of mother (if deceased so state) Occupation of mother (State or foreign country) State of Indiana, County of MENDRICKS Signed Subscribed and sworn to before mulis State of Indiana, County of MENDRICKS Signed Subscribed and sworn to before mulis Signed Signe	County of Signed Sheller Research New Address Rame Indiana. 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. Signed Signed Father Signed Mother Signed Mother Subscribed and sworn to before me this day of 19. Clerk T. A marriage license having been refused to the above named parties, the parent of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE And and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE And Signed Subscribed and wife issued by the clerk of the same issued by the clerk of the same issued of

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

File Box 28

260-to 4 1965

Date of Application

MALE Medical Examination Report Dated 190ctober 1965 Name of Physician 2 ames Black WD	Medical Examination Report Dated 190ctobe 1965 Name of Physician Report Dated 190ctobe 1965
	atement—Whoever procures the issuance of a license to marry by any false statement, representa-
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes Faise steetion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	
Name C First Middle Last	Name First Middle Last
(horles 1. Brent	Date of Birth Month Day Year
Date of Birth Month Day	July 18 1976
Place of Birth (State or Preign country)	Place of Birth (State on 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
	Previous Marital Status: Never Married Number of Previous Marriages
Last Marriage Ended By: Death Divorce Annulment	
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Deirth Cert. Dudicial Decree	Color or Race White Negro Other (specify)
Other (Specify)	Usual Occupation Wai Tress. Days Char
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes	Date of birth verified by:
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? 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?	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?
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? Yes No Ves Ves	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.
Name Age Address	Residence of father (if deceased so state)
	Occupation of father A state was known. Race of father who be
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother Nancy Ann Fields
(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)
their support? Yes No	Occupation of mother Race of mother Alexander
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father	The self-self-self-self-self-self-self-self-
Birthplace of father (State or foreign country) ladean Ton QKlahoma	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	County of in this application is true and correct.
Residence of mother (if deceased so state)	Signed Downs Jun Whilefor
Birthplace of mother (State or foreign country)	New Address
State of Indiana.	Subscribed and sworn to before me this 2 day of October, 1993
County of HENDRICKS ss: I depose and state the information given in this application by rue and correct.	Clerk Circuit Court
Signed Charles & . Exemb	
New Address 1981 Carol Are, Merced Cald	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworm to before me this 12 to day of 1903	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
- The state of the	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 ss:
	SignedFather
Signed Father Signed Mother	Signed
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of
Clerk	Clark
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF	The state of the s
	T. A marriage license having been refused to the above named parties, the
inauthorizes and directs the issuance o	ourt by written order issued
RETURN OF MARRIAGE ANGENE	a marriage license to the above named parties.
	E AND MARRIAGE CERTIFICATE use issued by the clerk of the Lendrales Circuit Court
Be it further remembered, the following marries a	nd Donna Jean Whitaker
Be it further remembered, the following marriage certificate was filed in my o	ffice, to-wit:
one thousand nine hundred and sister-Live	fice, to-wit: hereby certify that on the 30 th day of October a Bethsada Baptist Churchest, County of Hendricks, of Hendricks County, State of Indiana
State of Indiana, Groom (harles 1) 1 Phant	william and it applied Miller Chill, County of the maricks,
and, Bride Alonna Jean Whitakey	Vendricks County, State of Indiana,
were by me united in marriage as authorized by a marriage license issued for	that merroes by the Classic County, State of Andrews,
Dated this 30 Th day of October, 1965	
, 19.6.5	Signed P. M. D. A.
The same of the sa	Signed Rev Donald Tyles
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Baptist Missister
Property and the second	Signed John Jamboll Ja Clerk
	Hendricks Circuit Court
	Circuit Court

......Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

MALE Date of Application Medical Examination Report Dated FEMALE Medical Examination Report Dated 23 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, representa-Name of Physician_ MALE APPLICANT FEMALE APPLICANT 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. Negro | Other | (specify). Last Marriage Ended By: Death □ Divorce □ Annulment □ Color or Race Negro | Other | Date of birth verified by: Birth Cert. Judicial Decree Drivers Lie Other (Specify) 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 Of Unsound Mind? 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 home for indigent persons? An Imbecile? If answer to 3 is "yes" has the cause of such condition been removed? No 🗆 /Yes 🗆 Of Hasound Mind? 4. Are you afflicted with a transmissible disease? Yes 🗆 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? Yes | 6. Are you now under the influence of intoxicating liquor? 3. Are you afflicted with a transmissible disease? 7. Are you now under the influence of a narcotic drug? Xes 🗆 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 Age Residence of father (if deceased so state) Occupation of father Bus Myr: Ind. Vee Sch Birthplace of father (State or foreign country) 8. Full maiden name of mother. (b) Are you supporting or contributing to their support? Yes 🗆 No П (c) Are you complying with any court order or orders issued for their support? Yes 🗌 Occupation of mother. Residence of father (if deceased so state) ... Occupation of father Machinist: RIA Race of father white State of Indiana, Birthplace of father (State or foleign country) Kockville, lad 12. Full maiden name of mother com Lenova Residence of mother (if deceased so state) 6115. What co Occupation of mother lacks: Greater Packet of mother white Birthplace of mother (State or foreign country) Clavedak HENDRICKS I depose and state the information given in this application is true and correct. State of Indiana, HENDRICKS CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent th day of October ., 1965 signs, state facts which render the consent of the other parent unnecessary. Clerk HENDRICKSCircuit 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 .. Father State of Indiana, HENDRICKS County ofMother 19.00 COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, theauthorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Hendricks Be It Remembered, there was filed in my office a marriage license issued by the clerk of the...... day of ____ October _____, 1963, 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 30th day of October one thousand nine hundred and sixtly five at Brownsburg County of Hendricke,

State of Indiana, Groom Lary Wagne Louisy of Marion County, State of Landaura and, Bride Vicke Signin Barrett of Hendricks County, State of Indiand, Signed Rew L. Knopfmeer 30 th day of October, 1965. County. Official Designation Methodist Binister Dated this.

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

Date of Application FEMALE 10-25-65 Medical Examination Report Dated 10-25-6 MALE 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)". FEMALE APPLICANT MALE APPLICANT First Middle Name Date of Birth Date of Birth 3 Place of Birth (State or foreign Place of Birth (State or foreign country Residence Address 130x63A Previous Marital Status: Never Married Number of Previous Marriages Previous Marital Status: Never Married Number of Previous Marriages. Death Divorce Annulment Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: White Negro | Other | (specify). Color or Race Negro Other (specify). Color or Race Date of birth verified by: Birth Cert. | Judicial Decree Usual Occupation Other (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 Yes 🗆 Other (Specify). No Yes | Yes | Of Unsound Mind? 1. Are you now or have you been adjudged, diagnosed or considered as: 2. Are you under guardianship as a person of unsound mind? not y asylum or Yes 3. Are you now or have you been within five (5) years an inmate of a home for indigent persons? An Imbecile? Yes 🗌 Of Unsound Mind? No 🗆 If answer to 3 is "yes" has the cause of such condition been removed? Yes 🗆 Nob 4. Are you afflicted with a transmissible disease? 2. Are you under guardianship as a person of unsound mind? Yes 🗌 No Yes 🗌 5. Are you related to the bride closer than second cousin? Yes 🗆 3. Are you afflicted with a transmissible disease? Yes 🗌 6. Are you now under the influence of intoxicating liquor? 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 🗆 8. Are you able to support a family? 5. Are you now under the influence of intoxicating liquor? Yes 🗌 Yes No 🗆 9. Are you likely to so continue? No Yes 6. Are you now under the influence of a narcotic drug! 10. Do you have minor children from one or more former marriages? (If yes, answer questions a, b, c) 7. Full name of father.... (a) List their full names, ages and addresses Residence of father (if deceased so state) Address Age Occupation of father Wislern Electric Birthplace of father (State or foreign country) 8. Full maiden name of mother A und (b) Are you supporting or contributing to their support? No 🗆 Yes 🗌 (c) Are you complying with any court order or orders issued for their support? Residence of mother (if deceased so state). No 🗆 Occupation of mother housewif Warren 11. Full name of father Kintucky Residence of father (if deceased so state)... Birthplace of mother (State or foreign country) Occupation of father Coal Mine State of Indiana, Birthplace of father (State or foreign country). County of .. 12. Full maiden name of mother... Residence of mother (if deceased so state) Occupation of mother Mouseurge Race of Indiana Birthplace of mother (State or foreign country). 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 .Circuit Court County of CONSENT OF PARENTS, PARENT OR GUARDIAN Subscribed and aworn to before me this. 26 1965 We, the parents, of this applicant hereby give consent for this marriage. If only one parent 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. Signed .Mother COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, theCounty 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 Mendricks Circuit Court of Indiana dated the 30 day of Qetrue, 1965, authorizing the joining together as husband and wife

Be it further remembered, the following marriage certificate was filed in my office, to-wit: 1, New Culrey Morris 1, New Quelines Morris hereby certify that on the 30 Th day of October one thousand nine hundred and suffy five at Brownsburg, County of Hendricks State of Indiana, Groom Rodger W Katter of Hendricks County, State of Indiana and, Bride Jern M. adkins of Kendricks County, State of Indiana, Dated this 50 IA day of Official Designation Minister of the Guspel Filed and recorded in accordance with the laws of the State of Indiana this 2nd day of Povember, 1965 Signed John

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

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County MALE
Medical Examination Report Pated 230 CTol MALE Date of Application FEMALE Medical Examination Report Dated 23 Octoor 1965 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, representa-FEMALE APPLICANT 1945 Previous Marital Status: Never Married Number of Death | Divorce | Annulment | Last Marriage Ended By: Previous Marital Status: Never Married Number of Previous Marr White Negro Other (specify)... Color or Race Last Marriage Ended By: Death Divorce Annulment Usual Occupation Date of birth verified by: Color or Race Other [(specify). Usual Occupation C Are you now or have you been adjudged, diagnosed or considered as: Date of birth verified by: | Birth Cart. | Judicial Decre Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? Dother (Specify) ... Wel- Are you now or have you been within five (5) years an inmate of a home for indigent persons? Yes 🗌 1. Are you now or have you been adjudged, diagnosed or considered as ounty a vlum or No Yes If answer to 3 is "yes" has the cause of such condition been removed? An Imbecile? No | Yes | 4. Are you afflicted with a transmissible disease? Of Unsound Mind? No D 5. Are you related to the bride closer than second cousin? Yes 🗆 2. Are you under guardianship as a person of unsound mind? / Yes 🗆 6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a narcotic drug? / Yes 🗆 3. Are you afflicted with a transmissible disease? Yes 🗆 8. Are you able to support a family? 4. Are you related to the groom closer than second cousin? 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? (If yes, answer questions a, b, c) No 🗆 Yes 🗌 6. Are you now under the influence of a narcotic drug (a) List their full names, ages and addresses 7. Full name of father Charles Name Age Address Occupation of father Ketical. Birthplace of father (State or foreign country). (b) Are you supporting or contributing to their support? 8. Full maiden name of mother. NoП Yes 🗆 (c) Are you complying with any court order or orders issued for their support? nes 🗆 No 🗆 11. Full name of father. Occupation of mother tousewife . Birthplace of mother (State or foreign country). State of Indiana, County of ... 12. Full maiden name of mother 2 Residence of mother (if deceased so state) Occupation of mother ... rousewr Birthplace of mother (State or foreign country) ladramapoles, 1.0. State of Indiana, HENDRICKS CONSENT OF PARENTS, PARENT OR GUARDIAN New Address 233 N We, the parents, of this applicant hereby give consent for this marriag HENDRICKS signs, state facts which render the consent of the other parent unnece .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 COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above na Court by written order issued.....County... authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE, 19 65., authorizing the joining together as h day of november Be it farther remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the G. Th. day of Rossen at Plainfield, County of He krone & Parrett State of Indiana, Groom William Clail Hell of Margan County, State of State one thousand nine hundred and Sittles-Leve and, Bride Carolyn Sue Settles of Topendricks County, 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 Mesidelicks. County. Signed Irvine & 6 the day of November, 19 65. Dated this ... Official Designation Cler Filed and recorded in accordance with the laws of the State of Indiana this.....Clerk

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS County MALE
Medical Examination Report Pated 230 CTob MALE FEMALE Medical Examination Report Dated 23 Octoor 1965 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, representa-FEMALE APPLICANT Previous Marital Status: Never Married Number Death | Divorce | Annulment | Last Marriage Ended By: Previous Marital Statue . Navor Mo Color or Rac Usual Occup Date of birth Other HENDRICKS COUNTY DEPARTMENT OF PUBLIC WELFARE 1. Are you An BOARD MEMBERS Of I COURT HOUSE 2. Are you FRED R. HOBBS, PRESIDENT DANVILLE, INDIANA WILL NEIBOLD, VICE-PRESIDENT CASSIE MARTIN BERTHA V. CHRISTIE MARVIN ADAMS 3. Are you home for LELAH DUNCAN If answe DIRECTOR Oct. 28, 1965 4. Are you 5. Are you 7. Are you 8. Are you 9. Are you 10. Do you h (If yes. (a) List Re: SETTLES, CAROLYN S. Born: 8-27-1946 Place: Methodist Hospital Indianapolis, Indiana Mr. John Gambold, (b) Are (c) Are their Clerk, Hendricks County Court Danville, Indiana 11. Full name Dear Mr. Gambold: Occupation Birthplace From our records in this office and from Social Security 12. Full maid records in our files, to the writer's personal knowledge the Residence Occupatio birthdate of Carolyn S. Settles has been established as August Birthplac State of India 27, 1946. County of .. Hadys W. mourer bscribed (Mrs) Gladys Mowrer, Child Welfare Worker CONSENT OI Hendricks Co. Dept. Public Welfare We, the paren signs, state fa gm:lw FILED State of Indian County of OCT 2 8 1965 Subscribed and COMPLETE of Indiana Be it farthe I, one thousand County, State of Hadden County, State of Hadden State of Inc. were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of Alexandrical County. County. Signed Irvine & Parrett 6 the day of november, 19 65. Dated this Official Designation Clergyman Filed and recorded in accordance with the laws of the State of Indiana this......

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

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MALE	22 0 1 1 1065	Medical Examination Report Dated 27 October 1965
Medical Exan	mination Report Dated	Name of Physician Lloy of Terry M.D.
Name of Phys	sician 1995 precapibes "False 5	tatement—Whoever procures the issuance of a license to marry by any false statement, representa-
ALL QUESTIONS My tion or pretense shall	be fined in any sum not exceeding my management	FEMALE APPLICANT
Name F	MALE APPLICANT First Middle	Name First Middle Last
Date of Birth	Nonth 1 Day Year 1946	Date of Birth Day Year
Place of Birth (State	or preign 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 Stat	tus: 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	Prt. USMC.	Color or Race White Negro Other (specify)
	by: Birth Cert. Judicial Decree	Usual Occupation Machine Opr: Curtain Factor
2 Other (Specify 1. Are you now or h An Imbecile	have you been adjudged, diagnosed or considered as:	Date of birth verified by Birth Cert. Judicial Decree
Of Unsound	Mind? uardianship as a person of unsound mind? No Yes □ Yes □	1. Are you now or have you been adjudged, diagnosed or considered as:
home for indigen		An Imbecile? Of Unsound Mind? No Yes
4. Are you afflicted	with a transmissible disease?	2. Are you under guardianship as a person of unsound mind? No P Yes
6. Are you now un	to the bride closer than second cousin? No Yes nder the influence of intoxicating liquor? No Yes Yes Yes	3. Are you afflicted with a transmissible disease?
7. Are you now un 8. Are you able to	der the influence of a narcotic drug? No Yes Support a family? Yes No □	4. Are you related to the groom closer than second cousin? No Yes Yes Yes
9. Are you likely to	N No C	5. Are you now under the influence of intoxicating liquor? No Yes 6. Are you now under the influence of a narcotic drug? No Yes
(If yes, answer of	questions a, b, c) ill names, ages and addresses	7. Full name of father. Wilmer Heman Hess
(a) List their ru	Allegan	Residence of father (if deceased so state)
		Occupation of father A. C. T. Ruce of father
		Birthplace of father (State or foreign country)
(b) Are you sup	poporting or contributing to their support? Applying with any court order or orders issued for	8. Full maiden name of mother is deceased so state. Residence of mother (if deceased so state).
(c) Are you com their suppor	The Ver Rice Sawer No	Occupation of mother
	decased so state) Coatswille Mo	Birthplace of mother (State or foreign country). Case and the land
	Lection Man: PKRace of father white	with a market and the party and a find a supplemental and
South Stande	(State or foreign country)Alto.	State of Indiana, County of HENDRICKS Ss: I depose and state the information given in this application is true and correct.
Same Strains	mother Ethel Marie Annon	Signed Barbara Dandless
the the	(if deceased so state)	Signed
		I To be to the last
The madded in	week of the obe	New Address 101 Rathand October 1960
to and duck to	aer (State or foreign country). Wash. Ct. Has Ohr	Sulscribed and sworn to before me the Rath day of October 1960
M. Mohamannannannannannannannannannannannannan	ADRICKS Sate or foreign country Sate of the information given in this application is true and correct.	SulserNed and sworn to before me the Rath day of October 1960
Manual Ma	aer (State or foreign country). Wash. Ct. Has Ohr	SulserNed and sworn to before me the Rath day of October 1960
terry and avern to before	ADRICKS Signed Same Sam	Subscribed and sworn to before me this day of Octob 190.0 HENDRICKS Circuit Court
manuming to be to	BORICKS Signed Sand San	Sulscribed and sworn to before me this day of the Mendricks Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
	BERICKS Signed Address To be fore me this A S S Clerk HENDRICKS Circuit Court	Sulscribed and sworn to before me this day of HENDRICKS Clerk Clerk 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.
	ADRICKS Signed S	Sulscribed and sworn to before me this day of HENDRICKS Clerk Clerk 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.
	ss: I depose and state the information given in this application is true and correct. Signed day of October me flish As day of Clerk HENDRICKS Circuit Court RENTS, PARENT OR GUARDIAN this applicant hereby give consent for this marriage. If only one parent	Sulscribed and sworn to before me this day of HENDRICKS Clerk Clerk 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.
PAI CO PA	BERICKS Signed Signed MENTER Signed Clerk MENDRICKS To be fore me this N AS day of Care Court Clerk MENDRICKS Clerk MENDRICKS Circuit Court Court Chich cender the consent of the other parent unnecessary	Subscribed and sworn to before me the day of HENDRICKS Clerk 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,	BERICKS Signed Signed MENTER Signed Clerk MENDRICKS To be fore me this N AS day of Care Court Clerk MENDRICKS Clerk MENDRICKS Circuit Court Court Chich cender the consent of the other parent unnecessary	Substituted and sworn to before me this day of HENDRICKS Clerk 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, County of	ss: I depose and state the information given in this application is true and correct. Signed	Sulscribed and sworn to before me the Hendricks Clerk 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, County of Hendricks Signed Father
State of Indiana, County of	BENDRICKS SS: I depose and state the information given in this application is true and correct. Signed	Subscribed and sworn to before me the day of the parent Court Court 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, County of HENDRICKS Signed Father Signed Mother
State of Indiana, County of	ss: I depose and state the information given in this application is true and correct. Signed	Subscribed and sworn to before me the day of 1990. HENDRICKS Clerk 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, County of HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this day of 1990.
State of Indiana, County of	BENTS, PARENT OR GUARDIAN this applicant hereby give conjent for this marriage. If only one parent phich render the consent of the other parent unnecessary. Signed	Subscribed and sworn to before me this day of HENDRICKS Clerk 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 Signed Father Signed Mother Subscribed and sworn to before me this day of 19
State of Indiana, County of	BORICKS Signed Signed Clerk Clerk Circuit Court Chich render the consent of the other parent unnecessary Signed MARRIAGE LICENSE ISSUED BY ORDER OF CO	Suscribed and sworn to before me the day of hendricks and sworn to before me the hendricks are clerk. 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, County of hendricks are consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk URT. A marriage license having been refused to the above named parties, the
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State of Indiana, County of H	Signed Adverse Clerk Signed Country Signed Sig	Subscribed and sworn to before me the day of 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 H	BENDRICKS SS: I depose and state the information given in this application is true and correct. Signed Marriage Ma	Subscribed and sworn to before me this day of hendricks Clerk Clerk 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, County of HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk URT. A marriage license having been refused to the above named parties, the Court by written order issued 29 C to an and filed and filed and filed an arriage license to the above named parties. NSE AND MARRIAGE CERTIFICATE icense issued by the flerk of the Circuit Court
State of Indiana, County of H	ADRICK5 ss: I depose and state the information given in this application is true and correct. Signed. w Address In to before me this in this application is true and correct. Clerk HENDRICKS Clerk HENDRICKS Clerk Circuit Court this applicant hereby give consent for this marriage. If only one parent thick render the consent of the other parent unnecessary. Signed. Signed. Father Signed. Myther orn to before me this and a day of the consent of the other parent unnecessary. Clerk MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY. County. RETURN OF MARRIAGE LICE RETURN OF MARRIAGE LICE of the consent of the consent of the issuance of the consent of the con	Subscribed and sworn to before me this day of the New 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, County of	BERICKS Signed S	Subscribed and sworn to before me this day of the New 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, County of	Signed	Subscribed and sworn to before me the day of the MENDRICKS Clerk HENDRICKS Clerk 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, County of Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk Clerk URT. A marriage license having been refused to the above named parties, the court by written order issued 29 NSE AND MARRIAGE CERTIFICATE icense issued by the flerk of the solve named parties. NSE AND MARRIAGE CERTIFICATE icense issued by the flerk of the solve named parties husband and wife and solve to the solve that on the solve is sued by the flerk of the solve named parties. Out office, to-wit: hereby certifu that on the SOLD day of October as husband and wife and of the solve the solve that on the solve named Contents.
State of Indiana, County of He Subscribed and swo COMPLETE II in Complete II in Complete II in Complete II of Indiana add Be it further re I, Lalso one thousand n	Signed Mark Marking License and state the information given in this application is true and correct. Signed Marking May of Marking License Marking Ma	Subscribed and sworn to before me the day of HENDRICKS Clerk Court 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, County of Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk URT. A marriage license having been refused to the above named parties, the Court by written order issued 29 Cat and filed and filed and filed and sword by the terk of the Court of the consense issued by the terk of the Circuit Court of the consense issued by the terk of the Circuit graphs of the consense issued by the terk of the Circuit fourty office, to-wit: hereby certify that on the 30 th day of Cottalett of the consense issued by that on the 30 th day of Cottalett of the consense issued by that on the 30 th day of Cottalett of the consense issued by that on the 30 th day of Cottalett of the consense issued by that on the 30 th day of Cottalett of the consense issued by that on the 30 th day of Cottalett of the consense issued by that on the 30 th day of Cottalett of the consense issued by that on the 30 th day of Cottalett of the consense issued by that on the 30 th day of Cottalett of the consense issued by that on the 30 th day of Cottalett of the consense issued by the consense
State of Indiana, County of He Subscribed and swo COMPLETE II in Subscribed and swo of Indiana dat Be it further re I, Subscribed and swo state of Indiana and, Bride State of Indiana and, Bride State Sta	BENDRICKS Signed Clerk HENDRICKS Signed Clerk Glerk HENDRICKS Signed Clerk HENDRICKS Signed Clerk HENDRICKS Signed Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Marriage Marriage Marriage RETURN OF MARRIAGE LICE RETURN OF MARRIAGE LICE RETURN OF MARRIAGE LICE RETURN OF MARRIAGE LICE Mitch ender the day of Marriage certificate was filed in me of the day of Marriage the day of Marria	Subscribed and sworn to before me the Correct Court Mendricks Clerk Clerk Clerk Clerk Clerk 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, County of Hendricks Signed Father Signed Mother Subscribed and sworn to before me this. day of 19. Clerk URT. A marriage license having been refused to the above named parties, the court by written order issued 29. Court by written order issued 30. Court by written order issued 40. Court by written order issu
State of Indiana, County of Housand and, Bride Market of Indiana and, Bride Were by me uni	BENDRICKS Signed Clerk HENDRICKS Signed Clerk Glerk HENDRICKS Signed Clerk HENDRICKS Signed Clerk HENDRICKS Signed Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Marriage Marriage Marriage RETURN OF MARRIAGE LICE RETURN OF MARRIAGE LICE RETURN OF MARRIAGE LICE RETURN OF MARRIAGE LICE Mitch ender the day of Marriage certificate was filed in me of the day of Marriage the day of Marria	Subscribed and sworn to before me the day of Clerk 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, County of Signed Father Signed Mother Subscribed and sworn to before me this. Clerk Mother Subscribed and sworn to before me this. Court by written order issued Q to the above mamed parties, the court by written order issued Q to the above mamed parties. NSE AND MARRIAGE CERTIFICATE iconse issued by the lierk of the Circuit Court of the Circuit Court of the Court of the Circuit Court of County of County State of Coun
State of Indiana, County of	BENDRICKS Signed. Address The to before me flight. Clerk HENDRICKS Signed. Father Signed Aday of Clerk Hendrick Here was filed in my office a marriage lice the day of Commendation of the other parent unnecessary. County Adams A	Subscribed and sworn to before me the 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, County of Hendricks Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk URT. A marriage license having been refused to the above named parties, the Court by written order issued 29.0 ct. and filed ce of a marriage license to the above named parties. NSE AND MARRIAGE CERTIFICATE license issued by the terk of the Court of Marking together as husband and wife and
State of Indiana, County of	BENDRICKS Signed Clerk HENDRICKS Signed Clerk Glerk HENDRICKS Signed Clerk HENDRICKS Signed Clerk HENDRICKS Signed Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Mitch ender the consent of the other parent unnecessary Marriage Marriage Marriage RETURN OF MARRIAGE LICE RETURN OF MARRIAGE LICE RETURN OF MARRIAGE LICE RETURN OF MARRIAGE LICE Mitch ender the day of Marriage certificate was filed in me of the day of Marriage the day of Marria	Subscribed and sworn to before me the 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, County of Hendricks Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk URT. A marriage license having been refused to the above named parties, the Court by written order issued 29.0 ct. and filed ce of a marriage license to the above named parties. NSE AND MARRIAGE CERTIFICATE license issued by the terk of the Court of Marking together as husband and wife and
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State of Indiana. County of Hamber of Indiana date Be it further real, and the state of Indiana and, Bride were by me unit County. Dated this Dated this Hamber of Indiana and the state of Indiana and	BENDRICKS SSI	Subscribed and sworn to before me the Consent of 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 Signed Subscribed and sworn to before me this day of 19 Clerk CORT. A marriage license having been refused to the above named parties, the Court by written order issued 29 County of and filed ce of a marriage license to the above named parties. NSE AND MARRIAGE CERTIFICATE license issued by the terk of the Court of Subscribed and wife and suffections issued to the subscribed and wife and suffections issued by the terk of the Courty, sutherizing the joining together as husband and wife and suffections issued to the county, State of Subscribed and County, State of Subscribed and County, State of Subscribed Subs

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

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	Date of	Applica	tion	

MALE 22 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	FEMALE Medical Examination Report Dated 27 October 1965
Medical Examination Report Dated	Name of Physician Lloy of Terry M.D.
Name of Physician	tement—Whoever procures the issuance of a license to marry by any false statement, representa-
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)".	FEMALE APPLICANT
MALE APPLICANT Middle Aust	Name First Middle Last
Serry F. Sandars	Date of Birth Month Day Year
August 17 1946	Place of Birth (State or foreign country)
Place of Birth (State or foreign country) Paridone Address Streeter R R City County State	Residence Address Street or R. R. City County State
Residence Address Streeter R. R. Catebrile Hand.	Maiden Name if Different
Previous Marital Status: Never Married Number of Previous Marriages	Previous Marital Status: Never Married P Number of Previous Marriages
Last Marriage Ended By: Death Divorce Annulment	
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annument
Usual Occupation Port. USM.C.	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Machine Opr. Curtain Factor
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? 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? If answer to 3 is "yes" has the cause of such condition been removed? Yes	An Imbecile? Of Unsound Mind?
4. Are you afflicted with a transmissible disease?	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 Yes 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 No	4. Are you related to the groom closer than second cousin? No Yes Yes Yes
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? Yes No No Yes	 5. Are you now under the influence of intoxicating liquor? No ☐ Yes ☐ 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 Wilmer Herman (fell)
Name Age Address	Residence of father (if deceased so state)
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother lyma Beatrice Gentry
(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)
11. Full name of father De Vee Rice Sam ess	Occupation of mother
Ref	The same of the sa
Oct Bit	Many of Stationary and Stationary an
12. Fu DOLD	
Re I, Elle (R Sanders	hereby give my consent for
my son . A. 7. S	andless
State marry Brand Hes	to C
Count / Count	- Dolle R. Landers
Marie	and to badley
Subscribed and sugar to become	rent O J
subscribed and sworn to before me t	his as day of Wet 1963
we.	han Hall
signi	Notary Public
- Mycimic	num Apiras Sm 14 1967
State of Indiana,	County of HENDRICKS 88:
County of HENDRICKS	SignedFather
Signed Ethel Marie Sanders Mother	Signed
Subscribed and sworn to before me the day of day of 196	Subscribed and sworn to before me thisday of
Clerk	Clerk
	RT. A marriage license having been refused to the above named parties, the
in Clark Street authorizes and directs the issuance	ourt by written order issued
	SE AND MARRIAGE CERTIFICATE
Be It Remember to, there was filed in my office a marriage lice	nse issued by the flerk of the Property Circuit Court
of Indiana dated the 29th day of Octobs	19. , authorizing the joining together as husband and wife
Be it further remembered the following marriage certificate was filed in my	and Dabag Dean Hess
in the sage Haggard	hereby certify that on the 30th day of October,
State of Indiana, Groom Lland The Dander 1	at Alenwille , County of Hendricks , of Hendricks County, State of Indiana
ana, Bride Sart ara Lan Mess of	Kettnam County State of Indiana
were by me united in marriage as authorized by a marriage license issued for County.	Contract to the contract of th
	that purpose by the Clerk of the Circuit Court of
Dated this 30th day of October, 196	that purpose by the Clerk of the Circuit Court of
Dated this 30th day of October, 196	that purpose by the Clerk of the Circuit Court of
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Jalmage H. Haggard

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No. 518
File Book 28
29 October 1965

MALE Medical Examination Report Dated 25 Oct 12 1015	Date of Application
1000 1407	FEMALE Medical Examination Report Dated 25 Octobrians
Name of Physician Ookn Ellett &-	4 1
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes (ID.)	Name of Physician Sohn Ellett & MD.
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	ement—Whoever procures the issuance of a license to marry by any false statement, representa-
Name First Middle	FEMALE APPLICANT
Kobert Brock Hall	Name First Middle A Last
Date of Birth	Date of Birth North Dev Nece
Place of Birth (State or foreign (Onn'ry)	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	Poll Indiango los Ind.
KI Coatewille Hendricks Ind.	RX Bx 140 Claude (Gunty) State
Previous Marital Status: Never Married V 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 Manuing Dady D
Policia Ville	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 Collection Secs: 45 Anna
1. Are you now or have you been adjudged, diagnosed or considered as:	Date of birth verified by: Birth Cert. Judicial Desce
Of Unsound Mind? No Ves	Other (Specify)
2. Are you under guardianship as a person of unsound mind? No Ves 3. Are you now or have you been within five (5) years an inmate of a county as flum or home for indigent persons? No Yes	1. Are you now or have you been adjudged, diagnosed or considered as:
home for indigent persons? No Yes If answer to 3 is "yes" has the cause of such condition been removed? No Yes	An Imbecile?
4. Are you afflicted with a transmissible disease? No S Yes	Of Unsound Mind?
5. Are you related to the bride closer than second cousin? No Yes 6. Are you now under the influence of intoxicating liquor? No Yes	2. Are you under guardianship as a person of unsound mind? No ✓ Yes ☐ 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?
8. Are you able to support a family? Yes W No	5. Are you now under the influence of intoxicating liquor?
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? No Yes	6. Are you now under the induence of a narcotic drug?
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father Sames Bournay Meege
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Mach are Inlaw Race of father White
	Birthplace of father (State or foreign country 20 week T, Kentucky.
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother. W. A. Fred Larkaine Morci
(c) Are you complying with any court order or orders issued for	Residence of mother (if deceased so state)
their support.	Occupation of mother
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country New Har many, Lad.
Occupation of father	The second secon
	State of Indiana, HENDRICKS I depose and state the information given in this application is true and correct.
Rightplace of father (State or foreign country)	
Birthplace of father (State or longin country)	County of
12. Full maiden name of mother Watha Elizabeth Kell	County of
Birthplace of father (State or longin country)	Signed New Address.
12. Full maiden name of mother. What he Elizabeth Kells Residence of mother (if deceased so stary Coafesville Ind.) Occupation of mother. Race of mother. Substitution	New Address. Subscribed and sworn to before me this Canada day of October, 1965
Residence of mother (if deceased so star) Occupation of mother (State or foreign country) Birthplace of mother (State or foreign country) Converse Louisiana I depose and state the information given is true and correct.	New Address Subscribed and sworn to before me this Mary day of October, 1905
12. Full maiden name of mother. What he Elizabeth Kells Residence of mother (if deceased so state) Occupation of mother. Race	Signed
Residence of mother (if deceased so state) Occupation of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, HENDRICKS as: I depose and state the information given in this application is true and correct.	Signed
Residence of mother (if deceased so state) Occupation of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed New Address Accounts of Manager of	Signed
12. Full maiden name of mother. Residence of mother (if deceased so stat) Occupation of mother. Birthplace of mother (State or foreign country). Converse. State of Indiana, County of. HENDRICKS Signed New Address.	Signed
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, County of. HENDRICKS Signed. New Address. Subscribed and sworn to before to the state of the	Signed
Residence of mother (if deceased so state) Occupation of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed New Address Subscribed and sworn to before the day of HENDRICKS Correct Consent of Parents, Parent or Guardian We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Signed
Residence of mother (if deceased so state) Occupation of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed New Address Subscribed and seworn to before in this application is true and correct. Clerk Circuit Court	Signed
Residence of mother (if deceased so state) Occupation of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed New Address Subscribed and sworn to before the day of HENDRICKS Correct Consent of Parents, Parent or Guardian We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Signed
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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, County of HENDRICKS Signed New Address Subscribed and seworn to before at the signs, state facts which render the consent of the other parent unnecessary State of Indiana, 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 State of Indiana, State of Indiana, HENDRICKS State of Indiana, HENDRICKS	New Address. Subscribed and sworn to before me this day of Clerk. Clerk. Clerk. Clerk. 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. Kendricks Signed. Father
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, County of. Signed. New Address. Subscribed and sworn to before an AM. 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 State of Indiana, County of. HENDRICKS Father	Signed New Address Subscibil and sworn to before me this day of Octor, 1900 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 Signed Signed Father Signed
12. Full maiden name of mother Residence of mother (if deceased so state) Occupation of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed New Address Subbaribed and sworn to before to the Consent of the other parent unnecessary Signs, state facts which render the consent of the other parent unnecessary State of Indiana, County of HENDRICKS Signed Father Signed Mother	Signed
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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, County of HENDRICKS Signed New Address Subscribed and sworn to before applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. Signed Subscribed and sworn to before me this. Signed Subscribed and sworn to before me this. Signed Subscribed and sworn to before me this. Signed COMENTERS HENDRICKS COMENTERS HENDRICKS Signed Subscribed and sworn to before me this. COMENTERS HENDRICKS COMENTERS HENDRICKS Signed COMENTERS HENDRICKS COMENTERS HENDRICKS COMENTERS HENDRICKS COMENTERS HENDRICKS SIGNED COMENTERS HENDRICKS COMENTERS HENDRICKS COMENTERS HENDRICKS HENDRICKS ISSUED BY ORDER OF COUNTY	Signed. New Address. Subscribed and sworn to before me this. Clerk. Clerk. Clerk. 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. County of. Signed. Signed. Signed. Signed. Signed. Signed. Mother Subscribed and sworn to before me this. Clerk Clerk CIrcuit Court Amarriage license having been refused to the above named parties, the and filed
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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, County of New Address Subbaribed and sworn to before Occupation 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 Signed Signed Subscribed and sworn to before me this. Signed Subscribed and sworn to before me this. Signed Subscribed and sworn to before me this. COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY COUNTY OF COUNTY ORDER OF COUNTY COUNTY ORDER OF COU	Signed. Subscribed and sworn to before me this day of October 15000 HENDRICKS Clerk 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. County of Signed Mother Signed Mother Signed Mother Signed Mother Subscribed and sworn to before me this day of 19 Clerk IRT. A marriage license having been refused to the above named parties, the court by written order issued and filed of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE Let the clerk of the Marriage License of the Court Spandalles and filed Circuit Court
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, County of New Address Subbaribed and sworn to before Occupation 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 Signed Signed Subscribed and sworn to before me this. Signed Subscribed and sworn to before me this. Signed Subscribed and sworn to before me this. COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY COUNTY OF COUNTY ORDER OF COUNTY COUNTY ORDER OF COU	Signed. Subscribed and sworn to before me this day of October 15000 HENDRICKS Clerk 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. County of Signed Mother Signed Mother Signed Mother Signed Mother Subscribed and sworn to before me this day of 19 Clerk IRT. A marriage license having been refused to the above named parties, the court by written order issued and filed of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE Let the clerk of the Marriage License of the Court Spandalles and filed Circuit Court
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12. Full maiden name of mother (If deceased so state) Occupation of mother (If deceased so state) Occupation of mother (State or foreign country) State of Indiana, County of HENDRICKS Sagned New Address Subbaribed and sworn to before to the 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 Subscribed and sworn to before me this day of factorized for the consent of the other parent unnecessary. Signed Subscribed and sworn to before me this day of factorized in my office a marriage life of Indiana dated the day of factorized was filed in my office a marriage life of Indiana dated the day of factorized was filed in my office a marriage life of Indiana dated the day of factorized was filed in my office a marriage life of Indiana dated the day of factorized was filed in my office a marriage life of Indiana dated the day of factorized was filed in my office a marriage life of Indiana dated the day of factorized was filed in my office a marriage life of Indiana dated the day of factorized was filed in my office a marriage life of Indiana dated the day of factorized was filed in my office a marriage life of Indiana dated the day of factorized was filed in my office a marriage life of Indiana dated the day of factorized was filed in my office a marriage life of Indiana dated the day of factorized was filed in my office a marriage life of Indiana dated the day of factorized was filed in my office a marriage life of Indiana dated the day of factorized was filed in my office a marriage life of Indiana dated the day of factorized was filed in my office a marriage life of Indiana dated the day of factorize	Signed New Address Subscriber and sworn to before me this day of Octown 1908 Gerk 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. County of. Signed Signed Signed Subscribed and sworn to before me this. Clerk Mother Subscribed and sworn to before me this. Aday of. Clerk IRT. A marriage license having been refused to the above named parties, the court by written order issued. Court by written order issued. Corruit Court by written order issued. Co
Residence of mother (If deceased so state) Occupation of mother (If deceased so state) Occupation of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed New Address Subscribed and sworn to before the consent of the other parent unnecessary Signed Sign	Signed New Address Subscribed and sworn to before me this day of 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 Signed Signed Signed Signed Signed Subscribed and sworn to before me this County of Clerk Signed Subscribed and sworn to before me this Of a marriage license having been refused to the above named parties, the and filed of a marriage license to the above named parties. SEE AND MARRIAGE CERTIFICATE Ense issued by the clerk of the Standback Court to the consensual substant and wife parties, authorizing the joining together as husband and wife office, to wit: Adaption of Standback County
Residence of mother (If deceased so state) Occupation of mother (If deceased so state) Occupation of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed New Address Subscribed and sworn to before the day of HENDRICKS Clerk CONSENT OP 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 Signed Si	Signed New Address Subscribed and sworn to before me this Aday of Actor 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 Signed Signed Mother Subscribed and sworn to before me this day of Clerk Court by written order issued and filed of a marriage license having been refused to the above named parties, the court by written order issued and filed of a marriage license to the above named parties. SEE AND MARRIAGE CERTIFICATE Circuit Court was a file of a marriage license to the above named parties. SEE AND MARRIAGE CERTIFICATE Circuit Court (SEE AND MARRIAGE CERTIFICATE) Marriage license to the above named parties. SEE AND MARRIAGE CERTIFICATE Circuit Court (SEE AND MARRIAGE CERTIFICATE) Aday of Marriage license (SEE AND MARRIAGE CERTIFICATE) Circuit Court (SEE AND MARRIAGE CERTIFICATE) CIRCING (SEE AND MARRIAGE CERTIFICATE) CIRCUIT COURT (SEE AND MARRIAGE CERTIFICATE) CIRCUIT
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Residence of mother (if deceased so state of content of mother content of the application in true and correct in this application in true and correct of the content of the content of the marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS Signed Signed Marriage Incent of the content of the	Signed. New Address. Subscribed and sworn to before me this. 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. Signed. Signed. Signed. Subscribed and sworn to before me this. County of. Signed. Subscribed and sworn to before me this. Clerk RRT. A marriage license having been refused to the above named parties, the court by written order issued. SEE AND MARRIAGE CERTIFICATE Circuit Court plants issued by the clerk of the factorizing the joining together as husband and wife and Marylant Rekall. County of Hendricks. County of Hendricks. County, State of Hendricks. County, State of Hendricks. County, State of Hendricks. The Address. County, State of Hendricks. The Address. County, State of Hendricks. County, State of Hendricks. The Address. County, State of Hendricks.
Birthplace of mother (if deceased so state) Occupation of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, County of HENDRICKS Sixmed Subscribed and sworn to before The 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 Signed Subscribed and sworn to before me this day of County of Signed Subscribed and sworn to before me this day of County of Signed Subscribed and sworn to before me this day of Signed Subscribed and state the information given to the intrinsical subscribed in this day of Signed Subscribed and st	Signed New Address Subscribed and sworn to before me this 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 Signed Mother Signed Mother Signed Mother Signed Mother Subscribed and sworn to before me this day of Clerk TRT. A marriage license having been refused to the above named parties, the court by written order issued and filed of a marriage license to the above named parties. TSE AND MARRIAGE CERTIFICATE court of the Marginette Ausband and wife of fice, to-wit: 1945. authorizing the joining together as husband and wife of fice to-wit: And Marginette Marginette County, State of Marginette Ausband and wife of the Marginette Ausband State of Marginette Ausband County, State of Marginete Ausband County, State of Marginete Ausband County, State of
Residence of mother (if deceased so state of content of mother content of the application in true and correct in this application in true and correct of the content of the content of the marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of HENDRICKS Signed Signed Marriage Incent of the content of the	Signed New Address Subscribed and sworn to before me this 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 Signed Mother Signed Mother Signed Mother Signed Mother Subscribed and sworn to before me this day of Clerk TRT. A marriage license having been refused to the above named parties, the court by written order issued and filed of a marriage license to the above named parties. TSE AND MARRIAGE CERTIFICATE court of the Marginette Ausband and wife of fice, to-wit: 1945. authorizing the joining together as husband and wife of fice to-wit: And Marginette Marginette County, State of Marginette Ausband and wife of the Marginette Ausband State of Marginette Ausband County, State of Marginete Ausband County, State of Marginete Ausband County, State of

MALE

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS __County Date of Application

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)". FEMALE APPLICANT MALE APPLICANT Name First uman Date of Birth Date of Birth County 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 Last Marriage Ended By: Color or Race White Negro Negro | Other | (specify) Color or Race Usual Occupation Date of birth verified by: ☐ Birth Cert. ☐ Judicial Decree Usual Occupation Other (Specify)..... Birth Cert Judicial Decree Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Date of birth verified by /Yes 🗆 Other (Specify)... Yes 🗌 Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? 1. Are you now or have you been adjudged, diagnosed or considered as: Yes 🗌 3. Are you now or have you been within five (5) years an inmate of a home for indigent persons? An Imbecile? Yes 🗌 Of Unsound Mind? If answer to 3 is "yes" has the cause of such condition been removed? 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? Yes 🗌 3. Are you afflicted with a transmissible disease? Yes 🗆 6. Are you now under the influence of intoxicating liquor Yes Yes 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? 5. Are you now under the influence of intoxicating liquor? No 🗆 9. Are you likely to so continue? No 🗆 Yes 🗀 6. Are you now under the influence of a narcotic drug? 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 Address Occupation of father lower house man Birthplace of father (State or foreign country) (b) Are you supporting or contributing to their support? No 🗆 (c) Are you complying with any court order or orders issued for their support? Yes 🗌 No 🗆 11. Full name of father Birthplace of mother (State or foreign country).... Residence of father (if deceased so state) 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. 12. Full maiden name of mother There was a line Residence of mother (if deceased so state) Occupation of mother.... Birthplace of mother (State or foreign country) HENDRICKS 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 HENDRICKS signs, state facts which render the consent of the other parent unne 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, HENDRICKS County of .. Signed ... Signed ... Subscribed and sworn to before me this......day of......day 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 of Indiana dated the 2 nd day of November , 1965, 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 2nd day of Rovember one thousand nine hundred and Sixty-five at Coatesville , County of Hendricks State of Indiana, Groom Larry M. Edwards of Hendricks County, State of Indiana and, Bride Jo ann Layman of Hendrichs County, State of Indiana Official Designation McZhodist Clergyman Filed and recorded in accordance with the laws of the State of Indiana this 9 th day of Presenter , 1965 Signed John Sambald, J. Clerk

Hendischer Circuit Court

No From You was You was You was You was You was I want on what I want on the property was a waste of the property was I waste on the property waste of the

he information given in from and exceed.

APPLICATION FOR MARRIAGE LICENSE

No. 320
File Book 28

Date of Application

Date of Application

HENDRICKS County File 28	
MALE 900 11	Date of Application
Medical Examination Report Dated 190ctober 1965	FEMALE
Name of Physician Don't D. Haggard M.D.	Medical Examination Report Dated 29 October 1965
ALL QUESTIONS MUST BE ANSWERED. Chapter 126 Indian	Name of Physician Dorrd B. Haggand no
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 many
Elizab	
Sames A: Walget	Name First FEMALE APPLICANT
Date of Birth Month Day Year	Date of Birth Month F Veel 4
Place of Birth (State or foreign country)	Day Year
Residence Address Street or R. R. Gty County State	Place of Birth (State or foreign contry)
RI Clayton Hend. State	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Diverent Clay ton Henricks Ind.
Last Marriage Ended By: Death Divorce Annulment	Same F. Hanneman
Hew so Ment bs	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White W Negro Other (specify)	Last Marriage Ended By: Death Divorce Angulment D
Usual Occupation Construction MS Manns.	Color or Race White Negro Other (specify)
Date of bipth verified by: Birth Cert. Judicial Decree	regio Other (specity)
1. Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation Machine Opr. Oak 6.
An impedie No W Yes	Date of birth verified by: Birth Cert. Judicial Decree
2. Are you under guardianship as a person of unsound mind? Yes Yes Yes	1 Are you now on home or have
3. Are you now or have you been within five (5) years an inmate of a county a flum or home for indigent persons?	1. Are you now or have you been adjudged, diagnosed or considered as: 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?	Of Unsound Mind?
4. Are you affected with a transmissible disease? No Yes No Yes Yes	2. Are you under guardianship as a person of unsound mind? No Ves
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 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? 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 P Yes
(a) List their full names, ages and addresses	7. Full name of father
James Mike, 12 2 RI Clayta (Fat	Residence of father (if deceased so state)
Shelds hee 97 Math	Occupation of father Race of father Race of father Birthplace of father (State or foreign country)
Bexan	Ruby E. Eastley
(b) Ye will supporting or contributing to their support? (c) Are you complying with any court order or orders issued for	o. Full marger name of mounts
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state)
11. Full name of father	Occupation of mother
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
Birthplace of father (State or foreign country)	County of HENDRICKS 88: in this application is true and correct.
12. Full maiden name of mother.	Sime Jane of Meely
Residence of mother (if deceased so state)	Same.
Occupation of mother Security West to Race of mother Washington	New Address
Birthplace of mother (State Poreign country)	Subscribed and sworm to before the Chamber of the C
State of Indiana, County of HENDRICKS Ss: I depose and state the information given in this application is true and correct.	Clerk
Signed Jame a Walter	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Addrog Clayton In Jrans.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworp to before the Asort day of Octo 3, 1943	signs, state facts which render the consent of the other parent unnecessary
Clerk HENDRICKS Circuit Court	signs, state facts which fellow
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 } ss:
	County of
State of Indiana, County of HENDRICKS S8:	SignedFather
Father	Signed
Signed	Subscribed and sworn to before me this
Subscribed and sworn to before me thisday of	Clerk
Clerk	I to the shove named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	RT. A marriage license having been refused to the above and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	ourt by written order issued
in authorizes and directs the issuance	of a marriage license to the above named parties.
ADJACE LICEN	SE AND MARRIAGE CERTIFICATION Circuit Court
The Til Mary was filed in my office a marrays was	the joining the joining together as husband and wife
day of day of	In Enely
of Indiana dated the	and
antificate was filed in my	O I I I I I I I I I I I I I I I I I I I
Be it further remembered, the following marriage certificate	hereby certify that on the day of any of
of Indiana dated the day of Be it further remembered, the following marriage certificate was filed in my I, A Name of Jacobsett	hereby certify that on the Coth day of marie , country of marie , at Indiana sales
1	County State of Market Market
one thousand nine hundred and 65	of Hendricks County, State of Indiana,
one thousand nine hundred and 65	of Bendricks County, State of Indiana, Dendricks County, State of Indiana, that purpose by the Clerk of the Circuit Court of Standards
one thousand nine hundred and 65 State of Indiana, Groom James a Mely of and, Bride Jame Mely neverted in marriage as authorized by a marriage license issued for	of Bladricks County, State of Indiana, County, State of Indiana, County, State of Indiana, That purpose by the Clerk of the Circuit Court of Standards
one thousand nine hundred and 6.5 State of Indiana, Groom James a Malker of and, Bride Jame Muly of were by me united in marriage as authorized by a marriage license issued for County.	of Hadricks County, State of Indiana, Of Hadricks County, State of Indiana, That purpose by the Clerk of the Circuit Court of Handricks Signed A. Marien Jacobson
one thousand nine hundred and 6.5 State of Indiana, Groom James a Malker of and, Bride Jame Muly of were by me united in marriage as authorized by a marriage license issued for County.	of Hadricks County, State of Indiana, Of Hadricks County, State of Indiana, That purpose by the Clerk of the Circuit Court of Handricks Signed A. Marien Jacobson
one thousand nine hundred and 6.5 State of Indiana, Groom James a Malker of and, Bride Jame Muly of were by me united in marriage as authorized by a marriage license issued for County.	Official Designation Official Designation Official Designation Official Designation County, State of Indiana, County, State
one thousand nine hundred and 65 State of Indiana, Groom James a Mely of and, Bride Jame Mely neverted in marriage as authorized by a marriage license issued for	County, State of Judiana, County, State of Judiana, County, State of Judiana, r that purpose by the Clerk of the Circuit Court of Hendricks. Signed A. Marien Jacobson

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No. 32 File Book 28 Date of Application

MALE 27 October 1965	FEMALE Medical Examination Report Dated 27 October 1961
Medical Examination Report Dated	Name of Physician Thomas P. Chase MA
Name of Physician ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state of the control of th	
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "Faise State tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	FEMALE APPLICANT
MALE APPLICANT None First MidNe Last	Name First S Middle Last
Orville Woodrow Dacon	Date of Binth Month Day
Date of Birth State or foreign country)	Place of Birth (State or foreign country)
Danville Indiana County State	Residence Address Street or R. R. City County State
KI Clayton Hentricks Ino.	Maiden Name if Different
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	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Un and love
Other (Specify)	Date of birth verified by: Birth Cert. Judicial Decree
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Of Unsound Mind? Yes Yes	Other (Specify)
2. 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? Yes
home for indigent persons? 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 Yes Yes Yes Yes Yes	2. Are you under guardianship as a person of unsound mind? No Yes Yes Yes
6. Are you now under the influence of intoxicating liquor? 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 likely to so continue? Yes No	5. Are you now under the influence of intoxicating liquor?
9. Are you likely to so continue: 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 N
(a) List their full names, ages and addresses Name Age Address	7. Full name of father (if deceased so state)
Name	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. Session and a session of mother (if deceased so state).
(c) Are you complying with any court order or orders issued for their support?	Occupation of mother
11. Full name of father	Birthplace of mother (State or foreign country) Old Agasta Indian.
Occupation of father work drive: String ace of father to	State of Indiana. I denose and state the information given
Birthplace of father (State or foreign country)	County of HENDRICKS ss: in this application is true and correct.
Residence of mother (if deceased so state) A Clay Ton, (N.)	Signed Carolyn Sul yout
Occupation of mother	New Address
Birthplace of mother (State or foreign country)	Subscribed and aworn to before me this. HENDRICKS
State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.	Clerk Circuit Court
1192) icans and Colors	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn tollegore me min Sp day of October 1965	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	
signs, state facts which render the consent of the other parent unnecessary	Hard that a read with the surprised by the Market of Survey of Sur
	State of Indiana,
State of Indiana.	County of
County of HENDRICKS	SignedFather
Signed	SignedMother
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of
Clerk	Clerk
	JRT. A marriage license having been refused to the above named parties, the
inauthorizes and directs the issuance	Court by written order issued
	ISE AND MARRIAGE CERTIFICATE A
Be It Remembered, here was filed in my office a marriage lic	cense issued by the elerk of the Hend revision Circuit Court
	, 19 authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my	
one thousand nine hundred and Sister-Live	hereby certify that on the lether day of Rovember, at Bartlett Chapel Methodist Wardney of Hendricks,
	of Hendriaks County, State of Indiana
and, Bride analyse Sue yark of	Hendricks County, State of Indiana,
County.	or that purpose by the Clerk of the Circuit Court of Mendricks
Dated this 6 Th day of November , 196	Signed David & Barnett
	aris in mi of the state of a street of
Filed and recorded in accordance with the laws of the State of Indiana this.	9th day of November , 1965 Church
	Signed John Dambold Jo Clerk Mendricks Circuit Court
	Cinavit Count

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

Indiana State Board of Health under Authority Chap. 126, Ind. Acts 1905 APPLICATION FOR MARRIAGE LICENSE No. 32		
HENDON FOR	MARRIAGE LICENSE	
MALE	CKS County	
Medical Examination Report Dated	FEMALE Date of Application	
Name of Physician Lloy J Tary M.A.	Medical Examination Report Dated 1 Noscular 1965	
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	Name of Physician Lleyd Terry MA	
MALE APPLICANT	tement—Whoever procures the issuance of a license to marry by any false statement, represent	
Name Russell Middle Clast	FEMALE APPLICANT	
Date of Birth Month Day Year	Middle Lost	
Place of Birth (State or foreign country)	Date of Birth Month Day Year	
Residence Address Street or R. R. City County State	Place of Birth (State of foreign country)	
Previous Marital Status: Never Married Number of Previous Marriages	Residence Address Street of R. R. City County State	
Last Marriage Ended By: Death Divorce Annulment	Maiden Name if Different Washing to St Danville Hew. Inc	
Calor or Rece White W Norma S Out	Previous Marital Status: Never Married Number of Previous Marriages	
(opecity)	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 Baby sitting	
Of Unsound Mind?	Date of birth verified by: Dirth Cert. Judicial Decree	
2. Are you under guardianship as a person of unsound mind? No P Yes No P Y	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 represented.	An Imbecile? No Ves	
4. Are you afflicted with a transmissible disease? No Yes Yes	Of Unsound Mind? 2. Are you under quardianable as a property of the second sec	
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a paragraph drugs?	2. Are you under guardianship as a person of unsound mind? 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?	
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? No Yes	5. Are you now under the influence of intoxicating liquor? No P 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 Cancle William Device School	
Name Age Address	Residence of father (if deceased so sto)	
	Occupation of father Trob OK Hand Mace of father White	
	8. Full maiden name of mother.	
(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)	
11. Full name of father Charles Elma Chandler	Occupation of mother Race of mother Race of mother	
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country). Russell Springs K	
Birthplace of father (State or foreign country)	State of Indiana, I depose and state the information given	
12. Full maiden name of mother Margaritle Viola May Clark	County of HENDRICKS ss: in this application is true and correct.	
Residence of mother (if deceased so state)	Signed Jundo & Dergenge	
Birthplace of mother (State or foreign country)	New Address	
State of Indiana, I depose and state the information given	Subscribed and sworn to before me this	
County of HENDRICKS ss: in this application is true and correct.	Clerk Circuit Court	
New Address 270 S. Wash & Damitle, Ind.	CONSENT OF PARENTS, PARENT OR GUARDIAN	
Subscribed and syorn to before me thin and day of Joseph 19 65	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		
signs, state facts which render the consent of the other parent unnecessary		
	State of Indiana,	
State of T. 11	County of HENDRICKS ss:	
State of Indiana, County of HENDRICKS	SignedFather	
Signed Communication of the Co	Signed	
Subscribed and sworn to before the thin day of	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	
County	art by written order issued	
RETURN OF MARRIAGE LICENSE	and Marriage Certificate the issued by the clerk of the	
of Indiana dated the day of day of	e issued by the clerk of the	
	County of Alandarian	
and, Bride Sinda Rouse Benglinge of were by me united in marriage as authorized by a marriage license issued for the County.	hat purpose by the Clerk of the Circuit Court of	
County.	- Carley Bournan	
	official Designation Minister 19.65.	
0	19.6.2.	

15 th day of november

.....Clerk

....Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No. 523
File South 28
Date of Application

County HENDRICKS FEMALE MALE Medical Examination Report Dated Medical Examination Report Dated Name of Physician Hernlein 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 Middle Date of Birth Date of Birth Number of Previous Marriages Previous Marital Status: Never Married Previous Marital Status: Never Married
Number of Previous Marriages Last Marriage Ended By: Death Divorce Annulment Divorce Annulment Death | Last Marriage Ended By: White [Negro 🗆 Other (specify) Color or Race Other [(specify)... Color or Race Usual Occupation Date of birth verified by: Birth Cert. Judicial Decree Usual Occupation 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? No M Yes 🗆 Other (Specify) Of Unsound Mind? No D Yes 🗌 2. Are you under guardianship as a person of unsound mind? 1. Are you now or have you been adjudged, diagnosed or considered as: Yes 🗌 Are you now or have you been within five (5) years an inmate of a county home for indigent persons? An Imbecile? Of Unsound Mind? If answer to 3 is "yes" has the cause of such condition been removed? 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? No D Yes 🗌 3. Are you afflicted with a transmissible disease? 6. Are you now under the influence of intoxicating liquor? Yes 🗌 Yes 🗌 7. Are you now under the influence of a narcotic drug? 4. Are you related to the groom closer than second cousin? No 🗆 8. Are you able to support a family? 5. Are you now under the influence of intoxicating liquor? Yes 🗆 Yes 🕒 No 🗆 9. Are you likely to so continue? Yes 🗆 No 🗌 Yes 🗀 6. Are you now under the influence of a narcotic drug? 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 Address Residence of father (if deceased so state). Birthplace of father (State or foreign country). 8. Full maiden name of mother ... No 🗆 (b) Are you supporting or contributing to their support? Yes 🗌 (c) Are you complying with any their support? Residence of mother (if deceased so state) court order or orders issued for No 🗆 Yes 🗌 Occupation of mother..... Residence of father (if deceased so state) Birthplace of mother (State or foreign country) .. Occupation of father. Character Sanitation. Race of father. I depose and state the information given State of Indiana, Birthplace of father (State or foreign country) HENDRICKS County of 12. Full maiden name of mother Eve Residence of mother (if deceased so state) Occupation of mother. Birthplace of mother (State or foreign country) I depose and state the information given in this application is true and correct. HENDRICKS 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 HENDRICKS state facts which render the consent of the other parent unne 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. Subscribed and sworn to before me this..... Clerk 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..... 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 flerk of the..... ..., 190. 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 12 th day of November sixty-five at Plainfield , County of Hendricks, one thousand nine hundred and, State of Indiana, Groom Vrayse Ellis of Hendricks County, State of Indiana and, Bride Famela & Blauchamp of Hendricks County, State of India were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of Nendricks Official Designation ...

Signed John Gambold, Jan Clerk

iches Circuit Court

APPLICATION FOR MARRIAGE LICENSE

FOR MARRIAGE LICENSE
HENDRICKS
County

Solven 28

MALE Medical Examination Report Dated 3	Date of Application
1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	FEMALE
Name of Physician Lego Perg M.D	Medical Examination Report Dated 2 November 1965
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes (F)	Name of Physician Lloyd Tarry M.D.
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False stattion 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 any false statement, representa-
Name First Middle	FEMALE APPLICANT
Date of Birth Month Day	Name First Middle Last
September 14 1930	Date of Birth Month Delores Merritt
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)
Residence Address Street of R. R. City County State	Residence Add be banon, Indiana
Previous Marital Status: Never Married Number of Previous Marital Status:	RI RY18 State
A serious marriages	Maiden Name if Different
Last Marriage Ended By: Death Divorce Annulment Divorce Annulment Divorce Annulment Divorce Di	Previous Marital Status: Never Married Marriage Number of Previous Marriages
Color or Race White Negro Other (specify)	Total Maria
Usual Occupation Order Clark - Va C	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) Drives Licen.	Usual Occupation
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No [D] Yes []	Date of birth verified by: Birth Cert. Judicial Decree
Of Unsound Mind? No W Yes	Jother (Specify) Drivas locense.
2. Are you mader 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 sylum or home for indigent persons? Yes Yes	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	An Imbecile?
4. Are you afflicted with a transmissible disease? No Yes	Of Unsound Mind?
6. Are you now under the influence of intoxicating liquor? No Yes	2. Are you under guardianship as a person of unsound mind? No Yes
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? 9. Are you likely to so continue? Yes No	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	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 Erell Laverne Merrit
Name Age Address	Residence of father (if deceased so state). Title bao.
Sunter Lynn 3 Long Bun Mo	Occupation of father Freight Hanly: Van Carp father white
Garnett Eugene 2	Birthplace of father (State or foreign country) Maddle Tap. Madde, In
	8. Full maiden name of mother Helen Louise Beleha
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order of orders is used for	Residence of mother (if deceased so state) 77 the boo ind
their support? No sorrort ordered by cares No P	Occupation of mother
11. Full name of father (if deceased so state).	- 1
Occupation of father Or Metel 2 truck Sto Piather Waite	Birthplace of mother (State of Toreign County)
Birthplace of father (State or foreign country Shelby ville In).	State of Indiana, HENDRICKS ss: I depose and state the information given in this application is true and correct.
Catherine MCNa val	County of
Residence of mother (if deceased so state New West Florida	Signed Alle Delbus Trans
Occupation of mother	New Address
Birthplace of mother (State or foreign country)	Subscribed and sworn to before mythy Ae day of A day of 19 65
State of Indiana,	HENDRICKS Circuit Court
County of HENDRICKS ss: in this application is true and correct.	
Signed But D. Out	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address SX 18 TTS 600, IN.	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	signs, state facts which render the consent of the other parent unnecessary
HENDRICKS Circuit Court	Significant control of the control o
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 ss:
	County of Father
State of Indiana, County of HENDRICKS	Signed CACLE A. 1
Signed Father	SignedMother
Signed	Subscribed and sworn to before me this
Subscribed and sworn to before me thisday of	John January V- Clerk
Clerk	Il and to the above named parties, the
COMPANY TO THE THE PART OF COU	RT. A marriage license having been refused to the above named parties, the court by written order issued
COMPLETE IF MARRIAGE LICENSE ISSUED D	RT. A marriage license having been refused to the and filed court by written order issued
TOTAL	CE AND WARRIAGE COUTE
RETURN OF MARKIAGE	SE AND MARRIAGE CERTIFICATE cense issued by the clerk of the defendance of the country of the c
Be It Remembered, there was need to the Hosens	ler 1960 authorizing the persitt
Be It Remembered, there was filed in my office a marriage lice of Indiana dated the day of the second of the secon	and Helan State
Be it further remembered, the following marriage certificate was filed in my	berohn certify that on the day of the day of
1 " " " (a solution to the bottom of the bo	nt Marketon T
one thousand nine hundred and suffy - free	at Basic County, State of Indiana, County, State of Indiana, County, State of Indiana,
one thousand nine hundred and suffy-fine Rouse State of Indiana, Groom Bill Sarhett Rouse and Pride to the Rouse Berritt of	County, State of Indiana, County, State of Indiana, County, State of Indiana, Therefore by the Clerk of the Circuit Court of Indiana,
and, Bride Welen Delares Dersitte of	r that purpose by the Clerk of the Circuit Court of
were by me united in marriage as authorized by a marriage accessed	n n m
Mare miles	Signed
Dated this aay of day of	Official Designation Dissister , 1965
The state of the s	15th day of Dovernhall Clerk
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Jandruka Circuit Court
and the decoration and the second	John de the the

hereby give my consent for Form Prescribed By Indiana State Board of Health under Authority Chap. 126, Ind. Acts 1905 Subscribed and sworn to before me this. MALE Medical Examin Name of Physici ALL QUESTIONS MUST Previous Marital Status: Never Married | Number of Previous Marriages White Negro Other (specify)...... Last Marriage Ended By: Previous Marital Status: Never Married Marriages Number of Previous Marriages Color or Race Last Marriage Ended By: Death | Divorce | Annulment | Usual Occupation Color or Race White Negro | Other | (specify)... Date of birth verified by Birth Cert. Judicial Deci Other (Specify) hicens 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? Other (Specify) Dyive 2. Are you under guardianship as a person of unsound mind? 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 home for indigent persons? An Imbecile? 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? Yes 🗌 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? / 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? No 🗆 5. Are you now under the influence of intoxicating liquor? Yes 🗆 Yes 10. Do you have minor children from one or more former marriages? Yes 🔽 No Yes (If yes, answer questions a, b, c) (a) List their full names, ages and addre Occupation of father French Hawly: Van Carp father white Garnett Eugene Birthplace of father (State or foreign country) ... (c) Are you complying with any court order of orders is used for their support?

(c) Are you complying with any court order of orders is used for their support?

(d) Yes No P Residence of mother (if deceased so state). 11. Full name of father George Gennett New Mexico Birthplace of mother (State or foreign country). Residence of father (if deceased sq Occupation of father Opr Metel & truck sto Piather white Birthplace of father (State or foreign country Shelby ville State of Indiana, HENDRICKS 12. Full maiden name of mother Cath aring Residence of mother (if deceased so state Key West, Flourda Race of mother white 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. Circuit Court HENDRICKS County of ... Bill D. Rouse CONSENT OF PARENTS, PARENT OR GUARDIAN Bx18 New Address..... We, the parents, of this applicant hereby give consent for this marriage. If only one parent day of Vaculty Subscribed and sworn to before me this signs, state facts which render the consent of the other parent unnecessary.... 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 County of ... State of Indiana, HENDRICKS County ofFather 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 Court by written order issued... ...authorizes and directs the issuance of a marriage license to the above named parties.County... RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE , 1965 authorizing the joining together as husband and wife and Helan Delores Mersitt of Indiana dated the..... Be it further remembered, the following marriage certificate was filed in my office, to-wit: at Brownshing, County of Hendricks 1, Clubrey Marris County, State of Sidesing one thousand nine hundred and sixty - Juse and, Bride Helen Delares Thersitte of Headrecks 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 Court of Stendarcks.

County. Signed Rew author Marrie 12 The day of November, 1965. Official Designation Minister Dated this ... 15th day of povember, 1965. Clerk Filed and recorded in accordance with the laws of the State of Indiana this Circuit Court

Form Prescribed By Indiana State Board of

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No. S23
File Spok 28
Date of Application

Health under Authority Chap. 126, Ind. Acts 1905 HENDRICKS County Date of Application FEMALE MALE Medical Examination Report Dated Medical Examination Report Dated. Name of Physician. homas 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 Middle Name Date of Birth 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 Divorce Annulment Last Marriage Ended By: Death | White Negro Other (specify)... White Negro Other (specify) Usual Occupation Color or Race ☐ Birth Cert. ☐ Judicial Decree Date of birth verified by 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 🗌 Other (Specify) Of Unsound Mind? 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 🗌 Of Unsound Mind? Yes 🗌 4. Are you afflicted with a transmissible disease? 2. Are you under guardianship as a person of unsound mind? Yes 🗌 5. Are you related to the bride closer than second cousin? 3. Are you afflicted with a transmissible disease? Yes 🗌 6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a narcotic drug? Yes 🗌 4. Are you related to the groom closer than second cousin? No 🗆 8. Are you able to support a family? 5. Are you now under the influence of intoxicating liquor? No 🗆 Yes P 9. Are you likely to so continue? Yes 🗌 6. Are you now under the influence of a narcotic drug? 10. Do you have minor children from one or more former marriages? No 🗆 (If yes, answer questions a, b, c) 7. Full name of father..... (a) List their full names, ages and addresses 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? No 🗆 (c) Are you complying with any court order or orders issued for their support? Residence of mother (if deceased so Yes 🗌 No 🗆 Occupation of mother Security 11. Full name of father. Legar Residence of father (if deceased so state). Birthplace of mother (State or foreign country) Occupation of father..... I depose and state the information given in this application is true and correct. Birthplace of father (State or foreign country Cotts ville. HENDRICKS 12. Full maiden name of mother .. Residence of mother (if deceased so state). Occupation of mother. Race 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 .Circuit Court County of ... CONSENT OF PARENTS, PARENT OR GUARDIAN orn to before me this We, the parents, of this applicant hereby give consent for this marriage. If only one parent 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 County of ... State of Indiana, HENDRICKS County of ... Mother Subscribed and sworn to before me thisday of..... ..Clerk 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 filed ...authorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE of Indiana dated the 10. The day of Naverbler , 1965, 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 12th day of November one thousand nine hundred and sifty-five at Brownsburg, County of Hendricks, James S. Frarr of Hendricks County, State of Indiana State of Indiana, Groom of Hendricks 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 Court of ... The advication day of Planember 19 6 5. Official Designation arangelist Church of Christ

Filed and recorded in accordance with the laws of the State of Indiana this day of Monember 1963.

Signed John Gambold Js Clerk
Thendricks Circuit Court

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

No. 326 HENDRICKS

MALE	County 2700 6, 1765
Medical Examination Report Dated 11-4-65	FEMALE Date of Application
Name of Physician Lloyd & Took	Medical Examination Report Dated 11-4-65-
1204	
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes up tion or pretense shall be fined in any sum not exceeding a diana Acts 1905 prescribes up to the pres	Thysician sloyd S. Terry, 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)". MALE APPLICANT	tement—Whoever procures the issuance of a license to marry by any false statement, represent
Name Fjrst Middle	
Kenneth Larry. Hea Nast. 1	Name First
Date of Birth Month Day Year	Date of Birth Month Ann Molle
Place of Birth (State or foreign country)	10 ac louis Day Year
Indianapolis Indiana	Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	Residence Addianapalia Sala
De Joseph Status News Married To	225 % 3/ State
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different School Gol Sudples Marion &
Last Marriage Ended By: Death Divorce Annulment	The second of the second second second second second second
White of No. 17 and 1	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 Student Pending 91 . 4	
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)
Other (Specify) Liver License	Usual Occupation PO. L. M.
1. Are you now or have you been adjudged, diagnosed or considered as:	Date of high mode 31 Tours
An Imbecile? Of Unsound Mind? No Yes No Yes Yes	Date of birth verified by: Birth Cert. Judical Decree
2. Are you under guardianship as a person of unsound mind?	Other (Specify) Sure Dicense
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? No. 75
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Heaving Minds
4. Are you afflicted with a transmissible disease?	The state of the s
5. Are you related to the bride closer than second cousin? No Yes 6. Are you now under the influence of intoxicating liquor?	2. Are you under guardianship as a person of unsound mind? No P Yes
7. Are you now under the influence of intoxicating liquor? No Yes 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? Yes No	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 PYes
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 parcotic drug?
(a) List their full names, ages and addresses	7. Full name of father Bobert Dale Hotels
Name Age Address	Residence of father (if deceased so state) 225 Jugh School Bol of plant
	Occupation of father allege Race of father white
	Birthplace of father (State or foreign country) alepandrian, Indiana
	7 . 10 ()
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother discalle Sustain Technick
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state) 225 High Sahad Rd Judges &
11. Full name of father Jesses Closence Headricks	Occupation of mother Abuse Race of mother While
Residence of father (if deceased so state) A # / Coalesville, Soci	Birthplace of mother (State or foreign country)
Occupation of father farmer Race of father white	
2 +	State of Indiana, HENDRICKS Second 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 HENDRICKS in this application is true and correct.
12. Full maiden name of mother Eva Evan Bates	1 am Mobile
Residence of mother (if deceased so state)	Signed
Occupation of mother Race of mother Whom I	New Address
Birthplace of mother (State or foreign country) In the angle of mother (State or foreign country)	Subscribed and sworn to before me this day of form feet, 1965.
State of Indiana, I depose and state the information given	John Hambold Ju Glerk Circuit Court
County of HENDRICKS ss: In this application is true and correct.	
Signed James A Summer Signed	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 methis day of Theen te, 1965.	signs, state facts which render the consent of the other parent unnecessary
John Hambold Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other
CONTRACT OF CHAPPING OF CHAPPING	
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	
signs, state facts which render the consent of the other parent distributions	
	State of Indiana, HENDRICKS ss:
	County of
State of Indiana,	SignedFather
County of HENDRICKS	Signed
Signed	
Signed	Subscribed and sworn to before me thisday of
1 05	CIETA
Subscribed and sworn to before me thisday of	
Clerk	having been refused to the above named parties, the
Clerk	RT. A marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	RT. A marriage license having been refused to the above named parties, the court by written order issued
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	RT. A marriage license having been refused to the above named parties, the court by written order issued
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUL	of a marriage license to the above named parties.
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY	of a marriage license to the above named parties.
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY	of a marriage license to the above named parties.
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY	of a marriage license to the above named parties.
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage lice of Indiana dated the day of day	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE The distribution of the clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage lice of Indiana dated the day of day of the following marriage certificate was filed in my Be it further contempored, the following marriage certificate was filed in my	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE The discussion of the clerk o
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage lice of Indiana dated the day of day of the following marriage certificate was filed in my Be it further nor howboard, the following marriage certificate was filed in my	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE The discussion of the clerk o
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage lice of Indiana dated the day of day of the following marriage certificate was filed in my Be it further nor howboard, the following marriage certificate was filed in my	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE The discussion of the clerk o
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage lice of Indiana dated the day of Headrick Be it further remembered, the following marriage certificate was filed in my 1, Mellians O Datus one thousand nine hundred and Septimates	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE The issued by the clerk of the forming together as husband and wife and folder office, to-wit: hereby certify that on the 20th day of Movember albert Javes Christian Church County of Marion Menders Christian County, State of Sudiana, of Menders Christian County, State of Sudiana,
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage lice of Indiana dated the day of Headrick Be it further remembered, the following marriage certificate was filed in my 1, Mellians O Datus one thousand nine hundred and Septimates	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE The issued by the clerk of the forming together as husband and wife and folder office, to-wit: hereby certify that on the 20th day of Movember albert Javes Christian Church County of Marion Menders Christian County, State of Sudiana, of Menders Christian County, State of Sudiana,
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage lice of Indiana dated the day of Headrick Be it further remembered, the following marriage certificate was filed in my 1, Mellians O Datus one thousand nine hundred and Septimates	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE The se issued by the clerk of the forming together as husband and wife and Such Charles day of Movemble office, to-wit: hereby certify that on the 20th day of Marion at Bentlevis Christian Church County of Marion of Mendrichs County, State of Indiana County, State of Indiana County, State of Indiana that purpose by the Clerk of the Circuit Court of Mendricks
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage lice of Indiana dated the day of Headrick Be it further remembered, the following marriage certificate was filed in my 1, Millians O Darris one thousand nine hundred and Sigly fine State of Indiana, Groom Henneth Harry Headrick and, Bride See One Parties were by me united in marriage as authorized by a marriage license issued for	SE AND MARRIAGE CERTIFICATE The discharge discussed by the clerk of the series and series of the se
Complete If Marriage License Issued by Order of County in authorizes and directs the issuance RETURN OF MARRIAGE LICENS Of Indiana dated the day of day o	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE The discussion of the series of th
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage lice of Indiana dated the day of day of the day of the following marriage certificate was filed in my 1, Millians O Dariss one thousand nine hundred and Sixty Headrick State of Indiana, Groom Bensielle Harry Headrick and, Bride day Order were by me united in marriage as authorized by a marriage license issued for County.	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE The issued by the clerk of the following together as husband and wife and following the joining together as husband and wife and following the joining together as husband and wife and following together
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage lice of Indiana dated the day of day of the day of the following marriage certificate was filed in my 1, Millians O Dariss one thousand nine hundred and Sixty Headrick State of Indiana, Groom Bensielle Harry Headrick and, Bride day Order were by me united in marriage as authorized by a marriage license issued for County.	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE The issued by the clerk of the following together as husband and wife and following the joining together as husband and wife and following the joining together as husband and wife and following together
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage lice of Indiana dated the day of day of the day of the following marriage certificate was filed in my 1, Millians O Dariss one thousand nine hundred and Sixty Headrick State of Indiana, Groom Bensielle Harry Headrick and, Bride day Order were by me united in marriage as authorized by a marriage license issued for County.	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE The issued by the clerk of the following together as husband and wife and following the joining together as husband and wife and following the joining together as husband and wife and following together
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage lice of Indiana dated the day of day of the day of the following marriage certificate was filed in my 1, Millians O Dariss one thousand nine hundred and Sixty Headrick State of Indiana, Groom Bensielle Harry Headrick and, Bride day Order were by me united in marriage as authorized by a marriage license issued for County.	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE The issued by the clerk of the following together as husband and wife and following the joining together as husband and wife and following the joining together as husband and wife and following together
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance RETURN OF MARRIAGE LICENS of Indiana dated the day of day o	of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE The discussion of the series of th

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No	227	
File	Book 28	
R	November 191	6

Chap. 126, Ind. Acts 1905 HENDRICKS County Date of Application		
	FEMALE COLORS	
MALE Medical Examination Report Dated	Medical Examination Report Dated	
Name of Physician Paul Stanley Lews M.D.	Name of Physician Paul Hanks heard MS.	
Charter 196 Indiana Acts 1905 prescribes "False stat	ement-Whoever procures the issuance of a license to marry by any false statement, representa-	
tion or pretense shall be fined in any sum not exceeding live hands	1 FEMALE APPLICANT	
Name First Middle Last	Name First Middle Last	
Harold R. Kennedy	Date of Birth Month Day Year	
April 15 1931	Place of Birth (State or foreign country)	
Place of Birth (State or foreign country) **Country State**	Residence Address Street or R. R. City County State	
Residence Address Street of R. R. City County State of R. R. N. City County State of R. R. City State of R. City State of R. R. City State of	Maiden Name if Different	
Previous Marital Status: Never Married Number of Previous Marriages	Norma Mary Vergas	
Last Marriage Ended By: Death Divorce Annulment Annulment	Previous Marital Status: Never Married Number of Previous Marriages	
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment Annulment	
Usual Occupation Drive: Grey how.	Color or Race White Negro Other (specify)	
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Cashier: hyndhurst Boul	
Other (Specify)	Date of birth verified by: Birth Cert. Judicial Decree	
An Imbecile? Of Unsound Mind?	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 a your or year.	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes □	
home for indigent persons? No Yes If answer to 3 is "yes" has the cause of such condition been removed? No Yes Yes	Of Unsound Mind?	
4. Are you afflicted with a transmissible disease?	2. Are you under guardianship as a person of unsound mind? No Z 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 No Yes No Yes	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? No Yes 6. Are you now under the influence of a narcotic drug? No Yes	
(If yes, answer questions a, b, c)	7. Full name of father Frank Vargas	
(a) List their full names, ages and addresses Name Age Address	Residence of father (if deceased so state)	
Kagnoto Lee 13 Walker St hos	Occupation of father Track A. Race of father Race of father	
Clorence Dale II	Birthplace of father (State or foreign country)	
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother	
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state)	
11. Full name of father warles Kay mann. Kennedy	Occupation of mother	
Occupation of father. The Manager Race of father. Canada Race of father.	Birthplace of mother (State or foreign country)	
Birthplace of father (State or foreign country) Scottsville, Ky	State of Indiana, HENDRICKS ss: I depose and state the information given in this application is true and correct.	
12. Full maiden name of mother Lucy Sheard Garman	County of Ashan M Carl	
Residence of mother (if deceased so state)	Signed Signed	
Occupation of mother Race of mother Race of mother	New Address	
Birthplace of mother (State or foreign country)	Subscriber and two n to before me this day of HENDRICKS	
County of HENDRICKS 88: in this application is true and correct.	Clerk Circuit Court	
Signed Harris A. S.	CONSENT OF PARENTS, PARENT OR GUARDIAN	
Subscribed and sworn to lefgre me the Al Children day of Nosan 1905	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	Assessment to the second of th	
signs, state facts which render the consent of the other parent unnecessary		
	State of Indiana,	
State of Indiana, HENDRICKS }88:	County of ss:	
county of	SignedFather	
Signed Father Signed Mother	Signed	
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 COUL	RT. A marriage license having been refused to the above named parties, the	
CountyC	ourt by written order issued	
in authorizes and directs the issuance		
Be It Remembered, there was filed in my office a marriage line	SE AND MARRIAGE CERTIFICATE Conse issued by the clerk of the Circuit Court	
of Indiana dated the day of day of	, 19 , authorizing the joining together as husband and wife	
Harold R. Kennedy	and Say	
I A D FIRPAUL.		
one thousand nine nundred and	. 401-	
State of Indiana, Groom	1 7/2 1. 1. 1. 1	
of	Mendricks County State of Selection	
County.	that purpose by the Clerk of the Circuit Court of Alacks	
Dated this 12 The day of Rosember , 196		
	Signed R. B. Leckard	
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation	
The State of Indiana this	Signed Johns Humbold Ja Clerk	
	Lenducks Circuit Court	

APPLICATION FOR MARRIAGE LICENSE

MALE	County 8 Jacomber 19h
Medical Examination Report Dated A Nacurat 19 6	FEMALE Date of Application
Name of Physician homes M. Walke MX	Medical Examination Report Dated An aguar 1965
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 of Physician Loven H Marty
MALE APPLICATION AND ACCES 1905 prescribes "False sta	tement—Whoever procures the issuance of a license to
Name O 1 First O Niddle	a mease to marry by any false statement, representa-
Date of Blight Month Day Hornbuck LT	Name First
December 15 1000	Date of Birth Ann Bare
Place of Birth (State or foreign country)	Place of Birth (tate on to leign country)
Residence Address Street or R. K. City County State	Residence Address Street or B. B.
Previous Marital Status: Never Married Number of Previous Marriages	State \ State
Last Marriage Ended By: Parth Cl. Di	Maiden Name if Different
	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 Salesman. Jeas.	Color or Bass
Date of birth verified by: Birth Cert. Judicial Decree	Name Negro Other (specify)
Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation Office works: Ind the Fracher
Of Unsound Mind?	Date of birth verified by: Birth Cert. Judicial Decree
2. Are you under guardianship as a person of unsound mind? No W Yes 3. Are you now or have you been within five (5) years an inmate of a second of the sec	Other (Specify)
If answer to 3 is "yes" has the cause of such conditions to Dec 63 No Yes	An Imbecile? 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 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 drug? No Yes	3. Are you related to the ground like a transmissible disease?
8. Are you able to support a family? 9. Are you likely to so continue? Yes W No	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 □
10. Do you have minor children from one or more former marriages? No Yes (If yes, answer questions a, b, e)	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 Sames Langy Baro Sr.
Name Age Address	Residence of father (if deceased so state)
	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 X a X expense Tymes
their support?	Residence of mother (st deceased so state)
11. Full name of father Shelly warlaw Hern backle Gr- Residence of father (If deceased sq state) Un Known	Occupation of mother
Occupation of father Tools Die wakk Race of father whate	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country)	State of Indiana, HENDRICKS ss: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Rosenny Julith Fallmer	County of the Co
Residence of mother (if deceased so state) A Brown by La)	Signed Marquel em Dark
Occupation of mother thanks Race of mother White	New Address.
Birthplace of mother (State or foreign country) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Subscribed and sworn to before me his day of HENDRICKS
State of Indiana, County of HENDRICKS I depose and state the information given in this application is true and correct.	Clerk Circuit Court
Signed Kelley Gardon & tentus 6471	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 115 On. Tenn, 17 2, Divi	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscried and oworn before monitor day of day of day of the day of	signs, state facts which render the consent of the other parent unnecessary
Clerk HENDRICKS Circuit Court	signs, state races
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 facts which render the consent of the other parties	
	State of Indiana. County of
State of Indiana,	Signed Father
County of HENDRICKS	Signed Mother
SignedMother	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to better the Clerk
Clerk	
COMPANY OF THE PROPERTY OF COUR	T. A marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF	ourt by written order issued
in the visce and directs the issuance of	I a marriage
THE REPORT OF LICENS	E AND MARKIAGE CENTRE
Be It Remembered, there was filed in my office marriage licen	se issued by the solution the joining together as husband and wife
of Indiana dated the	W and the
Be it further remembered, the following marriage certificate was filed in my of the stery B. General States and the stery B. G	fice, to-wit: 1414 day of Prosembles.
1. Les Ten B Mariob	hereby certify that on the County of Hendricks
granite the	at State of Indiana
1. Lester B. Gearick fire five one thousand nine hundred and Sifty five Harnbuckle State of Indiana, Groom Shelly Garland Harnbuckle and Bare of T	marion, County, State of Andrand,
one thousand nine hundred and Seffey Farmbuck less State of Indiana, Groom Shelley Stalland Harmbuck less and, Bride Margaret and Bare of were by me united in marriage as authorized by a marriage license issued for County.	that purpose by the continue
were by me united in marriage as authorized by a marriage	. 0
Date de la file de la Marientela de la file	Signed Uses Signed
this	Official Designation Minister , 1965.
at Indiana this	Signed John Danbold Ja Circuit Court
Filed and recorded in accordance with the laws of the State of Indiana this	Signed John Harnhold Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No. 329
File Book 28
9 November 1965

HENDRIG	Date of Application
MALE Medical Examination Report Dated 5 Jacamba 1965 Name of Physician NF. NS Grath MD.	FEMALE Medical Examination Report Dated 5 Acath 1965 Name of Physician F. MS Grath M.J.
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, representa-
Name First Middle Last	Name First Middle
Charles M ME Donald	Alice M. Wood
Date of Birth Par Year	Date of Birth Month Day Year
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)
Residence Address Street & R. R. City County State	Residence Address Street r R. R. City County State
2604 Lackburn Indianazoly Mr Ind.	3128 Clove Drive Indianasales Le
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 Service Rep. : Koya Typewite	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation (lo. K - t - al : 508
Other (Specify)	Date of birth verified by: Birth Cert. Judicial Decree
An Imbecile? Of Unsound Mind? No Yes No Yes	F 01 - (0 - 10)
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 sylum 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? No Ves
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 Very No I	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 ☐ (If yes, answer questions a, b, c)	6. Are you now under the influence of a narcotic drug?
(a) List their full names, ages and addresses	7. Full name of father Acton Lorrane Wee
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Electrician All Stace 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 Elste Mane Ranton
(c) Are you complying with any court order or orders issued for	Residence of mother (if deceased so state) 100 100 100 100 100 100 100 100 100 10
11. Full name of father Sedney Charles Mc Donald	
Residence of father (if deceased so state)	Occupation of mother
Occupation of fathe Salesman Wind Library Race of father while	Birthplace of mother (State or foreign country) New Albany in
Birthplace of father (State or foreign country) Louis Wile. 1.0.	State of Indiana,
12. Full maiden name of mother Marian Mae Schwonce	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). A. w. Tamada lab.	allie m. Shard
Occupation of mother	Signed
Birthplace of mother (State or foreign country)	New Address
State of Indiana	Subscribed and sworn to before me disquared and of day of 19.65
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	HENDRICKS Clerk Circuit Court
Signed Charles Manager 1903 13	A TOTAL THE AND A STREET AND A STREET AS A
New Address 9526 Harmon Dr. 77 + 24.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn before me the day of day of 1905	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 has been been been been been been been bee	
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 state of the principle of the principle of the state of the st
State of Indiana,	State of Indiana, County of HENDRICKS }ss:
County of HENDRICKS	County of
Signed Father	Signed Father
Signed Mother	Signed
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of
Clerk	19
COMPLETE IF MARRIAGE LICENSE ISSUED DE	Clerk
County County	A marriage license having been refused to the above named parties, the
County	t by written order issued
authorizes and directs the issuance of	a marriage license to the above named parties.
RETURN OF MADDIAGE ANGENES	
of Indiana dated the	issued by the clerk of the Cincuit Count
of Indiana dated the day of Morente of Marchana dated the Marchana day of Morente of Marchana day of Morente of Marchana day o	19.65, authorizing the joining together as husband and wife
, I / Dances)	ce, to-wrt:
me thousand nine hundred and sifty-five at State of Indiana, Groom Charles Mr. Mc Donald of Mr. Bride Alice M. Wood of M.	day of Movember,
State of Indiana Groom (hose)	Country of They
nd, Bride alice M. Wood	County, State of Indiang
and, Bride Alice M. Wood of Sounts. of were by me united in marriage as authorized by a marriage license issued for the	County, State of Indiana,
Dated this 13th day of November, 1965	
	Signed J. P. Daniel
filed and recorded in accordance with the laws of the St.	icial Designation Minister
	any of covernier 10 65
S	aned Way of

...Circuit Court

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

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRI	CKS File Dook 28
MALE Medical Examination Report Dated 5	County 10 Varenty 196
28 1462	FEMALE Date of Application
Name of Physician E.L. Koda MD	Medical Examination Report Dated 5 Voremby 1965
ALL QUESTIONS MUST BE ANSWERED. Chapter 198 1-11	Name of Physician 5/
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)"	atement—Whoever procures the
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False strain or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name	license to marry by any false statement, representa-
Stephen Sen 11 was	Name FEMALE APPLICANT
Date of Birth Month Day Year	Rest Middle
Place of Birth (State) r foreign country)	Date of Birth Month Day
Residence Address Street or R. R. City	Place of Birth State or foreign country) 25 1948
13 3x 346 Danville Herbert	Residence Address
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different PlayTa, Harrick In 2
Last Marriage Ended By: Death Divorce Annulment	Time it Different J. S. Howards INO
	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended By:
Usual Occupation Student: Purdu	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 Student: History
An Imbecile? Of Unsound Mind? Now Yes	Date of birth verified by: Birth Cert. Judicial Decree
2. Are you under guardianship as a person of unsound mind?	Tother (Specify) Drives License.
home for indigent persons?	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 No Ye	Of Unsound Mind?
6. Are you now under the influence of intoxicating liquor?	Are you under guardianship as a person of unsound mind? No Yes 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?	4. Are you related to the groom store the
9. Are you likely to so continue?	5. Are you now under the influence of interest to
10. Do you have minor children from one or more former marriages? No Yes	6. Are you now under the influence of a negrotic drug?
(a) List their full names, ages and addresses	7. Full name of father. Ex Darrell Meier
Name Age Address	Residence of father (if deceased so state) 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	Occupation of father Carpantes
	Birthplace of father (State or foreign country). Magnes town, 100.
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Loretta Nancy Euch.
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so stars) Clay ta- und.
11. Full name of father	Occupation of mother. Race of mother white
Residence of father (if deceased so state) Damile Ind.	Birthplace of mother (State or foreign country)
Occupation of father Factory works, Alliace of father whete	ATTMATERIAL CONTRACTOR OF THE PROPERTY OF THE PARTY OF TH
Birthplace of father (State or foreign country) Hedley, Hello, In	State of Indiana, HENDRICKS Ss: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Marie Agnes Squar	County of the and correct.
Residence of mother (if deceased so state)	Signed Beautice May Much
Occupation of mother Race of mother Race of mother	New Address.
Birthplace of mother (State or foreign country)	Subscribed and Morn to before me ping with day of November 19.00
State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Clerk HENDRICKS Circuit Court
14 (0 H.10.	
Signed August Jan Hadel W. hat	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and swern to before me this 1900 day of Occur 1900	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 par at unnecessary
	Paents diraced: Mother
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	has custody.
signs, state facts which render the consent of the other parent unnecessary	
	State of Indiana, HENDRICKS 88:
State of Indiana,	County of Father
County of HENDRICKS	Signed P T No P T
Signed G Hadly Father	Signed. Mather
Subscribed on 19	Subscribed and sworn to before me this
Subscribed and sworn to before mythis	John Hamba & Clerk
	begins been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
Col	art by written order issued
inauthorizes and directs the issuance of	
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE New Mendage Rd Circuit Court
The Manual there are fled in my office a marriage licens	se issued by the service and wife
of Indiana dated the 197h day of Rosember	D. Thise Kay Meier
of Indiana dated the 1974 day of Newscarley Be it further remembered, the following marriage certificate was filed in my of	fice, to-wit:
Be it further remembered, the following my riage certificate was filed in my of 1, Rew Maurice C. Mright	ereby certify that on the 202h day of Itourning,
1. Rew Maurice C. Mright have one thousand nine hundred and sixty five of	it Indianapoles , County of Illaces ,
State of Indiana, Groom Stephen Just Hadley of and, Bride Beatuice Kay Meier bicense issued for t	hat purpose by the Clerk of the Circuit Court of
County County	n - n Shi At
Dated this 2016 day of Rovember, 1965	Signed Rew Mauret & Bastist Church
	Official Designation In Jax Synhurst Poplist Church
Filed and recorded in accordance with the laws of the State of Indiana this	23 rd day of Morember , Clerk Signed John Sambold, Ju Circuit Court
Filed and recorded in accordance with the laws of the State of Indiana of the	Signed John Manuel 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 Date of Application FEMALE Medical Examination Report Rated 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)". FEMALE APPLICANT MALE APPLICANT Name Name 2/1 Kenn Date of Birth Previous Marital Status: Never Married & Number of Previous Marriages Previous Marital Status: Never Married

Number of Previous Marriages. Death Divorce Annulment Last Marriage Ended By: Death | Annulment [Last Marriage Ended By: Color or Race White Negro Other (specify). Negro (specify) Usual Occupation Mea Color or Race Date of birth verified by: Birth Cert. Judicial Decree Usual Occupation Other (Specify) .. ☐ Judicial Decr Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? /Yes 🗆 Of Unsound Mind? Yes 🗌 Yes 🗌 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 home for indigent persons? An Imbecile? Yes 🗌 If answer to 3 is "yes" has the cause of such condition been removed? 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? 5. Are you related to the bride closer than second cousin? No D Yes 🗆 3. Are you afflicted with a transmissible disease? 6. Are you now under the influence of intoxicating liquor? Yes 🗌 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 🗌 5. Are you now under the influence of intoxicating liquor? 9. Are you likely to so continue? 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 ... Indianapola Address Age Residence of father (if deceased so state) Occupation of father Machine Birthplace of father (State or foreign country). 8. Full maiden name of mother. (b) Are you supporting or contributing to their support? No 🗆 Yes 🗌 (c) Are you complying with any court order or orders issu their support? Residence of mother (if deceased so state). No 🗆 Occupation of mother. They be with. Residence of father (if deceased so sta Birthplace of mother (State or foreign country) 190 analow Occupation of father..... State of Indiana, I depose and state the information given in this application is true and correct. country) HENDRICKS County of ... 12. Full maiden name of mother Residence of mother (if Occupation of mother In Jamazolis Inc Birthplace of mother (State or foreign country) I depose and state the information given in this application is true and correct. HENDRICKS 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. 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 SS: State of Indiana, County of .. HENDRICKS County of..... SignedFather Signed. Signed Mother Subscribed and sworn to before me this. 19...day of..... 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 Lendricks Circuit Court day of Neverther , 19 65, authorizing the joining together as husband and wife of Indiana dated the Be it further remembered, the following marriage certificate was filed in my office, b-wit Juliane L. Waggener 1. A C Burnett hereby gertify that on the 20 Th day of Rossember, one thousand nine hundred and, Sutty - five at Carmel , County of Hamilton), State of Indiana, Groom Harry M The Kenna of Marion County, State of Indiana and, Bride Jacqueline & Wagganer of Hendricks County, State of Indiana Dated this 20 Ih day of Rovember, 1965. Signed H C Burnett, Justice of the Peace

Official Designation.....

Signed John Hambold, Jr Clerk
Mendricks Circuit Court

Filed and recorded in accordance with the laws of the State of Indiana this 22nd day of Powershew, 19.65.

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County	
MALE Medical Examination Report Dated	FEMALE Date of Application
Name of Physician Elmar L. Kash	Medical Examination Report Dated 9 ovember 1965
iech M.D	N
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False stattion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	ement—Whoever procures the issues as a little of the instance
MALE APPLICANT	
Name Robert Middle Stast	Name Fest Mildle Mart
Date of Birth Day Fear 30	Date of Birth A Novil
Place of Birth (State or foreign country)	Place of Birth (Statt or foreign country)
Residence Address Street or R. R. City County State	Residence Address Street P. P. D.
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Street of R. R. Maiden Name if Different Indian Name if Different India
	Mandell Mallerent
Last Marriage Ended By: Death Divorce Annulment Co	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 White Negro Other (specify)
Date of wirth verified by: Birth Cert. Judicial Decree	Usual Occupation Clark. Allen Dr. GALC
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) Drives Licens.
3. Are you now or have you been within five (5) years an inmate of a county a ylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? 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?
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? Yes No	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? No Yes	5. Are you now under the influence of intoxicating liquor? 6. Are you now under the influence of a narcotic drug? No Yes Yes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father Thomas Walter Marshall
Name Age Address	Residence of father (if deceased so state)
David Michael 20 USAF. Aukawas	Occupation of father
Dennis Allen 13 KI H. KWILLE	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	o. Tun maiden mane of memory and
(c) Are you complying with any court order or orders issued for Yes No No	Residence of mother (if deceased so seate)
11. Full name of father Soseph Arthur Strenden	Occupation of mother
Residence of father (if deceased so state)	The Property of the Party of th
Birthplace of father (State or forgen country) Coursell Co. 120-	State of Indiana, HENDRICKS Sa: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Mary Josephine Miller	County of Marchael Marchael
Residence of mother (if deceased so sate) O Stiles ville, Ind.	Signed William Signed
Occupation of mother Retrieve Race of mother What	New Address.
Birthplace of mother (State or foreign country)	Subscribed and sweam to before me this day of HENDRICKS Clerk Circuit Court
State of Indiana, County of HENDRICKS See I depose and state the information given in this application is true and correct.	The state of the s
Signed Roll J. Slevenson.	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address Alile Suite 140.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed a so sworn to before me that the day of HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
Charles Alexander	
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 ss:
	County of Father
State of Indiana, County of HENDRICKS	Signed
Father	Signed
Signed Mother Signed day of , 19	Subscribed and sworn to before me this
Subscribed and sworn to before me time	have named parties, the
DV OPDER OF COU	JRT. A marriage license having been refused to the above named parties, the Court by written order issued
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF	JRT. A marriage license having been refused to the above mand filed Court by written order issued
County	e of a marriage license to the above named parties.
	TOP AND WARRENCE OF THE COMMENT OF T
Be At Bemembered, there was filed in my office a marriage li	cense issued by the forming together as husband and wife
of Indiana dated the 17th day of November	cense issued by the clerk of the stendard regether as husband and wife 19.65, authorizing the joining together as husband and wife and Audrey Marshall y office, to-wit:
the state of the s	the antifact that on the
Be it further remembered, the following marriage	neredy cruis anapolas County of Marion
sitter-furl	Hendricks County, State of Indiana).
State of Indiana Groom Policet & Stevenson	at Indianapoles County of Indiana, at Indianapoles County, State of Indiana, of County, State of Indiana, or that purpose by the Clerk of the Circuit Court of Nenducks (65. Signed P. W. Marres
and, Bride Quedrey In Marshall Bone issued f	
were by me united in marriage as authorized by a marriage ucense issued,	65. Signed P. W. Marris ministers
County. Dated this 24Th day of Rosenberg, 19.	Official Designation Methodist Ministers Official Designation Methodist Ministers 19.65
	Official Designation , 19.6.2
Dated this	Official Designation
Filed and recorded in accordance with the laws of	Signed John Clarateld, A Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS ___County

No	\leq	3	3	Marie Control	
File_	B	ook	28	and the	
	13	n	oren	be	1965
	Date of	f Appli	cation		

MALE LA DA COLLEGE 1965	FEMALE Medical Examination Report Dated 6 Voremby 1965
Medical Examination Report Dated	Name of Physician Sohn Ellett &r. M.D.
Name of Physician ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state of the chapter 126, Indiana Acts 1905 prescribes of the chapter 126, Indiana Acts 1905 prescribes of the chapter 126, Indiana Acts 1905 prescr	ement—Whoever procures the issuance of a license to marry by any false statement, representa-
tion or pretense snail be filled in any said has constant	FEMALE APPLICANT
Name First Middle Last	Name First Middle Last
Daniel Austin Loury	Date of Birth Month Day Year
Date of Birth December 10 1946	Place of Birth State or foreign country
Place of Birth (State or foreign country) Street or R C City County State	Residence Address Street or R. R. City County State
Residence Address Street or R. R. City County State	Maiden Name if Different
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
Usual Occupation Printer: Link Belt	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Accountant: Anchor Serum G.
Other (Specify)	Date of birth verified by: Birth Cert. Judicial Decree
An Imbecile? Of Unsound Mind? Yes	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county sylum or	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 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 4. Are you related to the groom closer than second cousin? No Yes
8. Are you able to support a family?	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	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. Tubert Slainfield Tub.
Name Age Address	Occupation of father (if deceased so state)
	Birthplace of father (State or foreign country) Coatesville, Jud.
V- D No D	8. Full maiden name of mother. Burbara Dean, Brown
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for Yes No	Residence of mother (if deceased so state)
11. Full name of father Emsley Willy Layry	Occupation of mother
Residence of father (if deceased so spate) Residence of father (if deceased so spate)	Birthplace of mother (State or foreign country)
Occupation of father Millur, Att. Link Brace of father White	State of Indiana,
Birthplace of father (State or foreign country) 1.30 7 18 13 12. Full maiden name of mother Elma lou Godderd.	County of
Residence of mother (if deceased so state) A Plain Cicle 1 and.	Signed Linda Kelly
Occupation of mother Langen Race of mother White	New Address
Birthplace of mother (State or foreign country)	Subscribed and sworn to befor mediaday of MENDRICKS
State of Indiana, County of HENDRICKS State of Indiana, I depose and state the information given in this application is true, and correct.	Clerk Circuit Court
Signed Hamil Gualan Grund	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed on sword to before my dis 13th day of 1965	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	
signs, state facts which render the consent of the other parent unnecessary	
	State of Indiana, HENDRICKS ss:
State of Indiana,	County of
Signe Signe Father	Signed Father Signed Mother
Signed Clandle Lawy Mother	Signed
Subscribed and sworn to before me the	Subscribed and sworn to before me this
	RT. A marriage license having been refused to the above named parties, the
in authorizes and directs the issuance	Court by written order issued and filed of a marriage license to the above named parties.
	SE AND MARRIAGE CERTIFICATE
Be It Remembered, there was filed in my office a marriage lic	L1. 1. 100
of Indiana dated the day of Novembe	, 1965, authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my	and Jinda Dean Kelly office, to-wit:
	hereby certify that on the 20th day of Rovershex
	at Indianapolis , County of Maxion,
	Hendricks County, State of Indiana,
	or that purpose by the Clerk of the Circuit Court of Hendrichs
County. Dated this 20 th day of November , 19 6	
Dated this and the many of the transfer of 19 C	Signed I sheelds White
The second state of the second	Official Designation Ministers - Tope Tho dist Church
Filed and recorded in accordance with the laws of the State of Indiana this.	Signed John Hambold, It Clerk
	Clerk

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 LE. Foltz Medical Examination Report Dated. W 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 NUM Previous Marital Status: Never Married Number of Previous Marriage Last Marriage Ended By: Death | Divorce | Annulment | Previous Marital Status: Never Married Number of Previous Marriages White Negro Other (specify). Color or Race Last Marriage Ended By: Death | Divorce | Annulment | Oralisman. Usual Occupation Date of birth verified by: Birth Cert. | Judicial Decree Other (Specify)... 1. Are you now or have you been adjudged, diagnosed or considered as: Of Unsound Mind? 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 a flum or home for indigent persons?

No E 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 Yes Yes 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? /Yes 🗆 3. Are you afflicted with a transmissible disease? 7. Are you now under the influence of a narcotic drug? Yes 🗆 8. Are you able to support a family? 4. Are you related to the groom closer than second cousin? No 🗆 9. Are you likely to so continue? 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 ... Ous Tim Residence of father (if deceased so state)..... Birthplace of father (State or foreign country) Kosciusko, 6. (b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued to their support? 11. Full name of father Residence of father (if deceased so state) Occupation of father Jobbs . This Isps w hite Birthplace of father (State or foreign country)..... Residence of mother (if deceased so state Occupation of mother. Birthplace of mother (State or foreign country) State of Indiana, Circuit Court HENDRICKS County of ... Grafton Chagu CONSENT OF PARENTS, PARENT OR GUARDIAN and sworn to before me this day of Accused 1965 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 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 Subscribed and sworn to before n 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 Sendular Circuit Court day of november Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the 2014 day of Rovember one thousand nine hundred and Siply-fire at Indianapolis, County of Marion State of Indiana, Groom Willis Brafton Heager of Hendricks County, State of Indiana, and, Bride Bettle Jean Brown of Hendricks County, State of Indiana, were by were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of Mendrich Signed Exnest E. Thompson County. Dated this 20 th day of November, 1965. Official Designation Minister Filed and recorded in accordance with the laws of the State of Indiana this 231d day of Povember 1965.

Signed Selan Barnhold for Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No. 335	
File Book 28	
13 Vacual 1965	

	FEMALE Medical Examination Report Dated 290 ctober 1965
MALE Medical Examination Report Dated	Medical Examination Report Dates
Robot P. Scott M.D.	Name of Physician W. + . Kamago, 101, P.
False state	ement—Whoever procures the issuance of a license to marry by any false statement, representa-
tion or pretense shall be lined in any	FEMALE APPLICANT
MALE APPLICANT	Name First Middle Lat
Name Charles Bi hohman	Date of Birth Month Day Year
Date of Birth Month Day Year	APr:1 22 1 1913
Place of Birth (State or foreign country)	Indianapoles, Ind.
Residence Address Street of R. R. City County State	Residence Address Street dr R.R. City County State
296 N. Mill, Apt II, Plaitield, Hew. Inc.	Maiden Name if Different
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	Previous Marital Status, 1997
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annument
2 L Cari Dlandin Sq.	Color or Race White Negro Other (specify)
Usual Occupation Date of birth verified by: Birth Cert. D Judicial Decree	Usual Occupation Clark: RCA.
Other (Specify) Drivad licens	Date of birth verified by: Birth Cert. Judicial Decree
1. Are you now or have you been adjudged, diagnosed or considered as: No Yes	Other (Specify)
Of Unsound Mind? Are you under quardianship 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 county sylum or home for indigent persons?	An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed?	Of Unsound Mind?
4. Are you afflicted with a transmissible disease? No Yes No Ye	2. Are you under guardianship as a person of disound inner
6. Are you now under the influence of intoxicating liquor?	3. Are you afflicted with a transmissible disease? No Yes 4. Are you related to the groom closer than second cousin? No Yes Yes
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	4. Are you related to the groun closer than second strength of the groun ow under the influence of intoxicating liquor?
9. Are you likely to so continue?	6. Are you now under the influence of a narcotic drug? No Yes
10. Do you have minor children from one or more former marriages. (If yes, answer questions a, b, c)	7. Full name of father. Peter John Esther
(a) List their full names, ages and addresses	Residence of father (if deceased so state)
Name Age Address	Occupation of father
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother Mildred Lee Mets 3
(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)
their support?	Occupation of mother. Race of mother
11. Full name of father	Birthplace of mother (State or foreign country)
Residence of father (if deceased so state)	
Birthplace of father (State or foreign country) Saw A was ta, lago-	State of Indiana, HENDRICKS I depose and state the information given in this application is true and correct.
12. Full maiden name of mother May Elzabeth Trader	County of
Residence of mother (if deceased so state)	Signe
Occupation of mother	New Address
Birthplace of mother (State or foreign country)	Subscribed and sword to before me that day of day o
State of Indiana, I depose and state the information given in this application is true and correct.	Clerk Circuit Court
County of Signed Charles B. Lohn	
New Address 296 N. Mill Det 11 Pilld.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn tobefore me this A Thomas of Joen 196	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	
signs, state facts which render the consent of the other parent unnecessary	
	State of Indiana,
Control Contro	County of
State of Indiana, County of HENDRICKS	SignedFather
SignedFather	Signed Mother
Signed	Subscribed and sworn to before me this
Subscribed and sworn to before me this	Clerk
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	JRT. A marriage license having been refused to the above named parties, the
County	Court by written order issuedand filed
inauthorizes and directs the issuance	e of a marriage license to the above named parties.
	ISE AND MARRIAGE CERTIFICATE
	cense issued by the clerk of the Rendricks Circuit Court
	, 196.5., authorizing the joining together as husband and wife
Re it further remembered the following marriage certificate was filed in m	and Frances & Reidy
	hereby certify that on the 20th day of Poulsably,
	at Plainfield, County of Hendricks,
	of Hendricks County, State of Indiana
	Nendricks County, State of Indiana,
were by me united in marriage as authorized by marriage license issued f	or that purpose by the Clerk of the Circuit Court of Alendricks
Dated this 20 Th day of Rosember 196	
Daved 1118, 19.6	Signed Warren a Robbins
	Official Designation Christian Minister
Filed and recorded in accordance with the laws of the State of Indiana this	23rd day of Davember , 19 65.
	Signed John Stanbold . Clerk

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

390K 28

HENDRIC	Ks File Book 28
MALE	County
Medical Examination Report Dated 27th October 101	FEMALE Date of Application
Name of Physician Albert M	Medical Examination Report Dated 27 October 1965
Donato MD	
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state of the control of the co	tomat un
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	whoever procures the issuance of a license to marry by any false statement, representa-
Name First Middle	Name FEMALE APPLICANT
Date of Birth Month Day	First Middle
CABI BI BURG	Date of Birth Month Trances Harais
Place of Birth (State of foreign country)	Place of Birth (Single or foreign country)
Residence Address Street r R. R. City Gounty State	14 1 2 2
KKI, Bx76 Clayta, Hand, Ind.	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Name if Different Ind.
Last Marriage Ended By: Death Divorce Annulment	The state of the s
White D N = 5 at 5	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: Allisan Dr. GMC	Color or Race White D Negre C Other C
Date of birth verified by: Birth Cert. Judicial Decree	specify)
Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation Florist: Victor Floris
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?	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county sylum 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? No 7 Yes	An Imbecile?
4. Are you afflicted with a transmissible disease?	Of Unsound Mind?
5. Are you related to the bride closer than second cousin? No Yes 6. Are you now under the influence of intoxicating liquor?	2. Are you under guardianship as a person of unsound mind? No Yes
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?
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? No Ves	5. Are you now under the influence of intoxicating liquor?
(If yes, answer questions a, b, c)	6. Are you now under the influence of a nargotic drug?
(a) List their full names, ages and addresses Name Age Address	7. Full name of father Harais
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 Ellen Louise (5.5581)
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state). Indianapoles, Ind.
11. Full name of father Aden Dale Staley	Occupation of mother Sery Agres
Residence of father (if deceased so state) / arting wille, Thu.	Birthplace of mother (State or foreign country) Sohnson 6. 110.
Occupation of father line Study : All day Race of father White	A particular control of the control
Birthplace of father (State or foreign country) \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	State of Indiana, HENDRICKS as: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother. Leona Yene Kays	County of
	Signed Sarah Frances Harges
Residence of mother (if deceased so state)	New Address.
occupation of mother management and of mother	Cal represent that the
Birthplace of mother (State or foreign country)	Subscribel and sworn to before HENDRICKS
State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Clerk Circuit Court
Signed Brald Brus Stoley	DARRAGE OF CHARMAN
New Address.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and swern to brore me Piso 18 th day of The Ly 19 65	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Clork 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	
and the state which related the constitution of the state	A STATE OF THE PARTY OF THE PAR
	State of Indiana, HENDRICKS
State of Indiana.	County ofFather
County of HENDRICKS	Signed
Signed Father	SignedMother
Signed Mother	Subscribed and sworn to before me thisday of19
Subscribed and sworn to before me thisday of	Clerk
Clerk	d parties the
DY OPDER OF COUR	T. A marriage license having been refused to the above named parties, the court by written order issued
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF	ourt by written order issued
County	of a marriage license to the above named parties.
WARRIAGE LICENS.	1 11 - Id make Roman Colombia
Be It Remembered, there was filed in my office a marriage licer of Indiana dated the day of Descention	, 19.4a.5., authorizing the joining together as husband and wife
of Indiana dated the 20 th day of	1 - trancles Attagas
of Indiana dated the 20 th day of Personher Persold Bresse Stales certificate was filed in my of the state o	office, to-wit:
be u further remembered, the following marriage certificate	hereby certify that on the County of Mendricks
i, Mustan	at Clayon Inlana
Be it further remembered, the following marriage certificate was filed in my of the state of Indiana, Groom Ronald Bruce Staley and Bruce Staley	of Hendricks County State of Indiana,
State of Indiana, Groom. Sonald Michael	Hendricks Court of Hendricks
one thousand nine hundred and Sifty Fine Staley. State of Indiana, Groom Ronald Bruce Staley and, Bride Sarah Thances Haugis 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
og me united in marriage as authorise	0 0
Data I il	Signed Signed State of Church
day ofday	
The same of the sa	14 th day of Becamble O
Filed and recorded in accordance with the laws of the State of Indiana this	14th day of Becernal Clerk Signed John Gambald, Ja Circuit Court
and the accordance with the second se	John II II II I I I I I I I I I I I I I I

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No. 337
File Book 28

HENDRICKS County Date of Application FEMALE Medical Examination Report Dated Medical Examination Report Date 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)". FEMALE APPLICANT MALE APPLICANT Last Last 20 Date of Birth Number of Previous Marriages. Previous Marital Status: Never Married Previous Marital Status: Never Married Number of Previous Marriages. Death Divorce Annulment Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: Color or Race White Negro Other (specify). Negro [ecify) Other | Usual Occupation Birth Cert. | Judicial Decree Date of birth verified by: Usual Occupation O 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 🗆 Yes 🗀 Other (Specify). Of Unsound Mind? No 🗷 No Z Yes 🗌 1. Are you now or have you been adjudged, diagnosed or considered as: 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; 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? Yes 🗌 4. Are you afflicted with a transmissible disease? No I 2. Are you under guardianship as a person of unsound mind? Yes 🗌 5. Are you related to the bride closer than second cousin? 3. Are you afflicted with a transmissible disease? Yes 🗌 6. Are you now under the influence of intoxicating liquor? Yes 🗌 7. Are you now under the influence of a narcotic drug? 4. Are you related to the groom closer than second cousin? No 🗆 8. Are you able to support a family? 5. Are you now under the influence of intoxicating liquor? 9. Are you likely to so continue? No 🗆 Yes 🗌 No 🗆 6. Are you now under the influence of a narcotic drug 10. Do you have minor children from one or more former marriages? (If yes, answer questions a, b, c) 7. Full name of father. (a) List their full names, ages and addresses Address Name Age 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? No 🗆 Yes 🗌 (c) Are you complying their support? with any court order or orders issued for 1:2011 Occupation of mother Of Toe WK& Residence of father (if deceased so Birthplace of mother (State or foreign country). Occupation of father to Mer State of Indiana, depose and state the information given Birthplace of father (State or foreign country)... Daws. HENDRICKS County of. Occupation of mother..... Race of mother. oursuille Ind Birthplace of mother (State or foreign country) ... State of Indiana, HENDRICKS depose and state the information given n this application is true and correct. HENDRICKS County of .. CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent HENDRICKS 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. HENDRICKS County of Signed.... Signed Mother Signed... .. Mother Subscribed and sworn to before me this......day of...... 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 New Venducks Circuit Court of Indiana dated the 20 th day of Movember , 1965, authorizing the joining together as husband and wife Be it further remembered, the following marriago certificate was filed in my office, to-wit: 1, Denver J. Riemer one thousand nine hundred and sifty five at Jamestonia , County of Boone , State of Indiana, Groom Robert Hugher Migell of Montgomery County, State of Indiana hereby certify that on the 27th day of Rosember, and, Bride Denver Sue niemer of Hendricks County, State of Indiana, Dated this 27th day of November , 1965. Signed Densier & Milmers) Official Designation Ministers Church of Christ

Filed and recorded in accordance with the laws of the State of Indiana this 30 th day of Rosember , 19 45

Signed John Gambold, Jr Clerk
Kendricks Circuit Court

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

County Date of Application FEMALE Medical Examination Report Dated. FEMALE APPLICANT

HENDRICKS MALE Medical Examination Report Dated_ Name of Physician D.D Cheesman 15H. Bell: Mb 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-Date of Birth Previous Marital Status: Never Married Number of Previous Marriag Maiden Name if Different 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 ☐ Fireman Ago Date of birth verified by: Birth Cert. J. Color or Race White Negro | Other | (specify). Other (Specify)... Usual Occupation Are you now or have you been adjudged, de. An Imbecile? sed 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? Other (Specify) ... 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: unty a ylum or No Yes An Imbecile? If answer to 3 is "yes" has the cause of such condition been rem No X Yes No - Yes Of Unsound Mind? 4. Are you afflicted with a transmissible disease? No Yes Yes 🗆 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? No W Yes No Yes 6. Are you now under the influence of intoxicating liquor? No IV 3. Are you afflicted with a transmissible disease? Yes 🗌 7. Are you now under the influence of a narcotic drug? Nov Yes Yes 🗌 4. Are you related to the groom closer than second cousin? 8. Are you able to support a family? No Yes No 🗆 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) (a) List their full names, ages and addresses Residence of father (Meceased so state) Birthplace of father (State or foreign country) 8. Full maiden name of mother. Qavina (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? Occupation of mother Walker Birthplace of mother (State or foreign country) Occupation of father Tuck Ori State of Indiana, Birthplace of father (State or foreign country) ... HENDRICKS 12. Full maiden name of mother. Kosa Residence of mother (if deceased so state Birthplace of mother (State or foreign country) (0., 1965 HENDRICKS .. Circuit Court HENDRICKS Signed Dould CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this mary re. If only one parent signs, state facts which render the consent of the other parent unnecessary...... 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 State of Indiana, HENDRICKS State of Indiana, HENDRICKS County of Signed. 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. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Be It Remembered, there was filed in my office a marriage license issued by the derk of the...... day of _______, 19 63 authorizing the joining together as hasband and wife Rita Rene Johnson of Indiana dated the 20+ wing marriage certificate was filed in my office, to-wit: 1, Rest, Richard J. Cable hereby certify that on the 21st day of november one thousand nine hundred and Sixty Five at Jamestouse , County of Property of State of Indiana, Groom Donald Lee andrew of Hundricks County, State of Indiana, Groom Donald Lee andrew of Hundricks County, State of Indiana, Groom Donald Lee andrew of Hundricks County, State of Indiana, Groom Polaricks and, Bride Rita Rena Johnson of Hundricks were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of New Yorks Dated this 21st day of November , 19 65 Signed Rev. Richard 7. Cable

Official Designation Superistry ministry

Official Designation day of November , 19 65

Filed and recorded in accordance with the laws of the State of Indiana this Signed Signed Signed 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 20 Date of Application FEMALE Name of Physician D.D Cheesman 15H. Bell: MX 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 Date of Birth Previous Marital Status: Never Married Number of Previous Marriage Maiden Name if Different 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 ☐ Usual Occupation Fireman Ay Date of birth verified by: Birth Cert. Die Color or Race White Negro | Other | (specify) Other (Specify) Usual Occupation Are you now or have you been adjudged, d. An Imbecile? Date of birth verified by: Birth Cert.

☐ Judicial Decree Of Unsound Mind? 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 1. Are you now or have you been adjudged, diagnosed or considered as: No Yes No Yes Yes 🗆 Nov Yes No Yes 1965 ... Circuit Court Mr. Joe Johnson appeared before me, a notary public, this 15 day of Nov. 1965 and subscribed to the above consent for marriage of his daughter. If only one parent Eunel T my commission May 21, 1966 notary public State of Indiana, HENDRICKS County of State of Indiana, HENDRICKS County of Signed. COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license Maving 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. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE of Indiana dated the day of day of day of the day of day o , 19 as authorizing the joining together as hasband and wife Kita Rone Johnson Be it further remembered, the following marriage certificate was filed in my office, to-wit: 1, Rest, Richard J. Cable hereby certify that on the 21st day of November one thousand nine hundred and Sixty - give at Jamestoupe County of Broisen

State of Indiana, Groom Donald Lee andrew of Hindricks County, State of Indiana,
and, Bride Rita Rena Johnson of Hendricks were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of Klindricks

County. Signed Rev. Richard J. Cable , 19 65 day of november Official Designation Baptist minister Dated this 2/st Official Designation Fragment Minister 1965

Filed and recorded in accordance with the laws of the State of Indiana this 22 nd day of November 1965

Signed Hundricks CircuCircuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No. 339
File Book 28

Date of Application

Chap. 126, Ind. Acts 1905 HENDRICKS _County 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)". FEMALE APPLICANT MALE APPLICANT Middle Name Date of Birth Date of Birt Previous Marital Status: Never Married Number of Previous Marriages. Previous Marital Status: Never Married Mumber of Previous Marriages. Death Divorce Annulment Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: White Negro Other Color or Race White Negro Qther (specify)... Color or Race Usual Occupation Keceiving Birth Cot. | Judicial Decree Date of birth verified by: Usual Occupation Date of birth verified by: Birth Cert. 4 Judicial Decree Other (Specify). Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile?
 Yes 🗆 Other (Specify) ... Yes 🗌 Of Unsound Mind? 1. Are you now or have you been adjudged, diagnosed or considered as: Yes 🗌 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 home for indigent persons? An Imbecile? Of Unsound Mind? Yes 🗌 If answer to 3 is "yes" has the cause of such condition been removed? No 🗆 No Yes 4. Are you afflicted with a transmissible disease? 2. Are you under guardianship as a person of unsound mind? No Yes No Yes 5. Are you related to the bride closer than second cousin? 3. Are you afflicted with a transmissible disease? 6. Are you now under the influence of intoxicating liquor? 4. Are you related to the groom closer than second cousin? Yes 🗌 7. Are you now under the influence of a narcotic drug? Yes [Yes No No 8. Are you able to support a family? 5. Are you now under the influence of intoxicating liquor? 9. Are you likely to so continue? 6. Are you now under the influence of a narcotic drug? No 🗌 Yes 🗌 10. Do you have minor children from one or more former marriages? 7. Full name of father ______ E dus (If yes, answer questions a, b, c) (a) List their full names, ages and addresses Residence of father (if deceased so state) Address 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 their support? Residence of mother (if deceased so start No 🗆 Occupation of mother. Birthplace of mother (State or foreign country)... Surling Residence of father (if deceased so state) Occupation of father Electroplate I depose and state the information given in this application is true and correct. HENDRICKS Birthplace of father (State or foreign County of. Residence of mother (if deceased so state) ... Occupation of mother Birthplace of mother (State or foreign country) ... State of Indiana, HENDRICKS 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 .. 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, ss: HENDRICKS State of Indiana, County of County of 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 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 of Indiana dated the 34th day of Rosember, 1965, authorizing the joining together as husband and wife Be it further remembered, the following marriage certificate was filed in my office, to-wit: 1, Rev. Lee a Perry hereby certify that on the 27th day of November, one thousand nine hundred and Softy-five at Indianapolis, County of Maxion State of Indiana, Groom Phillip Lee Myers of Marion County, State of Indiana and, Bride Linda Dianne Buck of Hendricks 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 Court of Acade Charles Dated this 27 Th day of November , 1965 Signed Rev Lee a Perry Official Designation Minister

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County MALE Medical Examination Report Dated. Date of Application FEMALE Medical Examination Report Dated 15 Vacant NEVYL Name of Physician Cozen 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)". Middle FEMALE APPLICANT Date 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 Color or Race Negro Other (specify)... Last Marriage Ended By: Death Divorce Annulment Usual Occupation Color or Race Date of birth verified by: Birth Cert. | Judicial Decree Other (Specify) ... Usual Occupation Are you now or have you been adjudged, diagnosed or considered as: Sirth Cert. | Judicial Decree Date of birth verified by: Of Unsound Mind? 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: 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? No 🗆 / Yes 🗆 4. Are you afflicted with a transmissible disease? Of Unsound Mind? No Yes | Yes | 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? 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? 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 🗌 6. Are you now under the Influence of a narcotic drug? (If yes, answer questions a, b, c) No Yes (a) List their full names, ages and addresses 7. Full name of father Neil Archiba Age Address Residence of father (if deceased so state). Occupation of father dealer. Birthplace of father (State or foreign country) Elivert Michigan (b) Are you supporting or contributing to their support? Yes 🗆 No 🗆 (c) Are you complying with any court order or their support? Residence of mother (if deceased so state) Yes | No | 11. Full name of father Birthplace of mother (State or foreign country) Delroit muchigan Residence of father (if deceased so state) Occupation of father Machine Setup: 5. W State of Indiana, Birthplace of father (State or foreign country) ... Sy ... HENDRICKS County of .. Signed Theresa Michelle Residence of mother (if deceased so state) Occupation of mother Birthplace of mother (State or foreign country) Srod head State of Indiana, ss: I depose and state the information given CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent . 1962 signs, state facts which render the consent of the other parent unnecessary... HENDRICKS .. Circuit Court 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, HENDRICKS County of ... State of Indiana, HENDRICKS County of 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 solution of the day of day of day of the day of th RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE of Indiana dated the 24 Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the 24th day of Planember at Plainfield Country of Heredricks Eugene E Crawles State of Indiana, Groom Jerry Let Setton of Hendricks County, State of Indiana and, Bride Theresa Phichele Helms of Hendricks County, State of Indian Dated this 24th day of Rovember, 1965. Official Designation Justice of The Place day of Declmber, 1965. Jambold Jambold Clerk Filed and recorded in accordance with the laws of the State of Indiana this......

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

APPLICATION FOR MARRIAGE LICENSE

STATE OF INDIANA 20 Noember 1965 Date of Application HENDRICKS _County

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In The second of the second of

MALE Medical Examination Report Dated 19 Jacub 1965	FEMALE Medical Examination Report Dated 19 Nace 4 1965
Name of Physician F. V. Washin to M.D.	Name of Physician + B. Werbinto M.D.
the officering live fluided dottals (6000.00).	atement—Whoever procures the issuance of a license to marry by any false statement, representa-
Name First Middle Lat	Name First Middle Lost
Date of Birth Month Day Year	Anna Lucille Ashby
Place of Birth State & foreign country)	November 6 1929
Belleville, Indian	Place of Birth (State or foreign country)
RI BX 100 Clay ton the 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 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	Color or Race White Where Color Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	
1. Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation (anton Bridgeport Brown
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? 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:
home for indigent persons? No Yes If answer to 3 is "yes" has the cause of such condition been removed? No Yes Yes Yes	An Imbecile?
4. Are you afflicted with a transmissible disease? No Yes	Of Unsound Mind? 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? 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
7. Are you now under the influence of a narcotic drug? 8. Are you able to support a family? Yes	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? 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	Residence of father (if deceased so state)
Cal Russell 8 Clayton RI BXP	Occupation of father.
	Birthplace of father (State or foreign country) Maria 4, 12.
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Z Cassic Layon Miller
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state)
11. Full name of father	Occupation of mother Conscience Race of mother Charles
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country) Kokomo (u).	State of Indiana, HENDRICKS ss: I depose and state the information given
12. Full maiden name of mother Lillie Eva Boxwer	County of in this application is true and correct.
Residence of mother (if deceased so state)	Signed for sea dealle Ushfuf
Occupation of mother 12 Se A. J. Coleman Race of mother White Birthplace of mother (State or foreign country)	New Address
State of Indiana	Subscribed and sworn to before me his day of day of 1900
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Clerk HENDRICKS Circuit Court
New Address RI 3x 108 Clauda	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to being me this 29th day of senter 1963	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Clerk MENDRICKS 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 Tailing	State of Indiana, HENDRICKS
State of Indiana, County of	County of Services
Signed Father	Signed Father
Signed Mother Subscribed and sworn to before me this	Signed Mother
Subscribed and sworn to before me this	Subscribed and sworn to before me thisday of, 19
	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	. A marriage license having been refused to the above named parties, the
inauthorizes and directs the issuance of	rt by written order issued
RETURN OF MARRIAGE ANGENIA	
and the my office a marriage license	· in
7	
Be it further remembered, the following marriage certificate was filed in my	anna ducille wasti
State of Indiana, Groom Fred R. Hamilton of and, Bride ana Lucille ashby	Mendricks County, State of Indiana
and, Bride Anna Lycelle Ashly of M were by me united in marriage as authorized by a marriage license issued for the County.	11 11 1 1 1 1
Dated this 25th day of Mountain 19 65	purpose by the Cierk of the Circuit Court of
	Signed Milliam C. Black
Filed and recorded in passadance with the	
and the state of Indiana this.	detail Designation The Theory
	day of Shawary 19 66
Photo Super)	igned John Gamery, 1946. Henelbriks Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

MALE	County 2000 Level
Medical Examination Report Dated November 1865	FEMALE Date of Application
Name of Physician Lley & Terry NA	Medical Examination Report Dated 11
ALL QUESTIONS MUST BE ANSWERED. Chapter los X	Name of Physician Lland Text
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 in-
Name Nist Middle	the issuance of a license to marry by any false statement, representa-
Eda & Bast	Name First FEMALE APPLICANT
Date of Birth Day Year	Date of Birth Month
Place of Birth (State or foreign country)	Day Year
Residence Address Street or R. R. City County State	Place of Birth (State or foreign country)
Hendricks Ind	Residence Address Street of R. R. Cty County State
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Cross Daville, Hew (w).
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Total
Usual Occupation	Last Marriage Ended By: Divorce Annulment
Date of birth verified by: Dirth 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 Market	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	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 🗆 🗡es 🗆	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 Ves	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 Ves No	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?
(If yes, answer questions a, b, c)	6. Are you now under the influence of a narcotic drug?
(a) List their full names, ages and addresses Name Age Address	7. Full name of father
	Residence of father (if deceased so state)
	Occupation of father Cate or foreign country) Race of father Williams
	8. Full maiden name of mother Ollice Orlena Kim Regling
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for their support? Yes \(\simega \) No \(\simega \)	Residence of mother (if deceased so state)
their support? Yes No D	Occupation of mother Race of mother white
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Custodon: Losto Hace of father whate	
Birthplace of father (State or foreign country) Brown long, Ind.	State of Indiana, HENDRICKS ss: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Delzha Maie Ther	County of
Residence of mother (if deceased so state)	Signed Avis O. Whiteker
Occupation of mother	New Address.
Birthplace of mother (State or foreign country)	Subjectibed and sworm to before the dist
State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.	Clerk Circuit Court
Signed & Sand Signed	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 286 V. Cross Danille	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 day of 194	signs, state facts which render the consent of the other parent unnecessary
- Clerk HENDRICKS Circuit Court	signs, state facts which fender the committee the
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	Signed
Signed	Signed
Signed	Subscribed and sworn to before me thisday of19
Clerk	
	T. A marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR County Coun	and filed
in authorizes and directs the issuance of	f a marriage license to the above named parties.
in authorizes and directs are	E AND MARRIAGE CERTIFICATE
RETURN OF MARRIAGE LICENSI	se issued by the clerk of the
Be It Remembered, there was need the by open or ember	, 19 authorizing the joining together as his south
Be It Remembered, there was filed in my office a marriage licent day of	nd
Be it further remembered, the following marriage certificate was filed in my o	hereby certify that on the 27th day of Covernelle
Be it further remembered, the following marriage certificate was filed in my one thousand nine hundred and State Stand	at Danville County of Mindrethan
one thousand nine hundred and	of sentent , State of Indiana.
State of Indiana, Groom Edgar IC Thank	Nendricks County, State of Nendricks
one thousand nine hundred and State of Indiana, Groom Edgar R Band of and, Bride Devis A Malakes of were by me united in marriage as authorized by a marriage license issued for County.	that purpose by the Clerk of the
were by me united in marriage as authorized by a marriage	
Dated this 277 day of november, 18 th	Signed Cargue Z
	Official Designation Principles , 19 6 5.
File State of Indiana this	2nd day of Sicerolal James Circuit Court
thea and recorded in accordance with the laws of the	Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No. 343
File Book 28
22 November 1965

HENDRICKS __County Date of Application FEMALE Medical Examination Report Dated. MALE 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)". FEMALE APPLICANT MALE APPLICANT Mid Date of Birth 8+ Are So Apt 17 Scattle, King 6, Was Previous Marital Status: Never Married X Number of Previous Marriages. Previous Marital Status: Never Married Number of Previous Marriages.. Death Divorce Annulment Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: White Negro Other (specify) Color or Race Other [Color or Race Date of birth verified by: Birth Cert. Judicial Decree Usual Occupation Date of birth verified by:

Birth Cert.

Judicial Decree Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile?
 Other (Specify)... Of Unsound Mind? 1. Are you now or have you been adjudged, diagnosed or considered as: Yes 🗌 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 home for indigent persons? An Imbecile? Of Unsound Mind? If answer to 3 is "yes" has the cause of such condition been removed? / Yes □ No 🗆 2. Are you under guardianship as a person of unsound mind? Yes 🗌 4. Are you afflicted with a transmissible disease? Yes 🗌 5. Are you related to the bride closer than second cousin? 3. Are you afflicted with a transmissible disease? Yes 🗌 6. Are you now under the influence of intoxicating liquor? 4. Are you related to the groom closer than second cousin? Yes 🗌 7. Are you now under the influence of a narcotic drug? No 🗆 5. Are you now under the influence of intoxicating liquor? 8. Are you able to support a family? No 🗆 9. Are you likely to so continue? 6. Are you now under the influence of a narcotic drug? No Yes 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 Residence of father (if deceased so state) .. Address Name Occupation of father Birthplace of father (State or foreign country) Pin (Kney ville, 3.1) No 🗆 Yes 🗌 (b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for their support? Residence of mother (if dece No 🗆 Occupation of mother LPN. Methoda Birthplace of mother (State or foreign country) West Frank Residence of father (if deceased so state). Race of father White Occupation of father Mar. ASC I depose and state the information given in this application is the and correct. State of Indiana, Birthplace of father (State or foreign country) Chicago, II HENDRICKS 12. Full maiden name of mother Players Signe Residence of mother (if deceased so state) Occupation of mother HENDRICKS ss: I depose and state the information given in this application is true and correct. Circuit Court State of Indiana, HENDRICKS County of CONSENT OF PARENTS, PARENT OR GUARDIAN New Address 14105 Columbian Apt We, the parents, of this applicant hereby give consent for this marriage. If only one parent day of O to before methan 22 signs, state facts which render the consent of the other parent unnecessary ... 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, HENDRICKS County of .. 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, the _____County_______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 Rememberes, there was filed in my office a marriage license issued by the cyerk of the Junducks Circuit Court of Indiana dated the 26 ..., authorizing the joining together as husband and wife Herness Erven David Be it further remembered, the following marriage certificate was filed in my office, to-wit: 1Dawman hereby certify that on the.... one thousand nine hundred and State of Indiana, Groom Chuin and, Bride Stary Ray County. Dated this. Official Designation ... Filed and recorded in accordance with the laws of the State of Indiana this day of

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS County MALE Medical Examination Report Dated FEMALE Name of Physician Mymas 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, representation or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". FEMALE APPLICANT erron 1937 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. Color or Race Negro Other (specify).... Last Marriage Ended By: Death | Divorce | Annulment | Usual Occupation Color or Race Date of birth verified by: White Negro | Other | (specify)... rth Cert. | Judicial Decree Jures Vianse Other (Specify)... Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Of Unsound Mind? privers License 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 home for indigent persons? county asylum or Yes An Imbecile? 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 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 Yes 🗌 6. Are you now under the influence of intoxicating liquor? 3. Are you afflicted with a transmissible disease? Yes 🗆 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? No 🗆 9. Are you likely to so continue? No 🗆 5. Are you now under the influence of intoxicating liquor Ne Yes 10. Do you have minor children from one or more former marriages? No 🗆 Yes 🗌 Not Yes (If yes, answer questions a, b, c) (a) List their full names, ages and addresses Address Birthplace of father (State or foreign country). 8. Full maiden name of mother. Mary Na (b) Are you supporting or contributing to their support? 11. Full name of father, Mola Occupation of mother Touseurfe Residence of father (if deceased so state). Birthplace of mother (State or foreign country) Occupation of father ... State of Indiana, Birthplace of father (State or foreign country). 12. Full maiden name of mother Devaldine Source Residence of mother (if deceased so state) Browns Occupation of mother Kislaurani Birthplace of mother (State or foreign country) ... State of Indiana, HENDRICKS County of Vernon Cuze CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent egribed (I)desworn to before me Ns..... 52 day of 700. signs, state facts which render the consent of the other parent unnecessary.. Clerk 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 Mother ..Father Signed.. 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 ...County.......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 Be It Remembered, there was filed in my office a marriage license issued by the clerk of the day of authorizing the joining together as husband and wife and dated the allowing marriage certifiate was filed in my office, to-wit:

Be it further remembered, the following marriage certifiate was filed in my office, to-wit: at St. Malachy Brownsking, County of Heardricks 1, Kev. Charles noll State of Indiana, Groom Vernow Edgene Plought of Herdicks County, State of Indiana, Groom Vernow Edgene Plought of Hondische Signed Rev Operles Moll Dated this 21th day of Movember, 1965. Official Designation Catholic Philipp Signed John Bambald, Ja Circuit Court

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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No. 3 15

File Book 28

Date of Application

Chap. 126, Ind. Acts 1905 HENDRICE	County 220 Cally 19
MALE 30-1 1-101-	FEMALE
Medical Examination Report Dated 20 November 1965	Medical Examination Report Dated 19 Vacuate 1963
Name of Physician Lehman MB.	Name of Physician Evan L. hehman M.A.
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-
Name First Middle Last	Name First 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. H. City County State
Previous Marital Status: Never Married Number of Previous Marriages.	Maiden Name if Different Bx 119, ly Orangolis Hand, Inc
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
	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation
1. Are you now or have you been adjudged, diagnosed or considered as:	Date of birth verified by: Birth Cert. Dudicial Decree
An Imbecile? Of Unsound Mind? No Yes Yes No Yes	Other (Specify) W: Hen Proof
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 home for indigent persons? No Yes	1. Are you now or have you been adjudged, diagnosed or considered as: 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? No Yes	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? No Yes 3. Are you afflicted with a transmissible disease? No Yes Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes 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	4. Are you related to the groom closer than second cousin?
8. Are you able to support a family? 9. Are you likely to so continue? Yes No 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? (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 (if deceased so state)
	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	Residence of mother (if deceased so state)
11. Full name of father William Stochansons Foren	Occupation of mother. Account Race of mother white
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Race of father Birthplace of father (State or foreign country)	State of Indiana,
12. Full maiden name of mother was Belle Hooka	County of in this application is true and correct.
Residence of mother (if deceased so state)	Signed from fran 6 after
Occupation of mother Race of mother Race of mother Birthplace of mother (State or foreign country)	New Address.
State of Indiana, County of HENDRICKS Ss: I depose and state the information given in this application is true and correct.	Substribed and sworn before methin day of day of HENDRICKS Clerk Circuit Court
Signed William R. Giergon	
New Address X 3x 181 Matintuille In	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and swor to before the harmonic day of the 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	
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	
the consent of the other parent unnecessary	
Shake of Tailings	State of Indiana, HENDRICKS
State of Indiana, County of HENDRICKS Ses:	County of Signed
Signed Father	Signed Father Signed Mother
Subscribed and sworn to before me this	Subscribed and sworn to before me thisday of
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	Γ. A marriage license having been refused to the above named parties, the
County	art by written order issued
authorizes and directs the issuance of	f a marriage license to the above named parties.
Be It Remembered, there was filed in my office a marriage licens	
Be it further remembered, the following marriage certificate was flat:	id florma dan teaming
and thousand in the state of th	ereoy certify that on the day of lovemlike,
one thousand nine hundred and Sisty-Live has State of Indiana, Groom Williams & Pierson	t marapoles , Country of Barion ,
and, Bride flarma Jean Paden	County, State of Sudiana
Dated this day of Coverbus 1965	
vanisation . Latinia huse the	Official Designation Justice of the Peace
of the State of Indiana this	30 the day of Housember) 10/0,5
	9:
	Signed John Jambuld, Ju Clerk Hendricks Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS County MALE Medical Examination Report Dated 27 Date of Application FEMALE L.E. Foltz Medical Examination Report Dated 22 No. 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 10 Previous Marital Status: Never Married Number of Previous Marriages 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 00 Date of birth verified by: Other [(specify). 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 Of Unsound Mind? 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 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? NoП 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? Yes 🗆 Yes 🗆 6. Are you now under the influence of intoxicating liquor? Yes 🗆 3. Are you afflicted with a transmissible disease? 7. Are you now under the influence of a narcotic drug? Tes 🗌 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? 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 (If yes, answer questions a, b, c) (a) List their full names, ages and addresses Name Address Birthplace of father (State or foreign country)... Danneille (b) Are you supporting or contributing to their support? Yes 🖂 No [(c) Are you complying with any co No 🗆 Birthplace of mother (State or foreign country) Residence of father (if deceased so state). State of Indiana, HENDRICKS County of. 12. Full maiden name of mother. Priscilla Clements Residence of mother (if deceased so state 50 Occupation of mother New Address. Birthplace of mother (State or foreign country) New Boston HENDRICKS State of Indiana, County of ... 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..... HENDRICKS Circuit Court . 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, HENDRICKS County of ... State of Indiana, HENDRICKS County of Mother Signed. Signed. 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 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 clock of the Thendricks Circuit Court of Indiana dated the day of and and priscilla Clements

Be it further remembered, the following marriage certificate was filed in my office, to-wit:

| April 1 | April 2 | April 2 | April 2 | April 3 | April 2 | April 3 | April 3 | April 4 | April 5 | April 6 | April 1, Rev. Carl a Shumaker hereby certify that on the 2.71h day of Revenley, one thousand nine hundred and sifty five at Indianapales, County, State of Indiana, Groom Richard & Honcyal of Marian County, State of Indiana, Groom Richard & Honcyal of Liebs and, Bride Priscilla Clements of Dendricks County, State of Indiana, Signed Pew Carl Q Shumaber Dated this 27th day of November, 1965. Official Designation Roman Catholic Priest

Hendricks Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No. 3 A Combando Service Servi

Health under Authority Chap. 126, Ind. Acts 1905 HENDRICKS _County FEMALE Medical Examination Report Dated. MALE Medical Examination Report Dated Name of Physician_ Walke 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 Middle illian Previous Marital Status: Never Married Number of Previous Marriages Previous Marital Status: Never Married Number of Previous Marriages. Death Divorce Annulment Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: White Negro (specify) Other Color or Race White Negro Other (specify). Color or Race Usual Occupation Date of birth verified by: Birth Cert. Judicial Decree Date of birth verified by: Birth Cert. Judicial Decree Other (Specify)... Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile?
 Yes 🗌 Other (Specify) Yes 🗌 No 🖪 Of Unsound Mind? 1. Are you now or have you been adjudged, diagnosed or considered as: Yes 🗌 2. Are you under guardianship as a person of unsound mind? No 🕑 3. Are you now or have you been within five (5) years an inmate of a county aylum or home for indigent persons? An Imbecile? Of Unsound Mind? No 🗌 / Yes 🔲 If answer to 3 is "yes" has the cause of such condition been removed? No C Yes 🗌 2. Are you under guardianship as a person of unsound mind? 4. Are you afflicted with a transmissible disease? No Yes 5. Are you related to the bride closer than second cousin? 3. Are you afflicted with a transmissible disease? No Yes 6. Are you now under the influence of intoxicating liquor? No Yes No Yes No No 4. Are you related to the groom closer than second cousin? 7. Are you now under the influence of a narcotic drug? 5. Are you now under the influence of intoxicating liquor? 8. Are you able to support a family? 9. Are you likely to so continue? 6. Are you now under the influence of a narcotic drul No 🗌 Yes 🗌 10. Do you have minor children from one or more former marriages? (If yes, answer questions a, b, c) 7. Full name of father (a) List their full names, ages and addresses Residence of father (if deceased so state). Address Age Occupation of father Truckdrive: Comm Race Birthplace of father (State or foreign country).......... 8. Full maiden name of mother No 🗆 Yes 🗌 pport? Yes 🗌 No 🗆 Birthplace of mother (State or foreign country) State of Indiana, HENDRICKS I depose and state the information given in this application is true and correct. County of Signed HENDRICKS depose and state the information given this application is true and correct. Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent day of November 1965 state facts which render the consent of the other parent unnecessary. HENDRICKS Circuit Court nt for this marriage. If only one parent State of Indiana, HENDRICKS County of .. Father ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the Court by written order issued 23 North Report 1968 and filed ...County... CISAS ALCE authorizes and directs the issuance of a marriage license to the above named parties. 33a & age Wainy 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..... 19....., authorizing the joining together as husband and wife of Indiana dated the .. Be it further remembered, the following marriage certificate was filed in my office, to-wit: 1, Donald E. Riggs hereby certify that on the 28th day of November at Indianapolis , County of Marion one thousand nine hundred and ... William Fasters, Hendricks County, State of Indiana State of Indiana, Groom T. Richael and, Bride Brenda Jane (Albertson) of Hendricks 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 Court of ... Headrocks. 23 rd day of November, 1965. Dated this. Official Designation Minister)

Filed and recorded in accordance with the laws of the State of Indiana this SoIh day of Povember 19 65.

Signed John Sambold Je Clerk

Hendricks Circuit Court

Form Prescribed By

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE Indiana State Board of Health under Authority Chap. 126, Ind. Acts 1905 County HENDRICKS Date of Application FEMALE Medical Examination Report Dated MALE Medical Examination Report Dated 20 Walke 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)". FEMALE APPLICANT MALE APPLICANT Middle Name U: 1 lan Date of Previous Marital Status: Never Married Number of Previous Marriages Previous Marital Status: Never Married Number of Previous Marriages. Death Divorce Annulment Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: White Negro Other [(specify). Negro | Other | (specify)... Color or Race Usual Occupation Date of birth verified by: Birth Cert. Judicial Decree Usual Occupation Date of birth verified by: Birth Cert. Judicial Decree Other (Specify) .. Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile?
 Yes 🗌 Other (Specify). Yes 🗌 Of Unsound Mind? 1. Are you now or have you been adjudged, diagnosed or considered as: No 🗗 Yes 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 aylum or home for indigent persons? An Imbecile? Of Unsound Mind? No 🗌 / Yes 🗌 If answer to 3 is "yes" has the cause of such condition been removed? Yes 🗌 2. Are you under guardianship as a person of unsound mind? 4. Are you afflicted with a transmissible disease? No 🖪 No Yes 5. Are you related to the bride closer than second cousin? 3. Are you afflicted with a transmissible disease? No Yes 6. Are you now under the influence of intoxicating liquor? No Yes No Yes No 4. Are you related to the groom closer than second cousin? 7. Are you now under the influence of a narcotic drug? 5. Are you now under the influence of intoxicating liquor? 8. Are you able to support a family? 9. Are you likely to so continue? 6. Are you now under the influence of a narcotic dru No 🗌 Yes 🗀 10. Do you have minor children from one or more former marriages? (If yes, answer questions a, b, c) 7. Full name of father..... (a) List their full names, ages and addresses Residence of father (if deceased so state) .. Address Age Occupation of father weld rive: Comm Race of father. I depose and state the information given in this application is true and correct. HENDRICKS Circuit Court R GUARDIAN y give consent for this marriage. If only one parent e other parent unnecessary. County of Marion State of Indiana Notary Public My commission expires Nov. 29, 1968 refused to the above named parties, the COMPLETE IF WARRIAGE LICENSE ISSUED,Court by written order issued...... endrich County CASA authorizes and directs the issuance of a marriage license to the above named parties. 33 a we warm 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....... 19 authorizing the joining together as husband and wife of Indiana dated the Be it further remembered, the following marriage certificate was filed in my office, to-wit: Dame Albertson 1, Donald E. Riggs hereby certify that on the 28th day of November sifty-fine at Indianapolis , Country of Marion one thousand nine hundred and

State of Indiana, Groom Michael William Faster of Mendricks County, State of Indiana and, Bride Brenda Jane (Albertson) of Hendricks 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 Court of ... Hendricks Dated this 23 rd day of November, 1965. Official Designation Minister)

Filed and recorded in accordance with the laws of the State of Indiana this SoIh day of Povember 19 65.

Signed John Sambold Je Clerk

STATE OF INDIANA APPLICATION FOR MARRIAGE LIC

Form Prescribed By Indiana State Board of Health under Authority APPLICATION APPLICATION APPLICATION		
Health under Authority Chap. 126, Ind. Acts 1905 APPLICATION FOR I	MARRIAGE LICENSE	
MALE	KS County File Dook 28	
Medical Examination Report David 22 Wember 1965	FEMALE Date of Application	
Name of Physician Lloyd Terry MD	Medical Examination Report Dated 22	
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	Name of Physician Lloyd Terry M.D.	
Name Rirst MALE APPLICANT	whoever procures the issuance of a license to marry by any false statement, representa-	
Date of Birth Month Radar	Name FEMALE APPLICANT	
Place of Birth (State or foreign country)	Date of Birth Month Day Last	
Residence Address Street or R City County Street	Place of Birth (State or for ign country)	
Previous Marital Status: Never Married Number of Previous Marriages	Residence Address Street or R. R. City County State	
Last Marriage Ended By: Death Divorce Annulment	Maiden Name if Different Ohro	
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages	
Usual Occupation Administrata: Welder North	Last Marriage Ended By: Death Divorce P 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:	Date of birth verified by: Birth Cert. Judicial Pecree	
Of Unsound Mind? 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 sylum or	POther (Specify)	
If answer to 3 is "yes" has the cause of such condition been removed?	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes	
4. Are you afflicted with a transmissible disease? Note Yes: Note Yes: Note Yes:	Of Unsound Mind? No 2 Yes 2. Are you under guardianship as a person of unsound mind? No 2 Yes Yes	
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a narcotic drug? No Page 1	3. Are you afflicted with a transmissible disease?	
8. Are you able to support a family? 9. Are you likely to so continue? Yes No Very N	4. Are you related to the groom closer than second cousin? No ✓ Yes ☐ S. Are you now under the influence of intoxicating liquor? No ✓ Yes ☐	
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	6. Are you now under the influence of a narcoth drug?	
Name Age Address	7. Full name of father Lee Andrew Carrico Residence of father (if deceased so state) South Point Ohio	
	Occupation of father Retired Race of father White	
	8. Full maiden name of mother	
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for their suppose? Yes No	Residence of mother (if deceased so state) South Point, Owo	
11. Full name of father Kichard Douglas Kader	Occupation of mother. Thousen to Race of mother. white	
Occupation of father (If deceased so state) Residence of father (If deceased so state) Occupation of father Race of father White	Birthplace of mother (State or foreign country)	
Birthplace of father (State or foreign country) Monroe (0, 1m).	State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.	
Residence of mother (if deceased so state)	Signed Virginia m. Keeney	
Occupation of mother	New Address.	
State of Indiana, I depose and state the information given	Subscribed and sworn to before me this	
County of HENDRICKS in this population is true and correct.	Circuit Court	
New Address 5025 F. Winnesota mab	CONSENT OF PARENTS, PARENT OR GUARDIAN	
Subscribed and overn to before the 101 33 day of Vounty 1960	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		
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	Signed Father Mother	
SignedMother	Signed Mother Subscribed and sworn to before me this day of , 19	
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before the Carlo	
	A marriage license having been refused to the above named parties, the	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	rt by written order issued	
in authorizes and directs the issuance of	a marriage needs to	
Be It Remembered, there was filed in my office a marriage licens	tooded by	
of Indiana dates the	e issued by the clerk of the solution together as husband and wife 19.2., authorizing the joining together as husband and wife	
Sohn L Kader was filed in my of	ice, to-wit:	
1, Learge A Harris five one thousand nine hundred and Sixty five of	creby certify that on the 27th day of November, hereby certify that on the 27th day of November, hereby certify that on the 27th day of November,	
one thousand nine hundred and September 1990	Hendricks County, State of Indiana,	
County me united in marriage as authorized by a marriage	on a Maria	
Dated this 27 The day of November, 1946	Signed Tell Tell	
Filed and recorded in accordance with the laws of the State of Indiana this	ficial Designation 12 personales 19 65.	
Filed and recorded in accordance with the laws of the State of Indiana this	signed John Garalald Ja Circuit Court	

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

County HENDRICKS

- 26-65 Date of Application

	FEMALE (1 > 1/. 6.5
MALE 11.54.65	Medical Examination Report Dated //- 24.63
Medical Examination Report Dated	Name of Physician Carl & Heinlein M. D.
Name of Physician Carl & Neinlein M. D.	
Thione Agts 1905 prescribes "False state	tement—Whoever procures the issuance of a license to marry by any false statement, representa-
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	FEMALE APPLICANT
MALE APPLICANT	William . Los
Name Wirst Middle Last	Name First Middle hease
Venver Widner	Date of Birth Month Day Year
Date of Birth Month	June 4 1941
Place of Birth (State or foreign country)	Place of Birth (State of foreign country) Benkam Wentucker
Street or R. R. Oty County State 1)	Residence Address Street or R. R. City County State
Residence Address Street or R. R. A. Street or R. R. A. Sawille Hand.	205 Cook are Daniely Hand that
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different
Previous Marital Status: Never Married Number of Trovious Marital Status: Never Married Number of Trovious Marital Status:	Previous Marital Status: Never Married Number of Previous Marriages
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status. Never Marital
The state of the s	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	
Usual Occupation Heal Worker	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Danielle Wholesale Meats
Other (Specify)	To be a control of the control of th
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)
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?	All Impedite
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?	2. Are you under guardianship as a person of unsound mind?
5. Are you related to the bride closer than second cousin? No. Yes Yes Yes Yes	3. Are you afflicted with a transmissible disease?
6. Are you now under the influence of intoxicating liquor? 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? Yes No	5. Are you now under the influence of intoxicating liquor?
9. Are you likely to so continue?	
10. Do you have minor children from one or more former marriages? No Yes	Ollin France Mease
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Coul YMML Bace of father Bace of father
	Birthplace of father (State or foreign country)
William De La	8. Full maiden name of mother and rey The morres
(b) Are you supporting or contributing to their support? Yes No	The state of the s
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state)
11. Full name of father Sass Wigner	Occupation of mother Race 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 THE STATE
Birthplace of father (State or foreign country) Kentucky	State of Indiana, HENDRICKS ss: I depose and state the information given in this application is true and correct.
math. Micheland	County of
12. Full maiden name of mother fill and the	Similable Mease
Residence of mother (if deceased so state)	Signed
Occupation of mother Race of mother	New Address.
Birthplace of mother (State or foreign country)	Subscribed and sworp to before me this
State of Indiana, I depose and the information given	The Fambold Clerk Circuit Court
County of HENDRICKS ss: in this application is true and correct.	A CIGIS
Signed Wenner Warner	CONCENT OF PARENTS PARENT OF CHAPDIAN
New Address	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this 26 day of 200, 1965.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Jan Jambolel Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
ACONSIDER OF PARENTS PARENT OF TARREST	
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
그래마다 내용하다 나는 사람이 많아 되었다. 그 중에 다른 사람이 되었다면 어떻게 되었다.	
signs, state facts which render the consent of the other parent unnecessary	
Parist War and Arminist Day of the	State of Indiana
Cours warring jugariance & seguriales	State of Indiana, HENDRICKS ss:
State of Indiana,	County of
County of HENDRICKS	Signed
Signed Father	SignedMother
Signed	
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of
Clerk	Clerk
Sind in the	RT. A marriage license having been refused to the above named parties, the
Whareles County Cercuit	Court by written order issued //- 26-63 and filed
in clarks office authorizes and directs the issuance	of a marriage license to the above named parties. 3 days wained
Be It Remembered, there was filed in my office a marriage lice	SE AND MARRIAGE CERTIFICATE Lendricks Circuit Court
of Indiana dated the 26 day of November	
Nemares 71/2 dayer	Charles of the joining together as husband and any
Be it further remembered, the following marriage certificate was filed in my	and Charlotte Please
one thousand nine hundred and Sifty Live	hereby certify that on the 28th day of Possembles,
State of Indiana Commend and State of Indiana	at Hanville , County of Hendricks
Butte of marina, Groom following Wildness	of Hendricks County, State of Indiana
and, Bride Charlotte & Rease of	Hendricks County, State of Indiana,
were by me united in marriage as authorized by a marriage license issued for	r that purpose by the Clerk of the Circuit Court of Mendricks
Dated this 2 8th day of November 196	
any of two littley, 19 6	Signed Fred a Osh
	5
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation astor of apostolic Church
this said of the Blute of Indiana this	day of AVI Again 1977

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRIC	KS County
MALE Medical Examination Report Dated 23	Date of Application
Name of Physician James M. L.	FEMALE Medical Examination Report Dated 23 voem by 1965
Himle MI)	
ALL QUESTIONS MUST BE ANSWERED. Chapter 126. Indiana Acts 1905 prescribes "False state of the fined in any sum not exceeding five hundred della prescribes "False state of the fined in any sum not exceeding five hundred della prescribes "False state of the fined in any sum not exceeding five hundred della prescribes "False state of the fined in any sum not exceeding five hundred della prescribes "False state of the fined in any sum not exceeding five hundred della prescribes "False state of the fined in any sum not exceeding five hundred della prescribes "False state of the fined in any sum not exceeding five hundred della prescribes "False state of the fined in any sum not exceeding five hundred della prescribes "False state of the fined in any sum not exceeding five hundred della prescribes "False state of the fined in any sum not exceeding five hundred della prescribes "False state of the fined in any sum not exceeding five hundred della prescribes "False state of the fined in any sum not exceeding five hundred della prescribes "False state of the fined in any sum not exceeding five hundred della prescribes "False state of the fined in any sum not exceeding five hundred della prescribes "False state of the fined in any sum not exceeding five hundred della prescribes "False state of the fined in any sum not exceeding five hundred della prescribes "False state of the fined in any sum not exceeding five hundred della prescribes "False state of the fined in any sum not exceeding five hundred della prescribes the fined in any sum not exceeding five hundred della prescribes the fined in any sum not exceeding five hundred della prescribes the fined in any sum not exceeding five hundred della prescribes the fined in any sum not exceeding five hundred della prescribes the fined in any sum not exceeding five hundred della prescribes the fined in any sum not exceeding five hundred della prescribes the fined in any sum not exceeding five hundred della prescribes the five hundred della prescribes the fined in any sum not	tement When the Manual
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	whoever procures the issuance of a license to marry by any false statement, representa-
Name First Middle Last	Name FEMALE APPLICANT
Date of Birth Month Day Year	Middle Last
Place of Birth (State or foreign country)	Date of Birth Month Day Year
Residence Address Street or R. R. Cib.	Place of Birth (State or foreign country)
9825 W. Wash, Indiangold tell lad.	Residence Address Street of R. R. City County State
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different lander, Indeed Marien, Indeed
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	
Usual Occupation Base Occupation	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) Dxxxx); C.	Usual Occupation Seles Clark: Spinsele
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? No Yes \ 2. Are you under guardianship as a person of unsound mind? No Yes \ Yes \	Other (Specify) Written Proof.
3. Are you now or have you been within five (5) years an inmate of a county sylum or 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? No Yes	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? No Yes
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a narcotic drug? Now 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? 10. Do you have minor children from one or more former marriages? 11. Ves V	5. Are you now under the influence of intoxicating liquor? 6. Are you now under the influence of a narcotic drug? No TY Yes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father Henry Exnest Hilga diack
Name Age Address	Residence of father (if deceased so state)
Wallace Engane 18 raichope Hla	Occupation of father Race of father W. W. T.
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother XXXX
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state)
11. Full name of father John I homas II ab inson	Occupation of mother
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father	State of Indiana, HENDRICKS sa: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Cleanie Schreflerman	County of Wichen son
Residence of mother (if deceased so state)	Signed
Occupation of mother Race of mother	New Address
Birthplace of mother (State or foreign country)	Substribed and sworn before me this day of HENDRICKS
State of Indiana, County of HENDRICKS Ses: I depose and state the information given in this opplication is true and correct.	Clerk
Signed Nudley Vobinson	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 0825 W. Wash H: 40 TP.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and worn to be ore me that day of Mendricks Great Court	signs, state facts which render the consent of the other parent unnecessary
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, Country of HENDRICKS 88:	SignedFather
Father	SignedMother
Signed	Subscribed and sworn to before me this
Subscribed and sworn to before me this	Clerk
	RT. A marriage license having been refused to the above named parties, the court by written order issued
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	and filed ourt by written order issued
in authorizes and directs the issuance of	of a marriage license to the above named parties.
inauthorizes and div	- AND MARRIAGE CERTIFICATE
RETURN OF MARKIAGE INCOME.	The AND MARRIAGE CERTIFICATE Her Cricuit Court inse issued by the clerk of the pointing together as husband and wife in the court inserting the pointing together as husband and wife
Be It Remembered, there was fitted in Moventer	Batter a. Dickerso
of Indiana dated the day of day of State of Indiana dated the Be it further remembered, the following marriage certificate was filed in my of the state of the st	office, to-wit:
Be it further remembered, the following marriage certificate was filed in my of the following marriage	hereby certify that on the SOLA day of Thereby
one thousand nine hundred and	of Nemaritana
and Pride Posts O Alekary of T	Market by the Clerk of the Circuit Court of Newdricks
Bride file issued for	
County. 19.60	5. Signed Walten Bradford
County. 19.60	5. Signed Walten Bradford
were by me united in marriage as authorized	5. Signed Walten Bradford

Hendricks

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

	3	1		
No	R	- 1/	10	2
File	7	BON	A	0_
	Date of	Applicati	Y	196,

HENDRICKS _County MALE 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)". FEMALE APPLICANT MALE APPLICANT MYTO 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 White Negro Other (specify). Last Marriage Ended By: Death Divorce Annulment Color or Race Color or Race Birth Cert. | Judicial Decree Date of birth verified by: Usual Occupation Other (Specify) ... dring. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Date of birth verified by: Birth Cert. Dudicial Decre Of Unsound Mind? 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? No 🗆 Yes 🗌 Of Unsound Mind? 4. Are you afflicted with a transmissible disease? Yes 🗌 No D 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? 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 🗆 5. Are you now under the influence of intoxicating liquor? 9. Are you likely to so continue? 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..... Name Age Address Residence of father (if deceased so state) Occupation of father Trucks. 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? Residence of mother (if deceased so state) Yes 🗌 No 🗆 11. Full name of father.... Occupation of mother the touseurite Residence of father (if deceased so Birthplace of mother (State or foreign country). L. 186.00. Occupation of father Fage - 21 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 County of .. 12. Full maiden name of mother. Residence of mother (if de Occupation of mother. 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 HENDRICKS County of Circuit Court 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 ... Signed. COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, theauthorizes 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 cherk of the of Indiana dated the 1960, authorizing the joining together as husband and wife Be it further remembered, the following marriage certificate was filed in my office, to-wit: C. Lucher Bastrin hereby certify that on the 18th day of Desember one thousand nine hundred and 65 at Clayton, County of Leadricks, State of Indiana, Groom Daniel William Cashy of Bendricks County, State of Indiana of Hendricks 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 Court of Resulting Official Designation Pheskyterian Minister Filed and recorded in accordance with the laws of the State of Indiana this 31d day of January , 19 6 h...

Cross Court

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STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRIC	CKS County 27 of a large
MALE Medical Examination Report Dated 22	FEMALE Date of Application
Name of Physician TV. Petron 000 AA	Medical Examination Report Dated 22 days by 1961
ALL QUESTIONS MUST BE ANSWERED Charles to	
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 issuence of a li
Name MALE APPLICANT	
Michael Frederick Clast	Name First First
Date of Birth Day Year	Date of Birth O Morth Evelyn Canway
Place of Birth (State or foreign country)	Place of Birth State or fareign countries 28 1722
Residence Address Street R. R. R. City County State	Residence Address Sylvery Co., Ind.
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different
Very Manylage Ended Ry: Deeth C Di	Mary Englyn Milegarles
Marion 61	Previous Marital Status: Neter Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation Maintenance: Sunnybook.	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Care Negro Other (specify)
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? No Yes No Yes Yes Very under guardianship as a person of precent visits.	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county aylum 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? No Yes	An Imbecile? Of Unsound Mind?
4. Are you afflicted with a transmissible disease? No No Yes	2. Are you under guardianship as a person of unsound mind?
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 No	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?
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	6. Are you now under the influence of a narcotic drug? 7. Full name of father.
Name Age Address	7. Full name of father Residence of father (if deceased so state)
	Occupation of father Return 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 Andrey + . Veal
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state)
11. Full name of father Michael Schank	Occupation 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, I depose and state the information given
12. Full maiden name of mother With the Ketherine Alsop	County of
Residence of mother (if deceased so state)	Signed / Cory 2 Conway
Occupation of mother Race of mother white	New Address.
Birthplace of mother (State or foreign country). Rosine,	Subscribed and sworn to before me this day of LENDRICKS
State of Indiana, County of HENDRICKS Sas: I depose and state the information given in this application is true and correct.	Clerk Circuit Court
Signed Mahul J. Shurly	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address Loughville Ky	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sweet to before me had day of HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
for tempty	
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 } ss:
Shake at 7 N	County of
State of Indiana, County of HENDRICKS	Signed
Signed Father Mother	Signed day of , , 19
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of
Clerk	and parties the
COMPANY OF LICENSE ISSUED BY ORDER OF COUNTY	RT. A marriage license having been refused to the above named parties, the court by written order issued
COMPLETE IF MARRIAGE LICENSE ISSUED	RT. A marriage license having been refused to the and filed of a marriage license to the above named parties.
it in and directs the issuance	
Be It Remembered, there was filed in my office a marriage lice of Indiana dated the day of Accember	, 19.6.7, authorizing the joining together as husband and wife
of Indiana dated the Sile day of	· Mayer & relient
Be it further remembered the following marriage certificate was filed in my	boundary certify that on the 3rd day of 1
1, R.B. Pickard	at Danville County of Deliana
one thousand nine hundred and	of telaphores
one thousand nine hundred and Sifty fine State of Indiana, Groom Michael Inedexick and, Bride Many Evelyn Conceany of were by me united in marriage as authorized by a marriage license issued for County.	Marion Lette Clork of the Circuit Court of Hendricks
and, Bride Mary Cheliga by a marriage license issued for	that purpose by the Clerk of the
County.	5. Signed PB Pickard
Dated this 311 day of the	Official Designation Justice of The Kease
San Street Stree	31d day of December , Clerk
County. Dated this 3.4. day of Decarable., 19.6. Filed and recorded in accordance with the laws of the State of Indiana this	Signed John Bambold, J. Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS ___County

	pare of repplication
MALE \ 180 - 180	Medical Examination Report Dated 18 Vocantes 1965
Medical Examination Report Dated	Medical Examination Report Dated
Name of Physician Vorman E. Whitney DO.	Name of Physician Varman E. On Tucy 30.
Traine of Triplector	tement-Whoever procures the issuance of a license to marry by any false statement, representa-
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	
MALE APPLICANT	Name First Middle Last
Name First Middle Last	Name First Anidale Last
Date of Birth Month Day Year	Date of Birth Math Day Year
Tune 21 1912	Place of Birth (State or foreign country)
Place of Birth (Late or foreign country)	Posidence Address Street or R. R. City Courty State
Residence Address Street er R. R. City County State	Residence Address Street or R. R. City County State
KICT Moorewille Mondan, 120.	Maiden Name if Different
Previous Marital Status: Never Married Number of Previous Marriages	Number of Previous Manufaces
Last Marriage Ended By Death Divorce Annument D	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	Color or Race White Negro Other (specify)
Usual Occupation \vork drive Motor Exp. Book.	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Conservation
Other (Specify)	Date of birth verified by: Birth Cert. Judicial Decree
An Imbecile? Of Unsound Mind? No Yes Yes Yes	Other (Specify)
2. Are you under guardianship as a person of unsound mind? No Ves	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 as lum or home for indigent persons? 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 Yes Yes Yes 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? 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?
8. Are you able to support a family?	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 I Yes	6. Are you now under the influence of a narcotic drug? No Yes
(If yes, answer questions a, b, c)	7. Full name of father Frank Landers Bain
(a) List their full names, ages and addresses	Residence of father (if deceased so state)
Dannelynn 13 R3 Address	Occupation of father
chas, in	
carsting Mae	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes W No	8. Full maiden name of mother Emma Elva Kays
(c) Are you complying with any court order or orders issued for	Residence of mother (if deceased so state). A. M. O. C. S.
and published to the property of the property	Occupation of mother. Race of mother what the
11. Full name of father	Birthplace of mother (State or foreign country) May an (a., (w)-
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
Birthplace of father (State or foreign country)	State of Indiana, County of State of Indiana, County of State of Indiana, I depose and state the information given in this application is true and correct.
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS See I depose and state the information given in this application is true and correct.
Birthplace of father (State or foreign country)	State of Indiana, County of Signed Morvaire Honoration given in this application is true and correct.
Birthplace of father (State or foreign country)	State of Indiana, County of Signed Morvoire Honoration given in this application is true and correct. New Address
Birthplace of father (State or foreign country)	Signed Maryorie Hornaday
Birthplace of father (State or foreign country)	Signed Morgania Hornaday New Address Subscribed and soorn to before me this 200 day of Magnet 19.65 HENDRICKS
Birthplace of father (State or foreign country)	Signed. Maryoria Hornaday New Address. Subscribed and soorn to before me this 20th day of Vacanta. 1965
Birthplace of father (State or foreign country) 12. Full maiden name of mother	Signed
Birthplace of father (State or foreign country) 12. Full maiden name of mother	Signed
Birthplace of father (State or foreign country) 12. Full maiden name of mother	Signed
Birthplace of father (State or foreign country) 12. Full maiden name of mother	Signed
Birthplace of father (State or foreign country) 12. Full maiden name of mother	Signed
Birthplace of father (State or foreign country) 12. Full maiden name of mother	Signed
Birthplace of father (State or foreign country) 12. Full maiden name of mother	Signed
Birthplace of father (State or foreign country) 12. Full maiden name of mother	Signed
Birthplace of father (State or foreign country) 12. Full maiden name of mother	Signed
Birthplace of father (State or foreign country) Residence of mother (if deceased so state) Occupation of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed May of Mendricks Subscribe and swirn to before me this application is true and correct. 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,	New Address. Subscribed and sworn to before me this day of Arabication of the Described and sworn to before me this day of Arabication of the Described and sworn to before me this day of Arabication of the Described and sworn to before me this day of Arabication of the Described and sworn to before me this day of Arabication of the Described and sworn to before me this day of Arabication of the Described and sworn to before me this day of Arabication of the Described and sworn to before me this day of Arabication of the Described and sworn to before me this day of Arabication of the Described and sworn to before me this day of Arabication of the Described and Subscribed and sworn to before me this day of Arabication of the Described and Subscribed and Subscrib
Birthplace of father (State or foreign country) 12. Full maiden name of mother (if deceased so state) Occupation of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed Signed Subscribes and swirn to before me this (State of Guardiana) New Address Subscribes and swirn to before me this (State of Guardiana) 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	Subscribed and soorn to before me this
Birthplace of father (State or foreign country) 12. Full maiden name of mother (if deceased so state) Occupation of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed Signed Subscribes and swern to before me this country Clerk 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, State of Indiana, HENDRICKS State of Indiana, State of Indiana, HENDRICKS	Signed
Birthplace of father (State or foreign country) Residence of mother (if deceased so state) Occupation of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed Address Subscribed and swern to before me this country 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 Signed Father Signed Mother	Signed
Birthplace of father (State or foreign country) Residence of mother (if deceased so state) Occupation of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed	Signed
Birthplace of father (State or foreign country) Residence of mother (if deceased so state) Occupation of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed Address Subscribed and swern to before me tills application is true and correct. 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 Signed Father Signed Mother	Signed
Birthplace of father (State or foreign country) Residence of mother (if deceased so state) Occupation of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed Address Subscribe and swern to before me this country and swern to before me this country of 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 Signed Father Signed Mother Subscribed and sworn to before me this day of the other parent unnecessary. Clerk HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this day of 19	Signed
Birthplace of father (State or foreign country) Residence of mother (if deceased so state) Occupation of mother. Birthplace of mother (State or foreign country) State of Indiana, County of. New Address. Subscribed and swarn to before me this of this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of. Birthplace of mother (State or foreign country). State of Indiana, County of. Clerk 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, County of. Bigned. State of Indiana, County of. Bigned. Signed. Mother Subscribed and sworn to before me this. Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	Signed Mother Subscribed and soorn to before me this Mendricks Clerk 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, County of Signed Father Signed Mother Subscribed and sworn to before me this day of 19
Birthplace of father (State or foreign country)	Signed
Birthplace of father (State or foreign country)	Signed
Birthplace of father (State or foreign country)	Signed
Birthplace of father (State or foreign country) 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, County of. MENDRICKS Signed. New Address. Subscriber and swern to before me this office of this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of. Signed. State of Indiana, County of. HENDRICKS Signed. Signed. Signed. Signed. Signed. Signed. Father Signed. Signed. Signed. County of. MENDRICKS Signed. S	Signed
Birthplace of father (State or foreign country) 12. Full maiden name of mother	Signed
Birthplace of father (State or foreign country) 12. Full maiden name of mother	Signed
Birthplace of father (State or foreign country) 12. Full maiden name of mother. Residence of mother (if deceased so state) Occupation of mother (State or foreign country) State of Indiana, County of. HENDRICKS Signed. New Address. Subscribed and swern to before me this 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 Signed. State of Indiana, County of. Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU County. in authorizes and directs the issuance RETURN OF MARRIAGE LICEN Be it further remembered, the following marriage lertificate was filed in my office a marriage lice of Indiana dated the Be it further remembered, the following marriage lertificate was filed in my office a marriage lice of Indiana dated the Be it further remembered, the following marriage lertificate was filed in my	Signed
Birthplace of father (State or foreign country) 12. Full maiden name of mother. Residence of mother (if deceased so state) Occupation of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, County of. HENDRICKS Signed. New Address. Subscribe and swrn to before me this day of. Clerk 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, County of HENDRICKS Signed.	Signed
Birthplace of father (State or foreign country) 12. Full maiden name of mother. Residence of mother (if deceased so state) Occupation of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, County of. HENDRICKS Signed. New Address. Subscribe and (when to before me this off) Clerk 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, County of. HENDRICKS Signed. Signed	Signed Monard Hendricks Subscribed and swern to before me that day of Assertice and swern to before me that the Hendricks and 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 Signed Mother Signed Mother Subscribed and sworn to before me this day of 19
Birthplace of father (State or foreign country) Residence of mother (if deceased so state) Occupation of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed Clerk New Address Subscribes and swern to before me 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 Signed Pather Mother Complete If Marriage License Issued by Order of County in authorizes and directs the issuance RETURN OF Marriage License Pather Be It Remembered, the following marriage ertificate was filed in my of Indiana dated the day of Pather Be it further remembered, the following marriage ertificate was filed in my I, Mean Pather One thousand nine hundred and Sitty Park State of Indiana, Groom Marriage Pather State of Indiana, Groom Pather State of I	Signed Morando Hendricks Subscribed and sovern to before me 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 Signed Mother Signed Mother Subscribed and sworn to before me this day of 19 Clerk RT. A marriage license having been refused to the above named parties, the court by written order issued and filed of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE conservations is such as the court by the clerk of the such and filed of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE conservations is such as the court by the clerk of the such and filed of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE conservations is such as the court of the co
Birthplace of father (State or foreign country) 12. Full maiden name of mother. Residence of mother (if deceased so state) Occupation of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, County of HENDRICKS Signed Clerk New Address Subscribed and ever to before me 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 Signed Father Signed Signed Mender Mend	Signed Morando Hendricks Subscribed and sovern to before me 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 Signed Mother Signed Mother Subscribed and sworn to before me this day of 19 Clerk RT. A marriage license having been refused to the above named parties, the court by written order issued and filed of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE conservations is such as the court by the clerk of the such and filed of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE conservations is such as the court by the clerk of the such and filed of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE conservations is such as the court of the co
Birthplace of father (State or foreign country) Residence of mother (if deceased so state) Residence of mother (if deceased so state) Occupation of mother (State or foreign country) Birthplace of mother (State or foreign country) State of Indiana, County of Signed (Signed Country) New Address Subscribed and worn to before me that (State on the consent of the other parent unnecessary) State of Indiana, County of HENDRICKS Signed (Signed Country) State of Indiana, County of HENDRICKS Signed (Signed Country) State of Indiana, County of (Signed Country) County of (Signed Country) State of Indiana, County of (Signed Country) Country of	Signed Moranda Hendricks Subscribed and sovern to before me 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 Signed Mother Subscribed and sworn to before me this day of Mother Subscribed and sworn to before me this day of Subscribed and sworn to the above named parties, the court by written order issued and filed of a marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE conse issued by the klerk of the such authorizing the joining together as husband and wife and office, to-wit: hereby certify that on the 4 Mother aday of Margane County, State of Indiana. County, State of Indiana, County, State of Indiana. County, State of Indiana, County of Indiana. County, State of Indiana, County of Indiana. County, State of Indiana, County of Indiana.
Birthplace of father (State or foreign country) 12. Full maiden name of mother	New Address. Subserhed and sorn to before me the Court Court 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. Signed
Birthplace of father (State or foreign country) 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, County of. New Address. Subscribed and sween to before me 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 Signed. State of Indiana. County of. HENDRICKS Signed. Subscribed and sworn to before me this. Subscribed and sworn to before me this. Signed. Subscribed and sworn to before me this. Subscribe	New Address. Subserved and sorn to before me the Court Court 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, County of. Signed. Signed. Signed. Signed. Signed. Signed. Signed. Subscribed and sworn to before me this. Clerk RT. A marriage license having been refused to the above named parties, the court by written order issued. SEE AND MARRIAGE CERTIFICATE Ense issued by the clerk of the. 19. Authorizing the joining together as husband and wife and. 19. Authorizing the joining together as husband and wife and. 19. Authorizing the joining together as husband and wife and. 19. Authorizing the joining together as husband and wife and. 20. County, State of Indiana. County, State of Indiana. County, State of Indiana. That purpose by the Clerk of the Circuit Court of Indiana. That purpose by the Clerk of the Circuit Court of Indiana. That purpose by the Clerk of the Circuit Court of Indiana.
Birthplace of father (State or foreign country) 12. Full maiden name of mother	Subscrived and seven to before me the Court Menders Circuit Court ONSENT 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 Signed Mother Subscribed and sworn to before me this
Birthplace of father (State or foreign country) 12. Full maiden name of mother	Subscribed and sworn to before me the Clerk HENDRICKS Subscribed and sworn to before me the Clerk HENDRICKS Aday of Clerk of the above named parties, the above named parties, the clerk of the above named parties, the clerk

Clerk .. Circuit Court

Dated this

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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS County MALE Date of Application Medical Examination Report Dated FEMALE Medical Examination Report Dated KM 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)". Name of Physician_ FEMALE APPLICANT Number of Previous Marriage 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: YIMAD Lic. Other (Specify). 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 Of Unsound Mind? 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: 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 🗌 Of Unsound Mind? 4. Are you afflicted with a transmissible disease? Yes 🗆 No Yes 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? Yes 🗌 6. Are you now under the influence of intoxicating liquor? Yes 🗆 3. Are you afflicted with a transmissible disease? 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? No 🗆 Yes 7 10. Do you have minor children from one or more former marriages? No 🗆 Yes 🗌 Yes [(If yes, answer questions a, b, c) (a) List their full names, ages and addresser Occupation of father Y res . Kathan In Birthplace of father (State or foreign country)..... 8. Full maiden name of mother..... (b) Are you supporting or ontributing to their support? Yes 🗌 Yes No No Birthplace of mother (State or foreign country) Liberty Indiana Residence of father (if deceased so state Occupation of father Sust : Ketin State of Indiana, HENDRICKS Birthplace of father (State or fe 12. Full maiden name of mother N ... The Signed Portra Clare Mutschler Occupation of mother. Toufewi Birthplace of mother (State or foreign country). HENDRICKS Circuit Court State of Indiana, HENDRICKS County of. 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..... 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 ... Father State of Indiana, HENDRICKS County ofFather Signed.Mother .day of 19...... 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.....authorizes and directs the issuance of a marriage license to the above named parties.County..... 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 Hendricks. Circuit Court of Indiana dated the Ith day of December and Partia Claime Mutsehler

Be it further remembered, the following marriage certificate was filed in my office, to-wit: Darred M. Master hereby certify that on the 18th day of Accember at Elkhart Rappaser, County of Elkhart, State of Indiana, Groom John Michael Musgrave of Lendricks County, State of Indiana and, Bride Portia 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 Court of County. Signed Daried In Thrasher day of December, 1965. Official Designation Methodist Missetter

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No	232	
File	Book 28	
	4 December	196.
to the state of	Date of Application	

HENDRIC	KS County Date of Application
MALE 20 1 21	FEMALE 29 Non la 1965
Medical Examination Report Dated 29 November 1965	Medical Examination Report Dated 27 Concerns 1963
Name of Physician 1883 Cohen ND.	Name of Thysician
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-
Name APPLICANT Middle Last	Name — First Middle Last
Date of Birth Month Day Fluney Sr.	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 Streeter R. R. City County State
RI BX 83 Plaintield, Hend. Ind.	Maiden Name if Different
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	Last Marriage Ended By: Reath Divorce Annulment
Color or Race White Negro Other (specify)	, land: 50 '62
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)
Other (Specify)	Date of birth verified by: Birth Cert. Judicial Decree
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Of Unsound Mind? Yes	Pother (Specify) 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 stylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes
home for indigent persons? No Yes If answer to 3 is "yes" has the cause of such condition been removed? No Yes Yes 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 Yes	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?
7. Are you now under the influence of a narcotic drug? 8. Are you able to support a family? Yes Ves	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? 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?
(a) List their full names, ages and addresses Name Age Address	7. Full name of father (if deceased so state)
Autes	Occupation of father Race of father
	Birthplace of father (State or foreign country) L.berty Ky.
	8. Full maiden name of mother. Many Eliza Earls
(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) Mossessile, Ind
11. Full name of father Robert John Flyney Sr.	Occupation of mother Large Race of mother W note
Residence of father (if deceased so state) Platufield, Ind.	Birthplace of mother (State or foreign country) Liberty Ky.
Occupation of father Race of father	The last was to consider the state of the st
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.
Residence of mother (if deceased so state)	Jula Had
Occupation of mother Race of mother	New Address Saw
Birthplace of mother (State or foreign country) Livy Paol England	la conthe Dealer los
State of Indiana, County of HENDRICKS I depose and state the information given in this application is true and correct.	HENDRICKS
Signed Robby. Kury 8.	Clerk Circuit Court
New Address R 13 x 83 7 lamfield lad.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before nether and and of become, 1905	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	
signs, state facts which render the consent of the other parent unnecessary	
State of Indiana,	State of Indiana, County of
County of HENDRICKS ss:	Signed
Signed Father Signed Make	SignedMother
Subscribed and sworn to before me this	Subscribed and sworn to before me thisday of
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	Γ. A marriage license having been refused to the above named parties, the
County	urt by written order issued
authorizes and directs the issuance of	f a marriage license to the above named parties.
Be It Remembered, there was filed in my office a marriage licens	E AND MARRIAGE CERTIFICATE
of Indiana dated the day of December	se issued by the clerk of the Circuit Court 1965, authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my of	nd
1, will disself	1.71 M
one thousand nine hundred and Sisty-five	at Plaintie!
The state of the s	t Washington -
County,	hat purpose by the Clerk of the Circuit Court of - No as de la bel
Dated this 10 Ih day of December , 1965	
	Signed R. P. Russell Mixister-
Filed and recorded in accordance with the laws of the State of Indiana this	Ithicial Designation (H. et Al) A TI
	Signed John Dambold Ja Clerk Kendricks Circuit Court
	Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS MALE Medical Examination Report Dated Date of Applicati FEMALE Name of Physician Medical Exar ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1865 prescribes 1860 or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00). MALE APPLICANT PEMALE APPLICANT Date of Birth Place of Birth (State or Previous Marital Status: Never Married Number of Previous Marriag Death | Divorce | Annulment | Previous Marital Status: Never Married M. Number of Freeines Marriage White Negro | Other | (specify). Color or Race Last Marriago Ended Str. Date of birth verified by: Birth Cert. Dudicial Decree Other (Specify) ... Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile?
 Of Unsound Mind? 2. Are you under guardianship as a person of unasued wind? home for indigent persons? If answer to 3 is "yes" has the cause of such condition been removed? An Imbaclis? No. No. CO No. Yes 4. Are you afflicted with a transmissible disease? Of Usesund Mind? Yes [No. No. C 5. Are you related to the bride closer than second cousin? 2. Are you under gracellarably us a person of uncound mind? MAN KIND 6. Are you now under the influence of intoxicating liquor? Yes 🗆 Yes 🗌 2. Are you afficted with a transmissible disease? 7. Are you now under the influence of a narcotic drug? No. See Cl Yes 8. Are you able to support a family? 4. Are you related to the grown closer than once No. No. D Yes KE No [9. Are you likely to so continue? No [10. Do you have minor children from one or more former marriages? No. 1 - D Yes [(If yes, answer questions a, b, c) No. No. C. (a) List their full names, ages and addresses the Kerehi Name Address (b) Are you supporting or contributing to their support? Yes 🗆 No 🗆 (c) Are you complying with any court order or their support? Yes | No | 11. Full name of father Tranklin Residence of father (if deceased so state)... Occupation of father ... State of Indiana. Birthplace of father (State of foreign country) 12. Full maiden name of mother... Residence of mother (if december Occupation of mother Trousurfe Birthplace of mother (State or foreign country) CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hardly give seasont for this marriage. If only one parent Subadribed and sworn to before me this. plu Dambold, Jr. aux 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 ofFather 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 Court by written order issued ...authorizes and directs the issuance of a marriage license to the above named parties. ...County..... RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Be It Remembered, there was filed in my office a marriage liegues issued by the eleck of the Andread Seconder no 65 morning on joining requiring in recognit and wife of Indiana dated the 10th Be it further remembered, the following marriage certificate was filed in my office, to with 1. Edward Dr. Laughlin switz water of the 14th may of December a Banerlle cours of Thendricke one thousand nine hundred and sighty five of Barulle County of Bendricke State of Indiana, Groom Reger 9 Stroke of Eartholomeer County, Stroke of Indiana, Groom Reger 9 Stroke and, Bride Parcia K Rinderknecht of Thenbricke County, Euro of Indiana, were by me united in marriage as authorized by a marriage license issued for that guerguse by the Clerk of the Coronic Court of Aktual Control Court of the Coronic Court of the Opini Dringwim Getholic Breest Pastar day of December , 2062 Dated this. Filed and recorded in accordance with the laws of the State of Indiana this. 1324 day of Alexander 18 18 32. Some John Gembold Jos Con Circuit Court

STATE OF INDIANA

FEMALE

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS ___County

Date of Application

MALE Medical Examination Report Dated 6 Security 1905 Name of Physician Steven Glock MD.	Name of Physician School Glock 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)".	tement—Whoever procures the issuance of a license to marry by any false statement, represents
MALE APPLICANT	FEMALE APPLICANT
Name First CMiddle The Last	Name Cherry Middle Ford
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. 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
- 1.1	
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)
Other (Specify)	Usual Occupation In employed
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Of Unsound Mind? Yes No Yes	Date of birth verified by: Birth Cert. Judicial Decree
2. Are you under guardianship as a person of unsound mind? Now Yes 3. Are you now or have you been within five (5) years an inmate of a county sylum or	1. Are you now or have you been adjudged, diagnosed or considered as:
home for indigent persons? No Yes If answer to 3 is "yes" has the cause of such condition been removed? No Yes	An Imbecile? Of Unsound Mind? No West
4. Are you afflicted with a transmissible disease? 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? No Yes S. 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	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? 7. Full name of father
Name Age Address	Residence of father (if deceased so state)
	Occupation of father beatcher Eastern Race of father Race of father
	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	8. Full maiden name of mother IV 11.0 xxxx
11. Full name of father. A arry Gill Ricke back Sr.	Residence of mother (if deceased so state)
Residence of father (if deceased so state)	Occupation of mother. State on favoire annual Race of mother with the River of mother
Occupation of father Machines tilinde Race of father white	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.
Residence of mother (if deceased so state)	Cherul & Feed
Occupation of mother Cook : Waffe He Race of mother WASTE	New Address
Birthplace of mother (State or foreign country)	Substribed and sworules before moths of 9th day of De- a- be 1065
State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Clerk HENDRICKS Circuit Court
Signed Harry G. Rickenback	
New Address 9810 D. Main St., Damille.	CONSENT OF PARENTS, PARENT OR GUARDIAN
day of HENDRICKS	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
ARENTS, PARENT OR GUARDIAN	signs, state facts which render the consent of the other parent unnecessary
of this applicant hereby give consent for this marriage. If only one parent	
which render the consent of the other parent unnecessary.	
sent attached	State of Indiana,
\	County of HENDRICKS ss:
HENDRICKS S8:	Signed Father
Signed Father Signed Mother	Signed Mother
orn to before me this 344 ov of December 19 00	Subscribed and sworn to before me thisday of
Sed Clerk Clerk	Clerk
MARRIAGE LICENSE ISSUED BY ORDER OF COURT	. A marriage license having been refused to the above named parties, the
Cou	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 e issued by the clerk of the
ady of a film	
Be it further remembered, the following marriage certificate was filed in my off	d. Cherryl L. Ford
1, Cay Pastar	malu
	Illasta VI and Water T. T. W. J.
11 110 10 Total action and of	Wenducked Commenced to
County.	at purpose by the Clerk of the Circuit Court of Nendricks)
Dated this 13 th day of December , 19 65	Signed A Of W M
But I will be the state of the	Gigned Barrell W. Oog Paster ficial Designation Maple Strong Baptist Church
Filed and recorded in accordance with the laws of the State of Indiana this	Methoday of December 1965
S	agned John Hamboll S. Clerk
	Hendricks Circuit Court

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

MAGE DICE

County

No	357
File_	Beok 28
T	9 December 1965
	Date of Application

FEMALE MALE 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 Date of Birt 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 White Negro Other (specify). Last Marriage Ended By: Death Divorce Annulment Color or Race Usual Occupation Negro Other (specify)... Color or Race Date of birth verified by: Birth Cert. Judicial Decree Usual Occupation Other (Specify). Date of birth verified by: Birth Cert. U Judicial Decree Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes 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 sylum 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 🗌 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 F 3. Are you afflicted with a transmissible disease? Yes 🗌 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 🗆 5. Are you now under the influence of intoxicating liquor? 9. Are you likely to so continue? 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 ... Name Address Residence of father (if deceased so state). Occupation of father seatcher Eastern Race of father. Birthplace of father (State or foreign country). 8. Full maiden name of mother. Wildred (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 🗆 11. Full name of father Occupation of mother 1 touseur 16 Birthplace of mother (State or foreign country) ... Occupation of father whints State of Indiana, HENDRICKS Birthplace of father (State or foreign country I depose and state the information given in this application is true and correct. 12. Full maiden name of mother. New Ce. Residence of mother (if deceased so state) ... Occupation of mother (if deceased so state). Walle He Race of mother Waste 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 New Address. nt of the other parent unnecessar ickenback So. hereby give my consent for Father .Mother Subscribed and sworn to before me this 19..... ..Clerk es, the nd filed Notary Publi it Court Harry ind wife Be it further remembered, the following marriage certificate was filed in my office, to wit: hereby certify that on the 13th day of December sisty-five one thousand nine hundred and ... at naple Grove Baptist Russbury of Hendricke, G. Rickenback Jo of Nendricks County, State of Indiana State of Indiana, Groom Harry 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 Court of Nenducks day of December Dated this. Signed Barrell W. Cay, Pastar) Official Designation Maple Grove Baptist Church Filed and recorded in accordance with the laws of the State of Indiana this...

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

MALE	County 10 Decart 196	
Medical Examination Report Dated 3 Deco.	FEMALE Date of Application	
Name of Physician Donald Clare	Medical Examination Report Dated 31 comba 1967	
theesman MD		
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-		
MALE APPLICANT	Whoever procures the issuance of a license to marry by any false statement, representa-	
Name First Middle T Loct	FEMALE APPLICANT	
Date of Birth Month Day	Name First Middle Last	
Place of Birth (State of foreign country)	Date of Birth Month Soan LOOPS	
15 razil Indiana	Place of Birth (State or foreign county)	
Residence Address Street & R. R. City County State	Residence Address Street of P. D	
Previous Marital Status: Never Married Number of Previous Marriages	City County State	
Very Marriage Frided Bry Death C. T.	Maiden Name if Different Malon Indiangolis War. Ind.	
Last Marriage Ended By: Death Divorce Annulment Hendies	Previous Marital Status: Never Married Number of Previous Marriages	
Color or Race White Negro Other (specify)	Last Marriage Foded Sur	
Usual Occupation RR Was Clark	Alaria Leav. Death Divorce Annulment	
Date of birth verified by Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)	
Pother (Specify) Street License	Usual Occupation Factors works:	
1. Are you now or have you been adjudged, diagnosed or considered as: No Was D	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 sylum 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? No /Yes /	An Imbecile?	
4. Are you afflicted with a transmissible disease? No W Yes	Of Unsound Mind?	
6. Are you now under the influence of intoxicating liquor? No Yes	2. Are you under guardianship as a person of unsound mind? No Yes No Yes Yes	
7. Are you now under the influence of a narcotic drug? No Yes	A American miles and a second mi	
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? No Yes 5. Are you now under the influence of intoxicating liquor? No Yes 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 Henry Eston Slone	
Name Age Address	Residence of father (if deceased so state)	
	Occupation of father Free of Drive . Dk Rage of father what	
	Birthplace of father (State or foreign country)	
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Catherine Virginia Thomas	
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state). M. Shawa Qa,	
11. Full name of father Younger Fritz	Occupation of mother	
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)	
Occupation of father Race of father Race of father	at of the state of	
Birthplace of father (State or foreign country)	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 Incz Marie Trout	900	
Residence of mother (if deceased so state) Deceased:	Signed	
Occupation of mother	New Address.	
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me thisday ofday of19	
State of Indiana, HENDRICKS Sas: I depose and state the information given in this application is true and correct.	Clerk HENDRICKS Circuit Court	
County of PAT		
Signed Milliansold Ind.	CONSENT OF PARENTS, PARENT OR GUARDIAN	
Subscribed and evern to before not 10 10 th day of the second 1963	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 OF CHARDIAN		
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 Ind	
	HENDRICKS County of	
State of Indiana,	SignedFather	
County of HENDRICKS	Signed	
Signed Father Mother	Subscribed and sworn to before me thisday of	
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before the distance of the control of the	
Clerk		
ADDED OF COLL	T. A marriage license having been refused to the above named parties, the partity written order issued	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF	of a marriage license to the above named parties.	
County Library the issuance (of a marriage license to the above named parties.	
in authorizes and directs the issuance of	E AND MARRIAGE CERTIFICATE	
RETURN OF MARRIAGE LICENS	E AND MARRIAGE CERTIFICATE nse issued by the clerk of the feed to be come as husband and wife authorizing the joining together as husband and wife	
Be It Remembered, there was filed in my office a married	authorizing the joining together as husband and wife	
of Indiana dated the 14 day of		
RETURN OF MARRIAGE LICENSE All the least of the following together as husband and wife of Indiana dated the day of and the following marriage certificate was filed in my office, to-wit: Be it further fremembered, the following marriage certificate was filed in my office, to-wit: And And		
Be it further fremembered, the following marriage certificate was fuel to hereby certify that on the 14th day of the day of the selection of t		
at the state of Dideant		
State of Indiana, Groom Sauce J. Frity Marion County, State of Indiana,		
one thousand nine hundred and Styling Frity of Menders County, State of Indiana, Groom Squise of Marion County, State of Indiana, Groom Squise of Marion of Marion of Marion of Menders of Menders of Marion of Marion of Menders of Marion of Mar		
were by me united in marriage as authorized		
by or orable signed		
Dated this 141/2 day of	Official Designation Justice of Peace, 1965.	
Filed and recorded in accordance with the laws of the State of Indiana this Signed Lendricks Circuit Court		
Filed and recorded in accordance with the laws of the State of Indiana this	Signed John Garabald Jak Circuit Court	
white recorded the accordance with	Handrethan	

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No.	359
File_	Book 28
-1	Date of Application

Medical Examination Report Dated 29 MALE Medical Examination Report Dated Name of Physician E | mer h 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 Middle First Name Date of Birt Previous Marital Status: Never Married Number of Previous Marriages. Previous Marital Status: Never Married Number of Previous Marriages. Death | Divorce | Annulment | Last Marriage Ended By: Death | Divorce | Annulment | Last Marriage Ended By: White Negro Other (specify). Color or Race White Negro Other (specify). Color or Race Usual Occupation Arms. US. Arms Date of birth verified by: Birth Cert. | Judicial Decree Usual Occupation Birth Cert. Judicial Decree Date of birth verified by: Other (Specify) .. Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile?
 No Yes Yes Other (Specify)... 1. Are you now or have you been adjudged, diagnosed or considered as: Of Unsound Mind? Yes 🗌 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 home for indigent persons? county asylum or No Yes An Imbecile? Of Unsound Mind? If answer to 3 is "yes" has the cause of such condition been removed? No 🗆 Yes 🗌 2. Are you under guardianship as a person of unsound mind? No 🖪 Yes 🗌 4. Are you afflicted with a transmissible disease? Yes 🗌 5. Are you related to the bride closer than second cousin? 3. Are you afflicted with a transmissible disease? No 🗂 Yes 🗌 6. Are you now under the influence of intoxicating liquor? 4. Are you related to the groom closer than second cousin? Yes 🗌 7. Are you now under the influence of a narcotic drug? 5. Are you now under the influence of intoxicating liquor? Yes 💽 No 🗆 8. Are you able to support a family? No 🗆 Yes 🖪 9. Are you likely to so continue? 6. Are you now under the influence of a narcotic drug? No 🐼 Yes 🗌 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 Residence of father (if deceased so state) Address Occupation of father teacher: Fulton Name Birthplace of father (State or foreign country). 8. Full maiden name of mother No [(b) Are you supporting or contributing to their support? Residence of mother (if deceased so state (c) Are you complying with any court order or orders issue their support? No 🗆 11. Full name of father. Birthplace of mother (State or foreign country). I depose and state the information given in this application is true and correct. State of Indiana, HENDRICKS Birthplace of father (State or foreign country).... County of .. 12. Full maiden name of mother. Residence of mother (if deceased so state). Occupation of mother Clark: New Address Birthplace of mother (State or foreign country). HENDRICKS .Circuit Court State of Indiana, HENDRICKS County of .. CONSENT OF PARENTS, PARENT OR GUARDIAN Signed. We, the parents, of this applicant hereby give consent for this marriage. If only one parent 1962 signs, state facts which render the consent of the other parent unnecessary ... Clerk 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 Signed County of Father Signed. Mother 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, theauthorizes 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 Lendricks Circuit Court of Indiana dated the 22nd day of December , 1965, authorizing the joining together as husband and wife liven R. Cassity and Rathleen M. Daniessen

Be it further remembered, the following marriage certificate was filed in my office, to-wit: 1, Edward Mc Laughlin hereby certify that on the 22 nd day of December one thousand nine hundred and 65 at Danville , County of Hendricks , Cassity of Hendricks County, State of Indiana State of Indiana, Groom Elvin R and, Bride Rathleer M. Davisson of Hendricks County, State of Indiana, 22 nd day of December 1965 Signed Edward Mc Laughlin
Official Designation Catholic Priest - Pastar Filed and recorded in accordance with the laws of the State of Indiana this 31d day of January, 19 66. Signed John Gambald Ja Clerk Desdricks Circuit Court

......Circuit Court

brook

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS County MALE Medical Examination Report Dated_ FEMALE 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 tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". FEMALE APPLICANT Date of Birth Previous Marital Status: Never Married Number of Previous Marriago Last Marriage Ended By: Death Divorce Annulment Previous Marital Status: Never Married | Number of Previous Marriages Negro Other (specify). Color or Race Last Marriage Ended By: Usual Occupation Date of birth verified by Birth Cert. Judicial Decre Other [Usual Occupation Y. 183 Other (Specify). Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Birth Cert. | Judicial Decree Of Unsound Mind? DOther (Specify). Brives 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 are lum or home for indigent persons? Yes

Yes An Imbecile? If answer to 3 is "yes" has the cause of such condition been removed? Yes 🗌 Of Unsound Mind? 4. Are you afflicted with a transmissible disease? Yes 🗆 2. Are you under guardianship as a person of unsound mind? 5. Are you related to the bride closer than second cousin? No P Yes 6. Are you now under the influence of intoxicating liquor? Yes 🗌 3. Are you afflicted with a transmissible disease? No Yes No 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? 9. Are you likely to so continue? No 🗆 10. Do you have minor children from one or more former marriages? Yes 🗆 (If yes, answer questions a, b, c)) a sep (a) List their full names, ages and addresses 7. Full name of father Address Race of father Waste Birthplace of father (State or foreign country) (b) Are you supporting or contributing to their support? (c) Are you complying with any court of their support? Yes No No 11. Full name of father..... Birthplace of mother (State or foreign country) Residence of father (if deceased so state). Race of father ... white Occupation of father ... State of Indiana, HENDRICKS Birthplace of father (State or foreign country). C. .. C. Residence of mother (if deceased so state Occupation of mother... Birthplace of mother (State or foreign co HENDRICKS State of Indiana, HENDRICKS County of 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. 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, Signed.. 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, theCourt by written order issued...... ..authorizes and directs the issuance of a marriage license to the above named parties. County.... day of December Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the ______ day of ________hereby certify that on the ______ l & Lb _____ day of ________ one thousand nine hundred and Sixty Line Berry of Hendricks

State of Indiana, Groom Willard & Berry of Hendricks

and, Bride Davin Willard & Berry of Hendricks and, Bride Paris Hubbard of Hendricks County, State of Indiana Signed Marisin W Col Dated this 18 Ih day of Alcember, 1965 Official Designation Minister Filed and recorded in accordance with the laws of the State of Indiana this Signed Sender Circuit

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

FEMALE

Date of Application

MALE Medical Examination Report Dated	Medical Examination Report Dated Walks MD.
Name of Physician Thos. M. Walker M.D.	Name of Physician
Talse state	ement—Whoever procures the issuance of a license to marry by any false statement, representa-
tion or pretense shall be liked in this	FEMALE APPLICANT
MALE APPLICANT Middle Last	Name First Middle Last
Name Crara L. Hya hes	Date of Birth Month Day Year
Date of Birth Month	Place of Birth (State or foreign country)
Place of Birth (State or breign country)	In di anapolo, In o i'am County State
Residence Address Street or R. R. City County State	Residence Address Bx 21 Brownshy, Hen. Ind.
110 Franklin, Drawishing House	Maiden Name if Different
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	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	Last Marriage Ended By.
Usual Occupation Machiner: Alligon	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Undicial Decree	Usual Occupation Typist . PSC1
Other (Specify)	Date of birth verified by: Birth Cert. Judicial Decree
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes Yes	Other (Specify)
Of Unsound Mind: 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 county a lum or No Yes \(\)	An Imbecile? Of Unsound Mind? No Yes
If answer to 3 is "yes" has the cause of such condition been removed? No Yes Yes 4. Are you afflicted with a transmissible disease?	2. Are you under guardianship as a person of unsound mind? No Yes
5. Are you related to the bride closer than second cousin?	3. Are you afflicted with a transmissible disease?
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a narcotic drug? No P Yes Yes	4. Are you related to the groom closer than second cousin?
7. Are you able to support a family?	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 No Ves	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. Evans Elay & Sackson
(a) List their full names, ages and addresses Name Age Address	Residence of father (if deceased so state)
	Occupation of father Main Levans C. 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 Opal Sean South
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state)
11. Full name of father Sillow Hughes	Occupation of mother
Residence of father (deceased so state) Port Clarton 843.	Birthplace of mother (State or foreign country)
Occupation of father achieved Race of father white	State of Indiana, HENDRICKS State of Indiana, State of India
Birthplace of father (State or foreign country)	County of HENDRICKS 88: in this application is true and correct.
12. Full maiden name of mother.	Fatricia a Jackson
Residence of mother (if deceased so state) Race of mother Race of mother	New Address
	(add 11 th . Decale les
Birthplace of mother (State or foreign country)	Subtcribed and sworp to before me that day of HENDRICKS Clerk Circuit Court
County of HENDRICKS ss: in this application is true and correct.	Clerk Court
Signed Mulf C. Williams	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 swom to before me this day of the 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, HENDRICKS ss:
State of Indiana,	County of
County of HENDRICKS	Signed Father
Signed Father Signed Mother	Signed Mother
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COL	JRT. A marriage license having been refused to the above named parties, the
	JRT. A marriage license having been refused to the above named parties, the Court by written order issued
County	Court by written order issued and filed
in authorizes and directs the issuance	Court by written order issued
in	Court by written order issued
RETURN OF MARRIAGE LICES Be It Remembered, there was filed in my office a marriage li of Indiana dated the day of delicentle	Court by written order issued and filed e of a marriage license to the above named parties. NSE AND MARRIAGE CERTIFICATE Hendricks Circuit Court court and the clerk of the court court court to the court
RETURN OF MARRIAGE LICES Be It Remembered, there was filed in my office a marriage li of Indiana dated the day of delicentle	Court by written order issued and filed e of a marriage license to the above named parties. INSE AND MARRIAGE CERTIFICATE Hendricks Circuit Court court and filed cense issued by the clerk of the Circuit Court for the Ci
RETURN OF MARRIAGE LICENTE Market and directs the issuance of Indiana dated the day of december day of the strength of Indiana dated the day of the strength of Indiana dated the day of the strength of Indiana dated the day of the strength of the strength of Indiana dated the day of the strength of the	Court by written order issued and filed e of a marriage license to the above named parties. NSE AND MARRIAGE CERTIFICATE Hendricks Circuit Court court is a suite of the solution of the solu
in authorizes and directs the issuance RETURN OF MARRIAGE LICES Be It Remembered, there was filed in my office a marriage li of Indiana dated the day of delinable Be it further remembered, the following marriage certificate was filed in m 1, Letter B. Gearrick	Court by written order issued and filed to of a marriage license to the above named parties. ISE AND MARRIAGE CERTIFICATE Hendrichs Circuit Court court is a sued by the clerk of the count is a sued by the clerk of the count is a sued by the clerk of the count is a sued by the clerk of the count is a sued by the clerk of the count is a sued by office, to-wit: the count is a sued by the c
RETURN OF MARRIAGE LICES Be It Remembered, there was filed in my office a marriage li of Indiana dated the day of december Be it further remembered, the following marriage certificate was filed in m I, Letter B. Genrick one thousand nine hundred and les	Court by written order issued
County in authorizes and directs the issuance RETURN OF MARRIAGE LICE! RETURN OF MARRIAGE LICE! Of Indiana dated the day of declinable Heights Be it further remembered, the following marriage certificate was filed in m I, Lester B. Granik one thousand nine hundred and less State of Indiana, Groom Lary L. Lughes	Court by written order issued
County in authorizes and directs the issuance RETURN OF MARRIAGE LICE Be It Remembered, there was filed in my office a marriage li of Indiana dated the day of alcenube Be it further remembered, the following marriage certificate was filed in m I, Lester B. Genrick one thousand nine hundred and less State of Indiana, Groom Lay Langues and, Bride Patricia of	Court by written order issued
in authorizes and directs the issuance RETURN OF MARRIAGE LICES Be It Remembered, there was filed in my office a marriage li of Indiana dated the day of delinable Be it further remembered, the following marriage certificate was filed in m I, bester B. Granisk one thousand nine hundred and les State of Indiana, Groom Lay Lagles and, Bride Patricia de fackson of were by me united in marriage as authorized by a marriage license issued for	Court by written order issued
RETURN OF MARRIAGE LICES Be It Remembered, there was filed in my office a marriage license issued of Indiana dated the day of described. Be it further remembered, the following marriage certificate was filed in m. I, Lester B. Granick one thousand nine hundred and be described and, Bride Patricia de Jackson of were by me united in marriage as authorized by a marriage license issued for the sum of the s	Court by written order issued
in authorizes and directs the issuance RETURN OF MARRIAGE LICES Be It Remembered, there was filed in my office a marriage li of Indiana dated the day of delinable Be it further remembered, the following marriage certificate was filed in m I, bester B. Granisk one thousand nine hundred and les State of Indiana, Groom Lay Lagles and, Bride Patricia de fackson of were by me united in marriage as authorized by a marriage license issued for	Court by written order issued
in authorizes and directs the issuance RETURN OF MARRIAGE LICES Be It Remembered, there was filed in my office a marriage li of Indiana dated the day of delinable Be it further remembered, the following marriage certificate was filed in m I, bester B. Granisk one thousand nine hundred and les State of Indiana, Groom Lay Lagles and, Bride Patricia de fackson of were by me united in marriage as authorized by a marriage license issued for	Court by written order issued
RETURN OF MARRIAGE LICES The It Remembered, there was filed in my office a marriage li of Indiana dated the day of decentible Be it further remembered, the following marriage certificate was filed in m I, Letter B. Granik one thousand nine hundred and les State of Indiana, Groom Lay Lagles and, Bride Patricia de fackson of were by me united in marriage as authorized by a marriage license issued from the county. Dated this Letter day of Selectionse, 19	Court by written order issued

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS _County MALE Medical Examination Report Dated. Date of Application FEMALE Wm. H Name of Physician_ 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, representation or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". FEMALE APPLICANT 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 Negro Other (specify) Color or Race Last Marriage Ended By: Death | Divorce | Annulment | Date of birth verified by: Birth Cert. Dr: ve Other (Specify) Are you now or have you been adjudged, diagn An Imbecile? Of Unsound Mind? Birth Cert. Judicial Decree 2. Are you under guardianship as a person of unsound mind? Other (Specify) Drivers 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: If answer to 3 is "yes" has the cause of such condition been removed? An Imbecile? No Yes No П 4. Are you afflicted with a transmissible disease? Of Unsound Mind? No Yes 5. Are you related to the bride closer than second cousin? Yes 🗆 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 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 cousin? 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? (If yes, answer questions a, b, c) No 🗆 Yes 🗆 6. Are you now under the influence of a narcotic drug? (a) List their full names, ages and addresses 7. Full name of father Soscoe Residence of father (if deceased so state) Maeresville Ind Occupation of fathe Saperis All Sa Race of father (b) Are you supporting or contributing to their support? Yes No No (c) Are you complying with any court order or orders issued for their support? Residence of mother (if deceased so state) Yes No No 11. Full name of father.... Treeman Occupation of mother towers Residence of father (if deceased so state) State of Indiana, Birthplace of father (State or fareign country) Ludiana 1018 HENDRICKS 12. Full maiden name of mother Mandacke, Marie Residence of mother (if deceased so state A Indianapolis Occupation of mother.... State of Indiana, Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN Bx 40 indpls. We, the parents, of this applicant hereby give consent for this marriage. If only one parent day of December, 19.65 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. HENDRICKS County ofFather Signed ... Subscribed and sworn to before me this......day of......Mother 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

Circuit Court

Be It Remembered, there was filed in my office a marriage license issued by the clork of the Court 1, Kussell & Rees hereby certify that on the 18th day of Becamben, one thousand nine hundred and sixtly five at Morresville County of Margan,
State of Indiana, Groom Williams H Freeman of Hendricks County, State of Indiana and, Bride Vicki a Fields of Murgan County, State of Indiana, Signed Russell & Rees Dated this 18th day of December, 1965. Official Designation Minister

Signed John Gambold go Clerk

Hendricks Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County Date of Application

......Circuit Court

MALE Medical Examination Report Dated 9 December 1965	Medical Examination Report Dated 9 December 1965 Name of Physician Cacl A. Freed M.A.
Name of Physician Art PE ANSWERED Chapter 126 Indiana Acts 1905 prescribes "False st	atement—Whoever procures the issuance of a license to marry by any false statement, representa-
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	FEMALE APPLICANT
Name First Middle Last	Name First Middle Last
Date of Birth Month Day Year	Date of Birth Month Day Tear
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 if Different
Last Marriage Ended By: Death Divorce Annument Annument	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment Annulment
Usual Occupation Salesman: Wigg (Cox City)	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Indicial Decree	Usual Occupation Asst Mari Con City
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? Of Unsound Mind? 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 county a ylum 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? 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	2. Are you under guardianship as a person of unsound mind? No Yes 3. Are you afflicted with a transmissible disease? No Yes Yes
7. Are you now under the influence of a narcotic drug? No Yes S. 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?	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) (a) List their full names, ages and addresses	6. Are you now under the influence of a narcotic drug No Yes 7. Full name of father.
Name Age Address	Residence of father (if deceased so state)
Dayman L.T. 3/2 JAK.	Occupation of father Lesson a.f. Trucks Race of father white
	Birthplace of father (State or foreign country Sauling See 1
(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
their support? 11. Full name of father. Daymon Lloy of Thurston Keeton	Occupation of mother to search Race of mother to
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country). Boulty Green Ky.
Occupation of father A. T. Race of father	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)	Signed Jannette Sue Brawn
Occupation of mother Race of mother 411-12	New Address
State of Indiana, State of Indiana, I depose and state the information given	Subscribed and sworm to before of the subscribed and sworm to be subscribed and sworm to be subscribed and sworm to be subscribed and subscri
County of HENDRICKS ss: in this application is true and correct.	Clerk Circuit Court
New Address. 335 Standard Dr. Judole.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and worn to before the the 13th day of December 1965.	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	
signs, state facts which render the consent of the other parent unnecessary	and the second state of the second state and the second second second second second second second second second
I was a second transport	State of Indiana,
State of Indiana,	County of ss:
County of Signed Section 1985	SignedFather
Signed Father Signed Mother	SignedMother
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of, 19,
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
in authorizes and directs the issuance of	f a marriage license to the above named parties
RETURN OF MARRIAGE LICENS	E AND MAPPIACE CERTIFICATE
Let Memberted, there was filed in my office a marriage licen	se issued by the clerk of the
aay of Jest with =	nd rawn (Adec 6) (see The joining together as husband and wife of the standard
the food the meg o	nece, co-wit:
The thousand title handred with	at, County of,
County.	that purpose by the Clerk of the Circuit Court of
Dated thisday of, 19	Date of the second seco
Dill I and the second s	SignedOfficial Designation
Filed and recorded in accordance with the laws of the State of Indiana this	day of

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS County MALE Medical Examination Report Dated 9 Date of Application FEMALE Name of Physician Kobst Medical Examination Report Dated 9 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 Date of Birth Place of Birth Previous Marital Status: Never Married Number of Previous Marriager Death | Divorce | Annulment | Last Marriage Ended By: Previous Marital Status: Never Married Color or Race White Negro Number of Previous Marriages Other [(specify). Last Marriage Ended By: Usual Occupation Look Death Divorce Annulment Date of birth verified by ☐ Birth Cert. ☐ Judicial Decre Color or Race White Negro | Other | (specify). Drives Other (Specify) Usual Occupation 1. Are you now or have you been adjudged, diagnosed or considered as: Birth Cer Judicial Decree Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? Drives Are you now or have you been within five (5) years an inmate of a home for indigent persons? If answer to 3 is "yes" has the cause of such condition been re An Imbecile? 4. Are you afflicted with a transmissible disease? No I 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? 6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a narcotic drug? Yes 🗌 3. Are you afflicted with a transmissible disease? No Yes Yes 🗌 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? 5. Are you now under the influence of intoxicating liquor No 🗆 10. Do you have minor children from one or more former marriages? Xes 🗆 No Yes (If yes, answer questions a, b, c) (a) List their full names, ages and addresses Address Residence of father (if deceased so state)...... Occupation of father Mant Is .. Decature. Race of father ... White 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? Yes No No Residence of mother (if deceased so state) Residence of father (if deceased so state) ... Birthplace of mother (State or foreign country) Occupation of father lab Sorger, & Bress Race of father w hite Birthplace of father (State or for ign country). State of Indiana, HENDRICKS 12. Full maiden name of mother. Residence of mother (if deceased so state) Occupation of mother.... Birthplace of mother (State or foreign country) and ampoles, in HENDRICKS ss: I depose and state the information given Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN New Addres 4805 West field We, the parents, of this applicant hereby give consent for this marriage. If only one parent 1965 HENDRICKS 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 State of Indiana, HENDRICKS County of.... Signed...Mother Subscribed and sworn to before me this......day of...... Signed 19...... 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.....County..... 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 lerk of the...... , 19 22, authorizing the joining together as husband and wife of Indiana dated the 17th Linda Sue Winningham Be it further remembered, the following marriage certificate was filed in my office, to-wit: 1, Rew Ralph P Wade hereby certify that on the 17th day of Accember one thousand nine hundred and Difty Sive Megery of Hendricks County, State of Juliana, Groom Michael Dean Diegery of Hendricks County, State of Sta and, Bride Lenda Sue Winningham 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 Mendrecks Signed Rew Ralph & Wade Dated this 17th day of December, 1965 Official Designation Pastar Dreindswood Baptist Church 20 Ih day of December , 19 4 3.

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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS ____County

FEMALE

No. 365
File Book 28
14 December 1965
Date of Application

.....Circuit Court

MALE Medical Examination Report Dated Medical Examination Report Dated Name of Physician_ cohen 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 Middle Last Previous Marital Status: Never Married Number of Previous Marriage Previous Marital Status: Never Married Number of Previous Marriages. Death Divorce Annulment Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: White Negro Other (specify) Color or Race Other [(specify). Color or Race Usual Occupation 11 UYSeryman Birth Cet. | Judicial Decree Date of birth verified by: Usual Occupation Drives Other (Specify) Birth Cert. | Judicial Decree Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile?
 Date of birth verified by: Other (Specify)... Yes 🗌 Of Unsound Mind? 1. Are you now or have you been adjudged, diagnosed or considered as: 2. Are you under guardianship as a person of unsound mind? Yes 🗌 No 🐼 3. Are you now or have you been within five (5) years an inmate of a county sylum or home for indigent persons? An Imbecile? Yes 🗌 If answer to 3 is "yes" has the cause of such condition been removed? Of Unsound Mind? Yes 🗌 4. Are you afflicted with a transmissible disease? 2. Are you under guardianship as a person of unsound mind? No Yes 5. Are you related to the bride closer than second cousin? 3. Are you afflicted with a transmissible disease? 6. Are you now under the influence of intoxicating liquor? Yes 🗌 Yes 🗌 7. Are you now under the influence of a narcotic drug? 4. Are you related to the groom closer than second cousin? No 🗆 8. Are you able to support a family? 5. Are you now under the influence of intoxicating liquor? No 🗆 9. Are you likely to so continue? 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) 7. Full name of father. (a) List their full names, ages and addresses Residence of father (if deceased so state) Address 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?
 (c) Are you complying with any court order or orders issued for their support? Yes 🗌 No 🗆 Residence of mother (if deceased so No 🗆 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. HENDRICKS County of. 12. Full maiden name of mother..... Residence of mother (if deceased so tate). Occupation of mother Prings North Birthplace of mother (State or foreign country) State of Indiana. state the information given cation is true and correct. HENDRICKS 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 .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. HENDRICKS County of Signed.. 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 County 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...... lend Ticky Circuit Court 1) ecember 19 ..., authorizing the joining together as husband and wife <u> Latricia</u>and..... Be it further remembered, the following marriage certificate was filed in my office, to-wit: 1, Warren C Robbins hereby certify that on the Sih day of Alecember, one thousand nine hundred and sifty fixe at Plainfield , County of Hendricks , Stinnett of Nendricks County, State of Judiana and, Bride Patricia You Moore of Hendricks County, State of Indiana Dated this 18 Th day of December, 19.65. Official Designation Christian Minister

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

Lies Lies Es, the

Court

f wife

APPLICATION FOR MARRIA

HENDR	ICKS File Book 28
MALE	County 15 Dece 1 vial
Medical Examination Report Dated 14 December 1965	FEMALE Date of Application
Name of Physician togo terrons M.S.	Medical Examination Report Dated & December 1965
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 presents of the control of the co	Name of Physician xxin Cohen M.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	atement—Whoever procures the issuance of a license to marry by any false statement
Total Control of the	FEMALE ADDITE
Date of Birth Day Day	Katl 1 Middle
Place of Birth (State or foreign country)	Date of Birth Month Day Year
Residence Address Street of R.R. City County State	Place of Birth (Seite or foreign country)
ream ha Tan New York	Residence Address Street of R. R. City County State
Last Marriage Ended By	Maiden Name if Different Jay many, Maintiell, New. Ind.
Annulment 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
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? 2. Are you under guardianship as a person of unsound mind? No Tyes No Tyes	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county asylum or No Yes	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 interleading Head.	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?
9. Are you likely to so continue?	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
10. Do you have minor children from one or more former marriages? No Yes	6. Are you now under the influence of intoxicating liquor? No Yes No Yes No Yes No Yes
(a) List their full names, ages and addresses Name Age	7. Full name of father. John Raymond Dynica.
Age Address	Residence of father (if deceased so state)
	Occupation of father PSC 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 Virginia Elizabeth Bar
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (indeceased so state) Than field Ind.
11. Full name of father	Occupation of mother
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country)	State of Indiana,
12. Full maiden name of mother. May cay it a Elowath Skuse	County of HENDRICKS ss: In this application is true and correct.
Residence of mother (if deceased so state)	Signed Rachler V. Duringan
Occupation of mother. Race of mother. Who is	New Address 10 W 93 Van /ack, 7.
Birthplace of mother (State or foreign country)	Subscribed and swort to before rechis day of MENDRICKS
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Clerk Circuit Court
Signed Sonard Wayne Fury	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address S 16 AV 9585 D en la KVV	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
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 ss:
State of Indiana,	County of Father
County of HENDRICKS	Mather
Signed Father Signed Mother	Signed
Subscribed and sworn to before me thisday of	Subscribed and sworn to before the tills
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	r. A marriage license having been refused to the above named parties, the
in authorizes and directs the issues	
RETURN OF MARRIAGE LICENSE Be It Remembered, there was filed in my office a marriage licens	se issued by the glerk of the Circuit Court
of Indiana databath 2 37	authorizing the joining together as husband and wife
Be it further remembered, the following narriage certificate was juct to him h	rice, to-wit: ereby certify that on the 2kth day of December, the Plainfield, County of Hendricks,
15	t Prangues Out of new York
State of Indiana Comman al Man China	County, State 9
and, Bride Rathleen V. Dunigan of Me	hat purpose by the Clerk of the Circuit Court of Mendricks
were by me united in marriage as authorized by a marriage license issued for a	
Michael 19.62.	Signed ACAMO
	oficial Designation Clergyman , 19 66.
Filed and recorded in accordance with the laws of the State of Indiana this	3 and day of fundamental fr. Clerk
and recorded in accordance with the wife of	Signed Flendricks Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

FEMALE

No. 367
File Book 28
17 December 1965
Date of Application

Medical Examination Report Dated 8 December 1965	Name of Physician Sames S. Sullivan M.D.
Name of Physician ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state of the bundred dollars (\$500.00)".	ement—Whoever procures the issuance of a license to marry by any false statement, representa-
tion or pretense shall be fined in any sum not exceeding live hundred down	FEMALE APPLICANT
Name First Middle Last	Name R First 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 Streetor R. R. City County State	Residence Address Street or R. R. City County State
R 2 BKTIA Danville, Hend. Ind.	Maiden Name if Different
Previous Marital Status: Never Married Number of Previous Marriages	Bonnie Slay Ton
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 Ser. Sta. Atlandant: Pierson	Color or Race White Negro Other (specify)
Date of birth verified by: Deirth Cert. Dudicial Decree	Usual Occupation Assembley Line: Carson Me
Other (Specify)	Date of birth verified by: Birth Cert. Judicial Decree
An Imbecile? Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes Yes Yes Yes	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county as lum 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?
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 No	3. Are you afflicted with a transmissible disease? No Yes 4. Are you related to the groom closer than second cousin? No Yes
8. Are you able to support a family?	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	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
Name Age Address	Occupation of father above Hills emerge of father white
	Birthplace of father (State or foreign country). W. Moreland, Jena.
	8. Full maiden name of mother Matte Kathryn Song
(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)
11. Full name of father Frank Olive Gann	Occupation of mother
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
Birthplace of father (State or foreign country) 12. Full maiden name of mother. Anna Filen Rale, 0	County of HENDRICKS ss: in this application is true and correct.
Residence of mother (if deceased so state) And iam 2018 112	Signed Bannie Ree
Occupation of mother Race of mother Race of mother	New Address
Birthplace of mother (State or foreign country)	Subscribed and sworn to before methis day of day of 1902.
County of HENDRICKS ss: I depose and stage the information given in this application is true and correct.	Clerk HENDRICKS Circuit Court
Signed Conord Jane	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribes and sworn to before me that day of 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, HENDRICKS ss:
State of Indiana, County of HENDRICKS 88:	County of South
County of Signed Father	SignedFather
Signed Father Signed Mother	Signed
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	RT. A marriage license having been refused to the above named parties, the
	ourt by written order issued and filed
in	
Be It Remembered, there was filed in my office a marriage lice.	nse issued by the clerk of the Circuit Court
of Indiana dated he day of December	authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate and filed in	office, to-wit:
	hereby certify that on theday of,
one thousand nine hundred and	.at County of,
State of Indiana, Groom	of County. State of
and, Brideof	County, State of
Country.	that purpose by the Clerk of the Circuit Court of
Dated thisday of, 19	Signed
	Signed
Filed and recorded in accordance with the laws of the State of Indiana this	day of, 19,

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County MALE Medical Examination Report Dated FEMALE Medical Examination Report Dated 13 Name of Physician Torres 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 tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". FEMALE APPLICANT Date of Birth Previous Marital Status: Never Married | Number of Previous Marriages. Death Divorce Annulment Divorce 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 Color or Race Date of wirth verified by: ☐ Birth Cert. ☐ Judicial Decre Other (Specify) Or; VA 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 Of Unsound Mind? 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 home for indigent persons? If answer to 3 is "yes" has the cause of such condition been removed? Of Unsound Mind? 4. Are you afflicted with a transmissible disease? 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? Yes 🗆 3. Are you afflicted with a transmissible disease? Yes 🗌 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? No 🗆 10. Do you have minor children from one or more former marriages? No 🗆 Yes 🔽 Yes 🗆 ence of a parcotic drug? (If yes, answer questions a, b, c) (a) List their full names, ages and addresses Address Birthplace of father (State or foreign country)..... No N 11. Full name of father ... Sever Scotlan Birthplace of mother (State or foreign country). Residence of father (if deceased Race of father Whate State of Indiana, Birthplace of father (State or foreign Jiamarolis, Race of mother white Occupation of mother.... Birthplace of mother (State or foreign country) Blytheville, Ark. Circuit Court State of Indiana, HENDRICKS County of ... CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent of Decarte 1965 signs, state facts which render the consent of the other parent unnecessary...... before me this. 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 County of State of Indiana, HENDRICKS County of 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.....authorizes and directs the issuance of a marriage license to the above named parties.County..... RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE of Indiana dated the 2 day of and and ara 18 Be it surther remembered, the following marriage certificate was filed in my office, to-upt: Jarah E Poberteon as husband and wife R. B. Pichard day of Disconfield hereby certify that on the 231d day of Disconfield at Danville, County of Blendricks Marian County, State of Jadiana and, Bride Sarah & Robertson of Hendricks County, State of India Signed R. B. Pickard 23 rd day of December, 19 65. County. Dated this, 19...6...6... .Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS ___County

FEMALE

	2	0	7	
No	0	0		
File_	Boo	K	28	
	18 De	cen	las	1965
1	Date of			

MALE Medical Examination Report Dated 11 December 1965	FEMALE Medical Examination Report Dated 11 December 1965
Name of Physician Day of D. Haggan 100	Name of Physician D. Haggard W.D.
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)".	tatement-Whoever procures the issuance of a license to marry by any false statement, representa-
MALE APPLICANT	FEMALE APPLICANT
Name Buddy Middle Last	Name First 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
504 Hvon Are Plaintick, Hew, lud.	Maiden Name if Different Ct, In Jps, Maian Inc
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
Usual Occupation Salas man Carties Med Sos	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	
1. Are you now or have you been adjudged, diagnosed or considered as:	Date of birth verified by: Birth Cert. Sudicial Decree
An Imbecile? Of Unsound Mind? No Yes Yes	Other (Specify) 1 X X 8 6 C
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:
No Yes	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 Yes 	2. Are you under guardianship as a person of unsound mind? No Yes 3. Are you afflicted with a transmissible disease? No Yes No Yes
7. Are you now under the influence of a narcotic drug? No 🖸 Yes 🗆	3. Are you afflicted with a transmissible disease? No ✓ Yes ☐ 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 V 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? Now Yes
(a) List their full names, ages and addresses	7. Full name of father Robert Charles Dooley
Name Age Address	Residence of father (if deceased so state) 14 1 anapolis ly
	Occupation of father Seman 11 Son Race of father White
	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 Tricie Lee Griffith
Yes No	Residence of mother (if deceased so state) anazolis, hud
11. Full name of father \(\lambda \) \(\lamb	Occupation of mother tayler To Race of mother white
Occupation of father 1.2 tal Fingly Charace of father white	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country) Buy Ksvile KM	State of Indiana,
12. Full maiden name of mother Sotta Ann OFF	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)	Signed Linda A. Dooley
Occupation of mother Louse wite. Race of mother white	New Address
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this A A & th day of December, 19 65
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	HENDRICKS Circuit Court
Signed Si	Circuit Court
New Address	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of Jecem St., 19 6	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	
signs, state facts which render the consent of the other parent unnecessary	
f)	State of Indiana,
State of Indiana, County of HENDRICKS	County of HENDRICKS ss:
Signed James Harris	SignedFather
Signed Mother Mother	Signed
Subscribed and sworn to before me this 18 day of Deg 200 1905	Subscribed and sworn to before me thisday of
Clerk	Clark
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURS	Γ. A marriage license having been refused to the above named parties, the
	IPT by myitton and a ' I
nauthorizes and directs the issuance of	and filed a marriage license to the above pared portion
RETURN OF MARRIAGE LICENSE	AND MADDY OF
and fitted in my office a marriage licens	se issued by the clock of the
i de la	10 10 2
se it further remembered the following marriage certificate was fled in	a comment of a world
ne thousand nine hundred and 45	t Plainfield, County of Hendricks,
nd Pride of Indiana, Groom Duddy R. Harris	f Hendricks County of Hendricks,
vere by me united in married of M	arian County, State of Indiana,
ounty.	at purpose by the Clerk of the Circuit Court of
Pated this 24 day of Alexander, 1965	
	Signed Commer C. Charles
iled and recorded in accordance with the laws of the State of Indiana di	
iled and recorded in accordance with the laws of the State of Indiana this	day of January , 19 66.

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County MALE Medical Examination Report Dated. FEMALE 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, representa-FEMALE APPLICANT Date of Birth ancook Previous Marital Status: Never Married Number of Previous Marriages Last Marriage Ended By: Death | Divorce | Annulment | Previous Marital Status: Never Married V Number of Previous Marriages White Negro Other (specify)... Color or Race Last Marriage Ended By: Death Divorce Annulment Usual Occupation Date of birth verified by:

Birth Cert.

Judicial Decree Color or Race 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? Other (Specify)... No 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? No 🗆 Yes 🗌 4. Are you afflicted with a transmissible disease? Of Unsound Mind? No Yes No ID 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 🗆 Yes 🗆 6. Are you now under the influence of intoxicating liquor? No D 3. Are you afflicted with a transmissible disease? Yes 🗆 7. Are you now under the influence of a narcotic drug? Yes 🗆 Yes 🗌 4. Are you related to the groom closer than second cousin? 8. Are you able to support a family? No 🗆 Yes 🗆 9. Are you likely to so continue? 5. Are you now under the influence of intoxicating liquor? Yes T No 🗆 10. Do you have minor children from one or more former marriages? Yes 🗆 Yes 🗌 (If yes, answer questions a, b, c) No Yes (a) List their full names, ages and addresses Residence of father (if deceased so state) Indianapolis Ind Occupation of father Quine Aco Oil Birthplace of father (State or foreign country)... (b) Are you supporting or contributing to their support? Yes 🗆 No П (c) Are you complying with any court order or orders their support? Yes 🗌 No 🗀 aulor Occupation of mother Towers Residence of father (if deceased so state). Birthplace of mother (State or foreign country) ... Occupation of father Fact S. 7. . Hol State of Indiana, Birthplace of father (State or foreign country). HENDRICKS 12. Full maiden name of mother Kuth Residence of mother (if deceased so state) Occupation of mother Clark Birthplace of mother (State or foreign country) State of Indiana, HENDRICKS County of .. CONSENT OF PARENTS, PARENT OR GUARDIAN New Address 310 Unin Apts We, the parents, of this applicant hereby give consent for this marriage. If only one parent day of December Subscribed signs, state facts which render the consent of the other parent unnecessary. 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, 88: HENDRICKS County of State of Indiana, HENDRICKS County of.... ...Father .. Mother Subscribed and sworn to before me this ... Signed.... .. 19...... 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, theauthorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE We It Remembered, there was filed in my office a marriage license issued by the clerk of the Mendrecks Circuit Court day of _______, 1965 , authorizing the joining together as husband and wife Be it further remembered, the following marriage certificate was filed in my office, to-with I Russell B Stained hereby certify that on the 26 th day of Accepted at It, Paul's Church, country of Marion, State of Indiana, Groom Stepler Pohert Hansack of Handricks County, State of Indiana and, Bride Peggy Lee Harness of Marian 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 Court of Practical County. Signed Russell B Staines December , 19 65. County. Official Designation Restay, St. Paul's Church Dated this Filed and recorded in accordance with the laws of the State of Indiana this.....311Clerk Gambalde, Ju Circuit Court Signed ..

Hendricks

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

File Dook 28

Date of Application

MALE
Medical Examination Report Dated 8 December 1965

Name of Physician David B. Haggard MD

Name of Physician David B. Haggard MD

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 ZImore Date of Birth 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 Last Marriage Ended By Death | Divorce | Annulment | Negro | Other | Usual Occupation Other | heeper. Color or Race White line 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 Other (Specify) .. Of Unsound Mind? 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 home for indigent persons? Yes [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? 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 It 3. Are you afflicted with a transmissible disease? 6. Are you now under the influence of intoxicating liquor? Yes 🗌 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 🗆 5. Are you now under the influence of intoxicating liquor? 9. Are you likely to so continue? No 🗆 10. Do you have minor children from one or more former marriages? No 🗆 Yes 🗌 6. Are you now under the ufluence of a farcotic drug (If yes, answer questions a. b. c) (a) List their full names, ages and addresses Address Age Residence of father (if deceased Occupation of father. Is the Sales Birthplace of father (State or foreign (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 decessed so state) No 🗆 Yes 🗌 Occupation of mother Winds 11. Full name of father 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).... HENDRICKS County of. 12. Full maiden name of mother.... Residence of mother (if deceased so state)..... Occupation of mother Ashier Sead and Race of mother W 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 HENDRICKS County of Circuit Court allen CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent Clerk HENDRICKS 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 State of Indiana, County of .. HENDRICKS County of..... .. Father Father Mother 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 plerk of the the the control Circuit Court .., 19. authorizing the joining together as husband and wife Be it further remembered, the following marriage certificate was filed in my office, to-wit: Yatricia Ann Wilson I, & George Hastetler hereby certify that on the first one thousand nine hundred and sufty - six at Chapel Hill methodist Church country of Marian State of Indiana, Groom RAGEL Hendricks County, State of Indiana and, Bride Patricia and Wilson of Hendricks 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 Court of Menderales Dated this JA Official Designation Mind Filed and recorded in accordance with the laws of the State of Indiana this. O.L.

.....Circuit Court

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS County MALE O Decambrighs Medical Examination Report Dated. Date of Application FEMALE Medical Examination Peport Dated 14 Dece Em 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 Previous Marital Status: Never Married Number of Previous Marriages Death Divorce Annulment Last Marriage Ended By: Previous Marital Status: Never Married Number of Previous Marriages. White Negro Other Color or Race Last Marriage Ended By Death Divorce Annulment Color or Race Negro Other (specify) ستدهسه Other (Specify) .. 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). 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 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? No 🗆 4. Are you afflicted with a transmissible disease? Yes 🗌 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? Yes 🗌 6. Are you now under the influence of intoxicating liquor? Yes 🗌 No P 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? Yes 🗆 No 🗆 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 🗌 6. Are you now under the influence of a narcotic No Yes (If yes, answer questions a, b, c) (a) List their full names, ages and address Address Occupation of father A Time Land Birthplace of father (State or foreign country) (b) Are you supporting or contributing to their support? Yes No No (c) Are you complying with any court order or orders issued for their support? Yes 🗆 No 🗆 Occupation of mother leacher : Y: Hal 11. Full name of father. Birthplace of mother (State or foreign country) Wilkinson Residence of father (if deceased so state). Race of father wh Occupation of father ... State of Indiana, Birthplace of father (State or foreign country). Maxine Wills 12. Full maiden name of mother. Residence of mother (if deceased so state).... Occupation of mother Alithes Swa December 1060 Birthplace of mother (State or foreign country) HENDRICKS State of Indiana, Circuit Court HENDRICKS County of CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent hed and sworn to before me his acts 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. Signed... HENDRICKS County of Subscribed and sworn to before me this ... Subscribed and sworn to before me this .. IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the Crowt Court by written order issued 23 Deep 1965 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..... 19 6 3, authorizing the joining together as husband and wife Be it further remembered, the following marriage certificate was filed in my office, to-wit: 1, Homas R Stratter at Pittehus, County of Hendricks State of Indiana, Groom L. Rahert Carter of Wendricks County, State of Indiana and, Bride Martha J. Winkelmann of Hendricks 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 Court of Alaskan County. Signed Mornas R. Stratton Dated this 23 nd day of Disconder , 19 65 Official Designation minister Filed and recorded in accordance with the laws of the State of Indiana this 3.4.0 day of

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

	777	
No	<u> </u>	
File	Book 28	
2	3 December 19	65
	Date of Application	

MALE We died Examination Papart Dated Decamber 1965	FEMALE Medical Examination Report Dated 2 20 eccurle 1965
Name of Physician Geo A. Rice M.C. USNR	Name of Physician R.W. Kirtley M.D.
Name of Thysician.	tement—Whoever procures the issuance of a license to marry by any false statement, representa-
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00).	FEMALE APPLICANT
Name First Middle Last	Name First 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 of R. R. City County State
2Mar Div Has 3-6 (and bedone, Onslow, N.C.	Maiden Name if Different
Previous Marital Status: Never Married Number of Previous Marriages	No. 11 a Charles Name of Decision Manager
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 ES: U.S.M.C.	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Secretary . CI.A.
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 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 Yes	Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes \(\) Yes \(\)
5. Are you related to the bride closer than second cousin? No Yes 6. Are you now under the influence of intoxicating liquor? No Yes Yes	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 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? No Yes No
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	6. Are you now under the influence of a narcotic drug No Yes
Name Age Address	Residence of father (if deceased so state)
	Occupation of father sol maker 1. H. Rice of father was te
	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 Day of the Residence of mother (M. deceased so state)
their support? Robert Perty Lindsey	Occupation of mother
Residence of father (if deceased so state). Chese Residence of father (if deceased so state).	Birthplace of mother (State or foreign country) May an (0.) 11.
Occupation of father. Crush San Bace of father. Whate.	Total little and a second of the second of t
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS Ses: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother. Pane Winited Joyce Residence of mother (if teceased so state) A hese reake Va.	Signed Phyllis Das Universaur
Occupation of mother Rage of mother W. A. T.	New Address Same
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this 11.27 day of Decale, 1965
State of Indiana, County of HENDRICKS I depose and state the information given in this application is true and correct.	Clerk HENDRICKS Circuit Court
Signed John Dindslip	The second secon
New Address 301 Towards Rd E. Characke	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 his	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, Country of HENDRICKS }ss:	County of Ss:
County of Signed Father	SignedFather
Signed Mother	Signed
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of
COMPLETE III MADDIAGE TAGENTAL	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
inauthorizes and directs the issuance o	urt by written order issued and filed f a marriage license to the above named parties
	E AND MARRIAGE CERTIFICATE
The DI Remembered, there was filed in my office a marriage licen	as issued by the state of the s
of Indiana dated the day of December	authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my o	ffice to-wit.
one thousand nine hundred and 62	hereby certify that on the 29 Add day of December,
one thousand nine hundred and 65 State of Indiana, Groom Robert P. Lindson	
of A	Sendreck of
County	that purpose by the Clerk of the Circuit Court of the Charles
Dated this 26th day of December , 19 60	
	Signed Nallace Jeffs
Filed and recorded in accordance with the laws of the State of Indiana this	Otheral Deparametican The No.
o, mauna ms	Signed Jada Gamsald Ja Clerk
	Beadricks Circuit Court

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County MALE Medical Examination Report Dated 20 December 1965 Date of Application FEMALE Medical Examination Report Dated 20 Name of Physician James Sulfiran 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 Date of Birth Date of Birt Previous Marital Status: Never Married Number of Previous Marriages Death | Divorce | Annulment | Previous Marital Status: Never Married Number of Previous Marriages. White Negro | Other | (specify). Color or Race Last Marriage Ended By: Death ☐ Divorce ☐ Annulment ☐ Usual Occupation Color or Race Date of birth verified by Negro 🗆 Birth C Other [(specify) Other (Specify). Usual Occupation Are you now or have you been adjudged, diagnos An Imbecile? ed or considered as: Date of birth verified by: Birth Cel Judicial Decree Of Unsound Mind? 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: 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? No 🗆 Yes 🗆 Of Unsound Mind? 4. Are you afflicted with a transmissible disease? Yes 🗌 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? No W Yes Yes 🗆 6. Are you now under the influence of intoxicating liquor? No 🖭 Yes 🗌 3. Are you afflicted with a transmissible disease? Yes 🗆 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? Yes 🗌 No 🗆 9. Are you likely to so continue? 5. Are you now under the influence of intoxicating liquor? 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 drug? No Yes (If yes, answer questions a, b, c) (a) List their full names, ages and addresses 7. Full name of father _____ dames Name Address Age Residence of father (if deceased so state).. Occupation of father USA, Birthplace of father (State or foreign country)... (b) Are you supporting of contributing to their support? Yes 🗆 No 🗆 (c) Are you complying with any their support? Yes 🗌 No 🗆 Occupation of mother Mach. Opr: W.E. Race of mother W ht Te 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, Birthplace of father (State or foreign country). HENDRICKS Residence of mother (if de Occupation of mother Birthplace of mother (State or foreign country) .. HENDRICKS State of Indiana, .Circuit Court HENDRICKS County of .. CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent New Address - bre 1965 signs, state facts which render the consent of the other pare HENDRICKS ... Circuit Court xorents 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, HENDRICKS County of ... Father Signed. Mother 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 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 Andricks Circuit Court lated the 27 day of December 27 day of December 27 RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE of Indiana dated the Be it further remembered, the following marriage certificate was filed in my office, to-with ... hereby certify that on the Stl, County of Hendricks at Plainfield Parrett of Hendricks County, State of Indiana County, State of Indiana), one thousand nine hundred and 6.6 State of Indiana, Groom Charles were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of Sendric December , 19 65 County. Official Designation Plainfield Baptist Dated this.Clerk Filed and recorded in accordance with the laws of the State of Indiana thisCircuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS ___County

FEMALE

No. 375
File Book 28
24 December 1965
Date of Application

Medical Examination Report Dated 23 December 1968 Name of Physician 14 alter MS Manna MD	Name of Physician Walter Me Mannis M.D.
PARTING OL I HYBECAMAL CO.	
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False stattion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	FEMALE APPLICANT
MALE APPLICANT	Name First Middle Last
Name Luther Evalue Zorman	Date of Birth Day Year
Date of Birth Month ay Year	January 23 1991
Place of Birth (State or foreign country)	Quincy III.
Residence Address Street or R. R. City County State	Residence Address Street of R. R. tennial Marian Ind.
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different
	Previous Marital Status: Never Married Number of Previous Marriages
Last marriage boost by	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	Color or Page White Negro Other (specify)
Usual Occupation Sock Boy : Kroger .	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert Judicial Decre	Usual Occupation 14755. Wallace Exp. 7 Wlack.
1. Are you now or have you been adjudged, diagnosed or considered as: No Yes	Date of birth verified by: Birth Cert. Judicial Decree
Of Unsound Mind? 2. Are you under guardianahip 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 county your 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 W Yes Yes Yes
5. Are you related to the bride closer than second cousin? No D Yes	2. Are you under guardianship as a person of unsound mind? No Yes 3. Are you afflicted with a transmissible disease? No Yes
8. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a narcotic drug? No Yes	4. Are you related to the groom closer than second cousin?
S. Are you able to support a family?	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 Yes	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 Clarence S. Sans.
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Wuck State of foreign county Ver Sail
	8. Full maiden name of mother Lillian Hamilton
(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 Quincy, I)
their support!	Occupation of mother Woulden Race of mother the
Residence of father (if deceased so state). Avon, lad;	Birthplace of mother (State or foreign country) Mt. Stelling, III-
Occupation of father Gramo Opi. Elec Stacke of fatherwhite	The second secon
Birthplace of father (State or foreign country) Many autour Ind	State of Indiana, HENDRICKS Ss: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Mary Plane Equiped	Signed Cheryle Daws
Occupation of mother (If deceled so state) Plaintiels, the	New Address A Same
Birthplace of mother (State or foreign country) Samborn, Ind.	Specification and aware to before the 24th day of Decomby, 1960
State of Indiana, HENDRICKS an : I depose and state the information given in this application is true and correct.	Clerk HENDRICKS Circuit Court
Brond Luther E ugene Sorman	
Noy Address 322 S. Whicher Indy's, Ind.	CONSENT OF PARENTS, PARENT OR GUARDIAN
word typefore m (MRAth day of December, 10 60)	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
ARENTS, PARENT OR GUARDIAN of this applicant hereby give consent for this marriage. If only one parent	
which render the consent of the other parent unnecessary.	
Fathers notorized consent	
atheber.	State of Indiana, County of HENDRICKS
HENDRICKS 881	Signed Father
Signed , Father	Signed Mother
some Margadese Barman Mother	Subscribed and sworn to before me thisday of, 19
orn to before me this	Clerk
	RT. A marriage license having been refused to the above named parties, the
	Court by written order issued
	SE AND MARRIAGE CERTIFICATE
Be It Remembered, there was filed in my office a marriage lice	
of Indiana dated the 28th day of Dacom's	, 19 authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my	office, to-wit: Chery Ann Dents.
1. Downed Fr. Bur	hereby certify that on the 31st day of Desember
one thousand nine hundred and 65	at Speedway City , Country of Marian,
State of Indiana, Groom Lettell tugere frames	of Maria County, State of Indiana
were by me united in marriage as authorized by a marriage license issued fo	Marian County, State of Indiana,
County.	
Dated this 3/ sit day of December, 10 h	Signed Downed Jr. Beer
	Official Designation Physical
Filed and recorded in accordance with the laws of the State of Indiana this	Find day of January 19 66.

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

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

MALE	County
Medical Examination Report Dated 28 December 65	FEMALE Date of Application
Name of Physician W.W. Ait Ke.	Medical Examination Report Dated 7 9
ALL QUESTIONS MUST BE ANSWERED CO.	Name of Physician Of M. December 1965
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 Nirst Middle	Mysician IVI A:THA M.D.
MALE APPLICANT	tement—Whoever procures the issuance of a license to marry by any false et the
Name Nirst Middle	Distance statement, representa-
Date of Birth Month	Name C First First
Sanuar 31	Date of Birth Month
Place of Birth (State or foreign country)	Day Year
Residence Address Street or R. R.	Place of Birth (State or foreign country)
3x 432 138 Indels 31 160my State	Residence Address Street & West Va.
Previous Marital Status: Never Married Number of Previous Marriages	City County State
	Maiden Name if Different Wav Negaw, Lake, III.
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Jan 1 118 Commission of the Co
	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation leacher: Sans Tech Inct.	Color or Race White Name C City
Date of birth verified by: Birth Cert. Judicial Decree	Other (specify)
Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation
No. Ch. N. C.	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	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:
If answer to 3 is "yes" has the cause of such condition have	An Imbecile?
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?
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? 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 infoxicating liquor?
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?
(a) List their full names, ages and addresses	7. Full name of father Agold R. King
Name Age Address	Residence of father (if deceased so state)
Hedrick Lynn Dr. S 8113 Flow Hill Rd R	Occupation of father Electrician Ragnof father white
Kenneth Wayne 2	Birthplace of father (State or foreign country) Blue Sicil. W. Va.
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother. Wadd 4
(c) Are you complying with any court order of orders issued for their support? Yes \(\superscript{No.}\)	Residence of mother (if deceased so state)
11. Full name of father Sohn = 1 tagerald Buttes	Occupation of mother Race of mother Race of mother
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country locks buy, Wila
Occupation of father	
Birthplace of father (State or fareign country)	State of Indiana, HENDRICKS Sa: I depose and state the information given in this application is true and correct.
LI William Tra het	County of
SO. MY	Signed Sherry L. King
Residence of mother (if deceased so state)	Jane.
Occupation of mother Secol Rept. Alconace of mother White	New Address.
Birthplace of mother (State or foreign country)	Subscribed and sworn before ne man day of HENDRICKS
State of Indiana, Country of HENDRICKS Ses: I depose and state the information given in this application is true and correct.	Clerk Circuit Court
County of County	
Signed Signed ASS 1 1 10 141	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 before me tas day of day of supplication of the supplication of t	signs, state facts which render the consent of the other parent unnecessary
Clerk HENDRICKS Circuit Court	signs, scare races
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	
	Co. A. of Indiana
	State of Indiana, HENDRICKS
State of Indiana,	County ofFather
County of HENDRICKS	Signed
Signed Father	Signed
Signed Mother	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me thisday of	Clerk
Clerk	
1	1 - die the
OPPER OF COUR	T. A marriage license having been refused to the above named parties, 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	T. A marriage license having been refused to the above named parties, the urt by written order issued
County County I limete the issuance of	f a marriage license to the above named parties.
inauthorizes and directs the issuance o	f a marriage license to the above named parties.
inauthorizes and directs the issuance o	f a marriage license to the above named parties.
in authorizes and directs the issuance o RETURN OF MARRIAGE LICENSI Be It Remembered, there was filed in my office a marriage licen	f a marriage license to the above named parties.
The It Remembered, there was filed in my office a marriage licent day of a	f a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE se issued by the clerk of the
The It Remembered, there was filed in my office a marriage licent day of a	f a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE se issued by the clerk of the
The It Remembered, there was filed in my office a marriage licen of Indiana dated the day of Be it further remembered, the following marriage certificate was filed in my of the day of Be it further remembered, the following marriage certificate was filed in my of the day of Be it further remembered, the following marriage certificate was filed in my of the day of Be it further remembered, the following marriage certificate was filed in my of the day of Be it further remembered, the following marriage certificate was filed in my of the day of Be it further remembered, the following marriage certificate was filed in my of the day of Be it further remembered, the following marriage certificate was filed in my of the day of Be it further remembered, the following marriage certificate was filed in my of the day of Be it further remembered, the following marriage certificate was filed in my of the day of Be it further remembered, the following marriage certificate was filed in my of the day of Be it further remembered, the following marriage certificate was filed in my of the day of Be it further remembered, the following marriage certificate was filed in my of the day of Be it further remembered, the following marriage certificate was filed in my of the day of Be it further remembered.	E AND MARRIAGE CERTIFICATE se issued by the clerk of the
The It Remembered, there was filed in my office a marriage licen day of the interpretation of Indiana dated the day of the interpretation of Indiana dated the day of the interpretation of Indiana dated the day of the following marriage certificate was filed in my of the interpretation of Indiana dated the day of the following marriage certificate was filed in my of the interpretation of Indiana dated the day of the following marriage certificate was filed in my of the interpretation of Indiana dated the day of the interpretation of Indiana dated the day of the indiana dated the day of the interpretation of Indiana dated the day of the interpretation of Indiana dated the day of the indiana day of	f a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE se issued by the clerk of the
County authorizes and directs the issuance of RETURN OF MARRIAGE LICENSI of Indiana dated the day of Be it further remembered, the following marriage certificate was filed in my of the day of I, A Butts	E AND MARRIAGE CERTIFICATE se issued by the clerk of the
County authorizes and directs the issuance of RETURN OF MARRIAGE LICENSI of Indiana dated the day of Be it further remembered, the following marriage certificate was filed in my of the day of I, A Butts	E AND MARRIAGE CERTIFICATE se issued by the clerk of the
County authorizes and directs the issuance of RETURN OF MARRIAGE LICENSI of Indiana dated the day of Be it further remembered, the following marriage certificate was filed in my of the day of I, A Butts	E AND MARRIAGE CERTIFICATE 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 Be it further remembered, the following marriage certificate was filed in my of I, A B LACKARD DULLES State of Indiana, Groom Aldlick Dulls of and, Bride Ally of the marriage license issued for were here as a sutherized by a marriage license issued for the sum of the marriage license issued for the marriage license issued for the sum of the marriage license issued for the marriage l	E AND MARRIAGE CERTIFICATE se issued by the clerk of the 19. authorizing the joining together as husband and wife mid. ffice, to-wit: hereby certify that on the 3/st day of Scandicks at Manuelle County, State of Manuelle of Lendicks County, State of Manuelle that purpose by the Clerk of the Circuit Court of
Be it further remembered, the following marriage certificate was filed in my of one thousand nine hundred and State of Indiana, Groom Aldlied During and Bride. State of Indiana, Groom Aldlied During and Groom Al	E AND MARRIAGE CERTIFICATE se issued by the clerk of the 19. authorizing the joining together as husband and wife mid. ffice, to-wit: hereby certify that on the 3/st day of Scapella at Manuelle County, State of formula of the Circuit Court of Sendices that purpose by the Clerk of the Circuit Court of Sendices Signed R B Rickard Signed
Be It Remembered, there was filed in my office a marriage licens of Indiana dated the day of Be it further remembered, the following marriage certificate was filed in my of it. State of Indiana, Groom Aldelisk State of Indiana, Groom	E AND MARRIAGE CERTIFICATE se issued by the clerk of the 19. authorizing the joining together as husband and wife mid. ffice, to-wit: hereby certify that on the 3/2t day of Alexander at Amuelle County, State of Indiana County, State of Indiana County, State of Indiana That purpose by the Clerk of the Circuit Court of Signed P B Pickard Official Designation Justice of Indiana Official Designa
Be It Remembered, there was filed in my office a marriage licens of Indiana dated the day of Be it further remembered, the following marriage certificate was filed in my of I, Button State of Indiana, Groom Aldelick Button of and, Bride State of marriage as authorized by a marriage license issued for were by me united in marriage as authorized by a marriage license issued for County. Dated this Sot day of Section 19 6.	E AND MARRIAGE CERTIFICATE se issued by the clerk of the 19. authorizing the joining together as husband and wife mid. ffice, to-wit: hereby certify that on the 3/2t day of Alexander at Amuelle County, State of Indiana County, State of Indiana County, State of Indiana That purpose by the Clerk of the Circuit Court of Signed P B Pickard Official Designation Justice of Indiana Official Designa
The It Remembered, there was filed in my office a marriage licene of Indiana dated the day of the following marriage certificate was filed in my of it. State of Indiana, Groom Aldelisk State of Indiana, Groom Indian	E AND MARRIAGE CERTIFICATE se issued by the clerk of the

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

File

HENDRICKS _County FEMALE

Official Designation Justice of the flace

Signed Jahr Sambald It Clerk

Date of Application Medical Examination Report Dated 29 MALE Medical Examination Report Dated 29 Dec 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)". FEMALE APPLICANT MALE APPLICANT Middle First Maiden Name if Different Previous Marital Status: Never Married
Number of Previous Marriages. Previous Marital Status: Never Married

Number of Previous Marriages. Annulment [Death Divorce D Last Marriage Ended By: Last Marriage Engl By: Divorce Annulment White Negro Other (specify). Color or Race Negro □ Other □ (specify). Color or Race Birth Cert. | Judicial Decree Date of birth verified by: Usual Occupation 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 🗆 Other (Specify) Of Unsound Mind? 1. Are you now or have you been adjudged, diagnosed or considered as: 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? An Imbecile? Of Unsound Mind? If answer to 3 is "yes" has the cause of such condition been removed? No 🗆 Yes 🗌 Yes 🗌 No 🗹 2. Are you under guardianship as a person of unsound mind? 4. Are you afflicted with a transmissible disease? No Yes 5. Are you related to the bride closer than second cousin? 3. Are you afflicted with a transmissible disease? No Yes \ 6. Are you now under the influence of intoxicating liquor? No Yes No 4. Are you related to the groom closer than second cousin? 7. Are you now under the influence of a narcotic drug? 5. Are you now under the influence of intoxicating liquor? 8. Are you able to support a family? No 🗆 Yes F 9. Are you likely to so continue? 6. Are you now under the influence of a narcoti Yes 🗆 10. Do you have minor children from one or more former marriages? 7. Full name of father Kobe T (If yes, answer questions a, b, c) (a) List their full names, ages and addresses Residence of father (if deceased so state). Address Name Birthplace of father (State or for 8. Full maiden name of mother..... (b) Are you supporting or contributing to their support? No I Yes 🗌 (c) Are you complying with any court order or orders issued for their support? Yes 🗌 No 🗆 Occupation of mother.... 11. Full name of father .. Birthplace of mother (State or foreign country) Residence of father (if deceased so state) Occupation of father Sytche: I depose and state the information given in this application is true and correct. State of Indiana, HENDRICKS Birthplace of father (State or foreign country) County of .. 12. Full maiden name of mother. Residence of mother (fi deceased so state) Occupation of mother..... Birthplace of mother (State or foreign country)... HENDRICKS State of Indiana, Circuit Court HENDRICKS County of .. CONSENT OF PARENTS, PARENT OR GUARDIAN lexab 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, 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 end - County County Court by written order issued 20 December 1965 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... of Indiana datedythe..... 30th, 190 and authorizing the joining together as husband and wife Be it further remembered, the following marriage certificate was filed in my office, to-wit: Danet Sue Conner hereby certify that on the 31st day of Desember Ca. agnew at Mandattan, County of Putnam, one thousand nine hundred and 65 State of Indiana, Groom Larry & Fartling of Skadricks County, State of Indiana of Maxian County, State of Indiana County. Dated this 3/st Signed

Filed and recorded in accordance with the laws of the State of Indiana this 312 day of Assistic 19 46.

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 1 Date of Application FEMALE Un einem 2M stlalu 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, representa Middle FEMALE APPLICANT Middle 1948 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). Color or Race Last Marriage Ended By: Death | Divorce | Annulment | C. Tucker 7 6 Color or Race Negro □ Other □ (specify) Birth Cert. | Judicial Decree Other (Specify). Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile?
 Of Unsound Mind? Other (Specify) .. 2. Are you under guardianship as a person of unsound mind? 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? No Yes If answer to 3 is "yes" has the cause of such condition been removed? No 🗆 Yes 🗌 Of Unsound Mind? No [9 Yes [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? No D Yes 🗆 No Yes 6. Are you now under the influence of intoxicating liquor? 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? Yes 🗆 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 Age 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?
 (c) Are you complying with any court order or orders issued for their support? Yes 🗆 No 🗆 Residence of mother (if deceased so star) ... Yes No No Occupation of mother. Birthplace of mother (State or foreign country) Residence of father (if deceased so state). Occupation of father. State of Indiana, Birthplace of father (State or foreign country) Winster HENDRICKS County of 12. Full maiden name of mother. Dorothy Chrystine 1 Residence of mother (if deceased so state Occupation of mother. Birthplace of mother (State or foreign country) State of Indiana, and state the information given .. Circuit Court 12/29/65 CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only worn to before this. Subscribed and .. Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent State of Indiana, HENDRICKS County of. State of Indiana, HENDRICKS County of .. .Father Signed. COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named part Court by written order issued... ...authorizes and directs the issuance of a marriage license to the above named parties.County.... RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE 3c Ka Circuit Court Be It Remembered, there was filed in my office a marriage license issued by the flesh of the authorizing the bining together as Pebecca of Indiana dated the Lycker Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the... New Donald one thousand nine hundred and .County, State of State of Indiana, Groom. 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. Signed Dated this. Official Designation.

Signed.

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

HENDRI	CKS County File Sock 28
MALE Medical Examination Report Dated	Decembr 1965
Name of Physician Walts ANS AN	FEMALE Medical Examination Report Dated 9 Decade 196
I M SIMMPLY	Name of Physician The State Second 1965
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	atement—Whoever procures the
Name First MALE APPLICANT	produces the issuance of a license to marry by any false statement, representa-
Dohn Stere Tiest	Name First First
Place of Birth (State or foreign country) Place of Birth (State or foreign country)	Date of Birth Month Last Harris
Residence Address Street R R	Place of Birth (State or foreign country) Day Year 1948
330 E. Thanks County State	Residence Address Styles In J.
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 Truck Mante a si DOT K. A.	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 Sob Training: Good will
Of Unsound Mind?	Date of birth verified by: Birth Cert. Jan Jack al Decree
2. Are you under guardianship as a person of unsound mind? No Yes \ Yes \ No Yes \ Yes \ home for indigent persons?	Other (Specify) 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 has	An Imbecile?
4. Are you afflicted with a transmissible disease?	Of Unsound Mind?
5. Are you related to the bride closer than second cousin? No Yes 6. Are you now under the influence of intoxicating liquor? No Yes Yes	Are you under guardianship as a person of unsound mind? No Yes No P Y
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? (If yes, answer questions a, b, c) (a) List their full somes and allowed.	6. Are you now under the influence of a narcolic drug?
(a) List their full names, ages and addresses Name Age Address	7. Full name of father.
	Residence of father (if deceased so state) 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 Iris Wanieta Muzdell
(c) Are you complying with any court order or orders issued for their support? Yes \(\subseteq \text{No} \subseteq \)	Residence of mother (if deceased so step)
11. Full name of father John Day Lycks	Occupation of mother. Race of mother.
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country)	State of Indiana, HENDRICKS I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Dorothy Christine Hagston	County of A
Residence of mother (indeceased so state)	Signed Turces fune Harris
Occupation of mother. Race of mother. Race of mother.	New Address
Birthplace of mother (State or foreign country)	Subscribed and aworn of before me this day of HENDRICKS
County of HENDRICKS State of Indiana, I depose and state the information given this application is true and correct.	Clerk Circuit Court
Simul I Am, Stoul 1 - Sei	12/29/65
Subscribed	12/27/2
Substitute of the substitute o	and for
CONSENT This W Harris	hereby give my consent for
We, the par WE X, Eugene and Iris W. Harris	_to
Rebecca June n	arris
	Ti . Isia W. Harri
State of Indi marry John S. Tucker	Classes to
County of	this 29th day of Dec. 1965
Subscribed and sworn to before me	this zyth
Subscribed and Sworised and Swo	We to Delleff
	Notary Public
COMPLET	VA 33
My commission expires 11/16/67.	
III	E AND MARRIAGE CERTIFICATE
RETURN OF MARRIAGE LICENSE Be It Remembered, there was filed in my office a marriage license	se issued by the elefk of the
Be It Remembered, Here was filed in my office to many of	19 authorizing the joining together Harris
Indiana dated the	
Be it further remembered, the following marriage certificate was filed in my of	nereby cestify that on the day of fordsulky
1 Kein Jana and Ville	Country of Styleston
1. 4	The Monday of the day of
one thousand nine hundred and (& Steve, Sucker)	County, State of Indiana,
State (May) Stell Mckey	County, State of Indiana,
State of Indiana, Groom John Stell Mickey of And, Bride Leleca Jersel Harris of twee by ma writed in a granthorized by a marriage license issued for the	County, State of Indiana County, State of Indiana County, State of Indiana, County, State of Indiana, Chat purpose by the Clerk of the Circuit Court of Hendricks
State of Indiana, Groom Ag Stell Milks of Andrew of State of Indiana, Groom of State of Indiana, Groom	County, State of Indiana, County State
State of Indiana, Groom Ag Stell Milks of Andrew of State of Indiana, Groom of State of Indiana, Groom	County, State of Indiana, County, State of Indiana, County, State of Indiana, Chat purpose by the Clerk of the Circuit Court of Hendricks Signed Rey Danald Yell Official Designation Bastist Minister Annaly, 19.66
State of Indiana, Groom Aday Stell Mckey of And, Bride Nellecca June Harris of Mere by me united in marriage as authorized by a marriage license issued for the County. Dated this The day of January 1966.	County, State of Indiana, County, State of Indiana, County, State of Indiana, Chat purpose by the Clerk of the Circuit Court of Sendricks Signed Rey Danald Syler Official Designation Bastist Minister Officia

.. Circuit Court

Form Prescribed By Indiana State Board of STATE OF INDIANA Health under Authority APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS County MALE Medical Examination Report Dated_ Date of Application FEMALE CM connell 2M so Halu 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, representa-Middle FEMALE APPLICANT 1948 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)... Color or Race Last Marriage Ended By: Death | Divorce | Annulment | Dartanance: D.C. Tucker & G Color or Race Date of birth verified by: Negro □ Other □ (specify X Other (Specify). Irainin Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Date of birth verified by: Birth Cert. Daddal Decree Yes 🗌 Of Unsound Mind? No D Other (Specify). 2. Are you under guardianship as a person of unsound mind? Yes 🗌 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? No Yes If answer to 3 is "yes" has the cause of such condition been removed? No 🗆 Yes 🗌 Of Unsound Mind? No [Yes | 4. Are you afflicted with a transmissible disease? 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 No Yes 6. Are you now under the influence of intoxicating liquor? No Yes | 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? No Yes 8. Are you able to support a family? No 🗆 9. Are you likely to so continue? 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 7. Full name of father.... Age Address Residence of father (if deceased so state) Occupation of father. Birthplace of father (State or foreign country) 8. Full maiden name of mother. Wanieta (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 Residence of mother (if deceased so state) ... Yes 🔲 No 🖂 chas Occupation of mother. 11. Full name of father... Birthplace of mother (State or foreign country) Residence of father (if deceased so state). Occupation of father. State of Indiana, ss: I depose and state the information given in this application is true and correct. Birthplace of father (State or foreign country) 12. Full maiden name of mother Dorothy Chrestine Harston Tubecca June Residence of mother (if deceased so state Occupation of mother. Birthplace of mother (State or foreign country). Souling HENDRICKS State of Indiana. ... Circuit Court hereby give my consent for CONSENT (We, the pare signs, state State of Indi County of ... Subscribed and sworn to before me this Subscribed a COMPLET Heidricks Circuit Court wense issued by the flefk of the. authorizing the bining together as usband and wife Be It Re Dune of Indiana dated the Be it further remembered, the following marriage certificate was filed in my office, to-wit: Kew, Donald County, State of County, State of Andies one thousand nine hundred and State of Indiana, Groom and, Bride ... were by me united in marriage as authorized by County. Dated this

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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

No.

File Book 28

Banuary 1965

Date of Application

MALE
Medical Examination Report Dated 28 December 1965

FEMALE
Medical Examination I

FEMALE
Medical Examination Report Dated 28 Decembrials

Name of Physician Exam h. behman MD

Name of Physician Evan L. Lehman MD.	Name of Physician Franch- Lehman all.
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)".	tatement—Whoever procures the issuance of a license to marry by any false statement, representa-
MALE APPLICANT	FEMALE APPLICANT
Name First Middle Last	Name First 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 of R. R City Gounty State	Residence Address Streeter R. R. City County State
K2 Bx 92 Danville, Hend. Ind.	Maiden Name if Different Ry bott, ladels, Money la
Previous Marital Status: Never Married Number of Previous Marriages	The state of the 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 Labor: Rutledge Feed Mill	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Slake Tradict Sac Sacrat
Other (Specify)	Date of birth verified by: Sirth Cert. Judicial Decree
An Imbecile? Of Unsound Mind? No 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 a flum or	1. Are you now or have you been adjudged, diagnosed or considered as:
home for indigent persons? No ✓ Yes ☐ If answer to 3 is "yes" has the cause of such condition been removed? No ☐ Yes ☐	An Imbecile? Of Unsound Mind? No Yes
4. Are you afflicted with a transmissible disease? 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?	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	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? 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 Name Age Address	Residence of father (if deceased so state)
	Occupation of father as St. we he Nacque 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 Lu Vina Mings
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state)
11. Full name of father Lutus Len Holladey	Occupation of mother Race of mother
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country) Kenky
Occupation of father State or foreign country	State of Indiana,
Birthplace of father (State or foreign country) 12. Full maiden name of mother Be Hy Loss Sandru Ku.	County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
Residence of mother (if diceased so state). A.D. a. ville 1,3	signed Branda Low Frys
Occupation of mother to wearth. Race of mother white	New Address.
Birthplace of mother (State or foreign country)	Subscribed and worn to defore me han 300 day of Sange 1965
State of Indiana, County of HENDRICKS Sas: I depose and state the information given in this application, is true and correct.	HENDRICKS Circuit Court
Signed James Deg Hallalay	Circuit Court
New Address 337 N. Wash, D'ville.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to delore me this day of Same 1900	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 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 or
SignedFather	Signed Father
SignedMother	Signed Mother
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	Γ. A marriage license having been refused to the above named parties, the
CountyCoi	art by written order issued
authorizes and directs the issuance of	f a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE	E AND MARRIAGE CERTIFICATE
Be It Remembered, there was filed in my office a marriage licens of Indiana dated the Jth day of January	
James Lee Hallinder	Brenda Live Free husband and wife
Be it further remembered, the following marriage certificate was filed in my of	fice to-wit.
ne thousand nine hundred and 66	ereby certify that on the 8th day of January
1. 19 11.	t Indianapalis , County of Marian,
nd, Bride Brenda Low Jaye of	Marian County, State of Indiana, County, State of Indiana,
for the difference in marriage as authorized by a marriage license issued for t	hat purpose by the Clerk of the Circuit Court of
ounty. Sth day of January 1066	of the Circuit Court of
, 19.0.	Signed Kenneth E. Taylor
The state of the s	Official Designation Minister
'iled and recorded in accordance with the laws of the State of Indiana this	4th day of January

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County MALE Medical Examination Report Dated 30 December 1 FEMALE Name of Physician Dames Black 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, representation or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". FEMALE APPLICANT Date of Birtl Previous Marital Status: Never Married Number of Previous Marrie 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 100 Date of birth verified by: Birth Cert. | Judicial De Color or Race Negro | Other | (specify). Other (Specify) ... 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 | Yes | 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 a lum 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? Yes 🗆 No 🗆 Yes 🗌 Of Unsound Mind? 4. Are you afflicted with a transmissible disease? No Yes | Yes | 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? 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? Yes 🗆 No 🗆 9. Are you likely to so continue? 5. Are you now under the influence of intoxicating liquor? No 🗆 No Yes 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 Address Occupation of father 8. Full maiden name of mother Vocana (b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for their support? Residence of mother (if deceased so state)...... S rown but Occupation of mother as works: Allac In Jian apolos, Ind Residence of father (if deceased so state) Birthplace of mother (State or foreign country).... Occupation of father ASTSAY. NYC. Race State of Indiana, Birthplace of father (State or foreign country)..... HENDRICKS 12. Full maiden name of mother ... Katherine Samuita Milva Residence of mother (if deceased so state). White land Farm Race of mothe White Occupation of mother & so K Keept ... Birthplace of mother (State or foreign country) I depose and state the information given in this application is true and correct. HENDRICKS CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent day of Sames signs, state facts which render the consent of the other parent unnecessary... 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 County of ... State of Indiana, HENDRICKS County of 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 Court by written order issued.....County..... 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 Stenducks 1966, authorizing the joining together as husband and wife of Indiana dated the Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the one thousand nine hundred and.... of Hendricks County, State of Frais State of Indiana, Groom Millian 9 were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of Sender County. Dated this. Official Designation..... Filed and recorded in accordance with the laws of the State of Indiana this....Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS ___County

FEMALE

	7
No	
File_	Dook 28
1	15 Sans ans 1966
	Date of Application

Circuit Court

MALE Medical Examination Report Dated 27 Dec 1965	Medical Examination Report Dated 27 Dec 1962
Name of Physician Dan F. Talbott M.D.	Name of Physician Dan E. (albeit M.D.
tion 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-
Name First Middle Last	Name First Middle Last
Date of Birth Month Day Year	Date of Birth Month Day Year
Place of Birth (State or fereign country)	Place of Birth (State of fereign country)
Residence Address Street or R. R. City County State	Residence Address Street of R. R. City County State
India Boys School, Plaintick, Hend. Ind.	Maiden Name if Different Washington Blv. Tudels, Marine
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
Usual Occupation Student: Purdre	Color or Race White Negro Other (specify)
Date of birth verified by:	Usual Occupation Secy tetay.
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes	Date of birth verified by: Desirth Cert. Judicial Decree
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes Yes	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county sylum 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 6. Are you now under the influence of intoxicating liquor? No Yes	2. Are you under guardianship as a person of unsound mind? No Yes 3. Are you afflicted with a transmissible disease? No Yes Yes
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?
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 indience of a narcotic drug? No Yes
(a) List their full names, ages and addresses Name Age Address	Residence of father (if deceased so state)
	Occupation of father Salon Eps. Cha. Race of father what te
	Birthplace of father (State or foreign country). Clereland, Ohio
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Esta 3005000 Strong
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state).
11. Full name of father	Occupation of mother. Race of mother. Race of mother.
Occupation of father Command Sup	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country)	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.	Main weth Burnely Chair
Occupation of mother (if deceased so state) Race of mother Race of	Signed Adams Survey State
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this 14 day of
State of Indiana, State of Indiana, State of Indiana, I depose and state the information given in this application is true and correct.	Subscribed and sworn typerore me tasks day of HENDRICKS Clerk Circuit Court
Signed William Bayer	Olera Circuit Court
New Address Lagette, 1.2	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and (worn to before me this	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
CONSENT OF PAPENTS PAPENT OF CHARDIAN	signs, state facts which render the consent of the other parent unnecessary
CONSENT OR 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,	State of Indiana, County of HENDRICKS ss:
County of HENDRICKS ss:	SignedFather
Signed	Signed
Subscribed and sworn to before me this	Subscribed and sworn to before me thisday of
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
	urt by written order issued
inauthorizes and directs the issuance o	f a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSI	E AND MARRIAGE CERTIFICATE
of Indiana dated the Manual the day of pourse	se issued by the clerk of the Alack Circuit Court
from William Baller	nd Toleraly HI Tournally (naine
Be it further rendembered, the following marriage certificate was filed in my of taines.	ffice, to-wit:
one thousand nine hundred and 6.6	at St. Paul's Episcapal Churcheounty of Marcan,
State of Indiana, Groom John William Bauer	of Headricks County, State of Indiana
and, Bride Elizabeth Burnaby Craine of	Marian County, State of Indiana,
were by me united in marriage as authorized by a marriage license issued for to	that purpose by the Clerk of the Circuit Court of Headricks
Dated this 22 nd day of January, 1966	Signed Russell B Stair
The same of the sa	Official Designation Rectar St. Paul's Church
Filed and recorded in accordance with the laws of the State of Indiana this	
	a: . (A . . A

...Clerk

.Circuit Court

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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS County MALE Medical Examination Report Dated. Date of Applicati FEMALE 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, representa-FEMALE APPLICANT Previous Marital Status: Never Married Number of Previous Marriage Last Marriage Ended By: Death | Divorce | Annulment | Previous Marital Status: Never Married Number of Previous Marriages Negro | Other | (specify)... Color or Race Last Marriage Ended By Death | Divorce | Annulment | Usual Occupation Kec Color or Race Date of birth verified by: Birth Cert Negro | Other | ☐ Judicial Decree Drivers Other (Specify) Usual Occupatio Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Of Unsound Mind? 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: Are you now or have you been within five (5) years an inmate of a home for indigent persons? um or 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 🗆 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? Yes 🗌 6. Are you now under the influence of intoxicating liquor? Yes 🗌 3. Are you afflicted with a transmissible disease? 7. Are you now under the influence of a narcotic drug? Yes 🗌 8. Are you able to support a family? No 🗆 9. Are you likely to so continue? No 🗆 Yes 🗌 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 7. Full name of father A On To Name Address Age Residence of father (if deceased so state). ign country) SYMME Yes 🗆 No 🗆 (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 🗆 Clark. 11. Full name of father..... Birthplace of mother (State or foreign country) Residence of father (if, deceased so state) State of Indiana, HENDRICKS County of .. Residence of mother (if deceased so state) ... Occupation of mother. Danville, Ind Birthplace of mother (State or foreign country) HENDRICKS ss: I depose and state the information given in this application is true and correct. State of Indiana, County of CONSENT OF PARENTS, PARENT OR GUARDIAN Main New Address 981 We, the parents, of this applicant hereby give consent for this marriage. 19.0.0 signs, state facts which render the consent of the other parent unnecess . Clerk.....HENDRICKSCircuit 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 sender the consent of the other paren 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 l COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above namedCourt by written order issued.... authorizes and directs the issuance of a marriage license to the above named parties.County..... 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. 1900, authorizing the joining together as husband and wife Honaker anvers ...day of of Indiana dated the .. Clark Be it further remembered, the following marriage certificate was filed in my office, to-wit:hereby gertify that on the Nauris one thousand nine hundred and 64 State of Indiana, Groom Steven D 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 ...

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

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County MALE Medical Examination Report Dated. Date of Applicati FEMALE Medical Examination Report Dated. Name of Physician_ Cheesman 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 Marriages. Last Marriage Ended By: Death | Divorce | Annulment | 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 Color or Race Jud Other (Specify)_ Drivers Usual Occupation Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Of Unsound Mind? Other (Specify). 2. Are you under guardianship as a person of unsound mind? Are you now or have you been within five (5) years an inmate of a continue 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? No 🗆 Yes 🗌 Yes 🗆 Of Unsound Mind? 4. Are you afflicted with a transmissible disease? Yes 🗆 No Yes | Yes | 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? 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? Yes 🗆 No 🗆 9. Are you likely to so continue? 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 🗀 No Yes (If yes, answer questions a, b, c) 7. Full name of father A lon Zo (a) List their full names, ages and addresses Name Address Birthplace of father (State or foreign country) Lendricks Circuit Court Be It Remembered, there was filed in my office a marriage license issued by the clerk of the... 1900, authorizing the joining together as husband and wife Honaker an vers of Indiana dated the. Clork Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby sertify that on the Naures one thousand nine hundred and, a marriage license issued for that purpose by the Clerk of the Circuit Court of State of Indiana, Groom ... were by me whited in marriage as authorized by County. Dated this. Official Designation. 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	2
File_	BOOK 28
	10 January 1966
	Date of Application

MALE Sanvan 1966	FEMALE Medical Examination Report Dated 5 Sanvony 1966
Medical Examination Report Dated	Name of Physician David B. Haggard MD
Name of Physician Chapter 126 Indiana Acts 1905 prescribes "False sta	tement—Whoever procures the issuance of a license to marry by any false statement, representa-
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	FEMALE APPLICANT
Name 7 First Middle Last	Name First Middle Read for d
Date of Birth Month Day Year	Date of Birth Month Day Year
Place of Birth (State or foreign country)	Place of Birth (Stat) or foreign country)
Residence Address Street or R. R. City County State	Residence Address Street of R. R. City County State
118 E. Main, Plaintield Hew, Ind.	Maiden Name if Different, Math Plaintield, In Hew
Previous Marital Status: Never Married Number of Previous Marriages	Thelma h. hashvay
Last Marriage Ended By: Death Divorce Annulment Annulment 37	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended By Death Divorce Annulment Removery
Usual Occupation (OOK: Fredricks	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation COOK: Fredricks
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? No Ves \ Yes \ Yes \ Yes \ Yes \ Yes \	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? 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 W Yes
6. Are you now under the influence of intoxicating liquor? No Ves	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 W No W Yes	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 Sacob Lashuay
Name Age Address	Residence of father (if deceased so state)
	Occupation of father
	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	Residence of mother (if deceased so state)
their support?	Occupation of mother Race of mother white
11. Full name of father Layton Wills Brad ford Residence of father (if deceased so state) Residence of father (if deceased so state)	Birthplace of mother (State or foreign country) Weston, Ohio
Occupation of father	
Birthplace of father (State or Toreign 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 Texx et Tames	Thelma & Bradford.
Residence of mother (if deceased so state) Occupation of mother Race of mother White	Signed Saw
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this AAOth day of Sanvary, 1966
State of Indiana, County of HENDRICKS Ss: I depose and state the information given in this application, is true and correct.	Clerk Circuit Court
County of HENDRICKS in this application is true and correct. Signed Any R Brack or A	
New Address 1915 E Main St, Plaintich	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this Ap the day of any and 1906.	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	
signs, state facts which render the consent of the other parent unnecessary	
	State of Indiana, HENDRICKS ss:
State of Indiana, County of HENDRICKS Ss:	County of
SignedFather	
SignedMother	Signed Mother Subscribed and sworn to before me this day of 19
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me this
	RT. A marriage license having been refused to the above named parties, the
in authorizes and directs the issuance	ourt by written order issued
	SE AND MARRIAGE CERTIFICATE
Be It Remembered, there was filed in my office a marriage lice	nse issued by the deck of the Lew Yill Circuit Court
of Indiana dated the day of January	, 196, authorizing the joining-together as husband and wife
Be it further remembered, the following marriage certificate was filed in my	and Thelma his Drad ford
1, Eugene E. Crawley	hereby certify that on the 14th day of January,
one thousand nine hundred and QQ	at Plainfield County of Gendricks,
State of Indiana, Groom Glen R. Bradford and, Bride Shelma L. Bradford	
were by me united in marriage as authorized by a marriage license issued for	Stratucke County, State of Indiana,
Dated this 14th day of January, 1961	Signed Eugene E. Bradlard
	Official Designation Justice of the Place
Filed and recorded in accordance with the laws of the State of Indiana this	18th day of January , 1966.
	Signed John Gambald Jr. Clerk
	Hendricks Circuit Court

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS _County MALE Date of Application Medical Examination Report Dated FEMALE 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, representa-Name FEMALE APPLICANT Date of Rivil Place of Birth (State or foreign Residence Address Previous Marital Status: Never Married Number of Previous Marriages 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 ☐ Usual Occupation Color or Race White Negro | Other | (specify) .. 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 Of Unsound Mind? Other (Specify)... Yes 🗌 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 1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes If answer to 3 is "yes" has the cause of such condition been removed? No [Yes 🗌 Of Unsound Mind? No Yes 4. Are you afflicted with a transmissible disease? Yes 🗌 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? Nov 3. Are you afflicted with a transmissible disease? No Yes 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? No 🗆 Yes No. Yes 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 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 Address Age Occupation of father. Birthplace of father (State (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? No 🗆 Occupation of mother Atusuur 11. Full name of father. Birthplace of mother (State or foreign country) ... Residence of father (if deceared so Occupation of father Monarch State of Indiana, Birthplace of father (State or foreign County of. 12. Full maiden name of mother... Residence of mother (if degased so state). Occupation of mother Color est Virginia Birthplace of mother (State of foreign country). ss: I depose and state the information given in this application is true and correct. Circuit Court State of Indiana, HENDRICKS County of Signed William CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent New Address ... day of January , 1066 signs, state facts which render the consent of the other parent unnecessary... Subscribed and sworn to before me this..... 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 .. Father State of Indiana, HENDRICKS County ofFather Signed .. Mother 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....authorizes and directs the issuance of a marriage license to the above named parties.County... RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Be It Remembered, there was filed in my office a marriage license issued by the clyrkyof the land the 1966, authorizing the joining together as husband and wife Dolores & myers Be it further remembered the following marriage certificate was filed in my office, to-wit: hereby certify that on the 16th day of January Jaseph Swift of Hendricks County, State of Indiana County, State of Indiana County, State of Indiana Joseph D. Wilson were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of Render Signed Joseph 16th day of January, 1966. County. Official Designation Dated thisCircuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

FEMALE

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No	ar a la l
	2 1100
File_	POON 28
	11 Sanvan 1966
1	Date of Application ()

MALE Medical Examination Report Dated	Medical Examination Report Dated
Name of Physician M.O. Scawah & M.D.	Name of Physician // Scamanosn //)
Taliana Asta 1905 prescribes "False stat	ement-Whoever procures the issuance of a license to marry by any false statement, representa-
tion or pretense shall be fined in any sum not exceeding the state of	FEMALE APPLICANT
Name First Middle Last	Name A First Middle Last
Donald Ray Perry	Date of Birth Month Day Year
Date of Birth May 25 1972	Place of Birth (State or foreign country)
Place of Birth (State or foreign country) (State or foreign country) (State or foreign country) (State or foreign country)	Residence Address Street pr R. R. City County State
Residence Address Street of R. R. City County State	Maiden Name if Different Jalan, Hendricks, Indiana
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
The state of the s	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Dudicial Decree	Color of Race
Date of birth verified by: Birth Cert. Judicial Decree	Date of birth verified by: Birth Cert. Judicial Decree
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbedie? Yes	Date of birth verified by: Birth Cert. Sudicial Better
Of Unsound Mind? 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 county sylum or home for indigent persons?	An Imbecile? No 1 Yes No 2 Yes
If answer to 3 is "yes" has the cause of such condition been removed?	Of Unsound Mind:
4. Are you afflicted with a transmissible disease. 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 ☐ 3. Are you afflicted with a transmissible disease? 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 \(\text{Yes} \)	4. Are you related to the groom closer than second cousin?
8. Are you able to support a family?	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 Yes	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 Sames Sames (yent.
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Mechanic' Shell Sta 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 18 cm 1 c
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (II deceased so state)
11. Full name of father art	Occupation of mother Race of mother Country Race of Mother Race of Mother Race of Mother Country Race of Mother Race of Mot
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
Birthplace of father (State or foreign country) Owler (State or foreign country)	County of HENDRICKS ss: in this application is true and correct.
Residence of mother (if deceased so state)	Signed Margaret a. I rent
Occupation of mother Howsen the Race of mother white	New Address
Birthplace of mother (State or foreign country) Madraga 140	Subscribed and sworn to before me the Alth day of San war 1906
State of Indiana, State of Indiana, State	Clerk Circuit Court
County of Parties	
New Address 128 Green acro Dr. Hounghou	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and swork to before of this	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	
signs, state facts which render the consent of the other parent unnecessary	
100 a religion to the state of	State of Indiana,
State of Indiana,	County of ss:
County of HENDRICKS	Signed Father
Signed Father	SignedMother
Signed	Subscribed and sworn to before me thisday of
Clerk	Clerk
COMPLETE IS MADDIAGE LIGHNER TOWNER BY	TOTAL A manufacture in the second position the
	RT. A marriage license having been refused to the above named parties, the Court by written order issued
inauthorizes and directs the issuance	
	SE AND MARRIAGE CERTIFICATE
Be It Remembered, there was filed in my office a marriage lic	ense issued by the clerify of the Senducks Circuit Court
of Indiana dated the same and any of anuary	, 19.6, authorizing the joining together as husband and wife
Be it further remembered, the following marriage dertificate was filed in my office, to-wit:	
1, Ray Button hereby certify that on the 15th day of January	
one thousand nine hundred and lek at Roachdale, County of Hustmann,	
State of Indiana, Groom Standa Ray Perry of Gendricks County, State of Indiana	
and, Bride Mangaret a. Alut of Hendricks County, State of Indianal,	
were by me united in marriage as authorized by a marriage license issued for County.	
Dated this 15th day of January , 19 4	
, 10.4	Signed May Duckey
Filed and recorded in accordance with the laws of the St.	Official Designation Christian Minister
Filed and recorded in accordance with the laws of the State of Indiana this.	
the state of the s	Signed John Lambald for Clerk Lendricks Circuit Court
	The state of the s

.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 muare Medical Examination Report Dated Date of Application FEMALE Medical Examination Report Dated. Name of Physician_ Momas 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 Date of Birth Date of Birth Previous Marital Status: Never Married Number of Previous Marriages Death | Divorce | Annulment | Last Marriage Ended By: Previous Marital Status: Never Married M Number of Previous Marriages. White Negro Other (specify)... Color or Race Last Marriage Ended By: Death | Divorce | Annulment | Usual Occupation -Color or Race Date of birth verified by: Birth Cert. | Judicial Decree Other (Specify) Orrever Ficense Usual Occupation Are you now or have you been adjudged, diagnosed or considered as: Date of birth verified by: Birth Cert. Judicial Decre Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? Other (Specify). 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: No No 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? Yes 🗆 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 Yes 🗌 6. Are you now under the influence of intoxicating liquor? Yes 🗆 No Yes 3. Are you afflicted with a transmissible disease? 7. Are you now under the influence of a narcotic drug? No D No Yes No Yes No No Yes 🗆 8. Are you able to support a family? 4. Are you related to the groom closer than second cousin? No Ves 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 V (If yes, answer questions a, b, c) No 🛛 Yes 🗆 (a) List their full names, ages and 7. Full name of father... Residence of father (if deceased so state) ... Harpoord Desware O Occupation of father. Birthplace of father (State or foreign country (b) Are you supporting or contributing to their support? Are you complying with any court order their support? Yes No D 11. Full name of father. Occupation of mother Houseway Residence of father (if deceased so state). Birthplace of mother (State or foreign country)..... Occupation of father State of Indiana, Birthplace of father (State or foreign country). Residence of mother (if deceased so state). Occupation of mother... Birthplace of mother (State or foreign country) State of Indiana, HENDRICKS Circuit Court HENDRICKS County of ... CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent anuary Subscribed and sworn to before signs, state facts which render the consent of the other parent unnecessary. 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, .. Father HENDRICKS Signed. County of Father Signed. Mother 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, theCourt by written order issued....authorizes and directs the issuance of a marriage license to the above named parties.County... 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 Lengtheks Circuit Court January and Detty Jean Dove of Indiana dated the 15 th Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the 15th at BellevilleCounty, State of Indiana one thousand nine hundred and ... 4. of Hendricks County, State of Indiana, State of Indiang, Groom Hayward Dyward Phis were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of Deadresks. day of January, 19.6. County.

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

Dated this.

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

Jan von HENDRICKS County

....Circuit Court

Date of Application FEMALE MALE 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)". FEMALE APPLICANT MALE APPLICANT Date of Birth Previous Marital Status: Never Married Mariages Number of Previous Marriages Previous Marital Status: Never Married Number of Previous Marriages Last Marriage Ended By: Death Divorce Annulment Death Divorce Annulment Last Marriage Ended By: White Negro Other Color or Race (specify). White Negro Other Usual Occupation Color or Race (speck(y). Date of birth verified by: Birth Cert. Judicial Decree Usual Occupation Other (Specify) .. Birth Cert. | Judicial Decree Date of birth verified by: Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes 🗆 Other (Specify). Yes 🗌 Of Unsound Mind? No F 2. Are you under guardianship as a person of unsound mind? No D 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? 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? No 🕡 Yes 🗌 3. Are you afflicted with a transmissible disease? No 🗹 6. Are you now under the influence of intoxicating liquor? Yes 🗌 Yes 🗌 7. Are you now under the influence of a narcotic drug? 4. Are you related to the groom closer than second cousin? No Yes No 🗆 Yes Z 8. Are you able to support a family? 5. Are you now under the influence of intoxicating liquor? No Yes Yes No 🗆 9. Are you likely to so continue? 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 dry (If yes, answer questions a, b, c) (a) List their full names, ages and addresses Address Birthplace of father (State or foreign country) ... 8. Full maiden name of mother. (b) Are you supporting or contributing to their support? No 🗆 Yes 🗌 (c) Are you complying with any court order or orders issued for their support? Yes 🗌 No 🗆 Occupation of mother Birthplace of mother (State or foreign country) Occupation of father toeman, State of Indiana, Birthplace of father (State or foreign country). Country HENDRICKS County of. Occupation of mother Dayton, Birthplace of mother (State or foreign country). Ohio State of Indiana HENDRICKS .Circuit Court County of ... 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 day of annuan, 19.00 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, Consen HENDRICKS County of ... State of Indiana, HENDRICKS County of ... Signed. Father 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... of Indiang dated the. authorizing the joining together as husband and wife MC Avene Be it further remembered, the following marriage certificate was filed in my office, to-wit: Marie Marrison I, New. Im. Dlackwell ... hereby certify that on the 39th one thousand nine hundred and State of Indiana, Groom Kobert Earl and, Bride Januce Mayne County, State of India County. Dated this 29

Form Prescribed By Indiana State Board of Health under Authority

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

January Date of Application

.Clerk

Hendricks

Chap. 126, Ind. Acts 1905 HENDRICKS County FEMALE MALE 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, repretion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". FEMALE APPLICANT MALE APPLICANT Name e OVESON Date of Birt Previous Marital Status: Never Married V Number of Previous Marriages... Previous Marital Status: Never Married Number of Previous Marriages. Last Marrie Ended By: Death Divorce Annulment Divorce | Annulment | Color or Ra Last Marriage Ended By: Usual Occi am the father of Date of bir Hosp Oth I do give my consent to the marriage of 1. Are yo Of 2. Are yo 3. Are yo home Yes 🗌 If ans Yes 🗌 4. Are y 5. Are yo Yes 🗌 6. Are y Yes 🗆 7. Are y 8. Are y Yes 🗌 am the mother of 9. Are y Yes 🗌 10. Do yo (If ye Yes 🗌 I do give my consent to the marriage of (a) L rison (b) A 11. Full otin Resid Occur Subscribed and sworn to before me a Notary Public for the State of Indiana Birth 12. Full County of Wayne this Resid Occu Birth DAY COMMISSION EXPIRES APAIL State of 19.00 County rcuit Court JAIN 1 3 1966 John Fambold & one parent CIRCUIT
CLERK HENDRICKS COURT
SUPERIOR CONSE We, the p conse State of Indiana, State of Indiana, HENDRICKS County of County of HENDRICKS Signed. Father Signed. Mother Subscribed and sworn to before me th Subscribed and sworn to before me this. Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, theauthorizes 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.... of Indiang dated the ... day of Oan van Be it further remembered, the following marriage certificate was filed in my office, to-wit: , authorizing the joining together as husband and wife Marie Marrison Blackwell hereby certify that on the 39th day of one thousand nine hundred and ... le le at Indianapales, County of... State of Indiana, Groom Robert Earl and, Bride Janice Marie Marrison of Herdricks County, State of Indiana of Mayre 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 Court of New XXXXX Filed and recorded in accordance with the laws of the State of Indiana this... A Mile. Official Designation R Signed.

APPLICATION FOR MARRIAGE LICENSE

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 MALE APPLICANT Name MALE APPLICANT Name Middle Day Year Place of Birth Month Day Year Place of Birth State or foreign country) Residence Address Street or R. R. City Previous Marital Status: Never Married Number of Previous Marriages. Last Marriage Ended By: Death Divorce Annulment 50 Color or Race White Negro Other (specify). Last Marriage Ended By: Date of birth verified by: Birth Cert. Judicial Decree Annulment Specify). An Imbecile? Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? Name FEMALE APPLICANT Name FEMALE APPLICANT Name Firmt Middle Date of Birth Name Firmt Middle Date of Birth Name Fringt Middle Date of Birth Name Frevious Marital Status: Never Married Number of Previous Marriages. Maiden Name if Different Last Marriage Ended By: Death Divorce Annulment Specify). Last Marriage Ended By: Date of birth verified by: Birth Cert. Judicial Decree Specify). Date of birth verified by: Birth Cert. Judicial Decree Specify). Date of birth verified by: Birth Cert. Judicial Decree Specify). Date of birth verified by: Birth Cert. Judicial Decree Color of Race Specify). Date of birth verified by: Birth Cert. Judicial Decree Color of Race Col	County State
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3. Are you now or have you been within five (5) years an inmate of a county sylum or home for indigent persons?	ed as:
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6. Are you now under the influence of intoxicating liquor?	No 🗗 Yes 🗆
8. Are you able to support a family? No 2 Yes 4. Are you related to the green sleep the support a family?	No Yes 🗆
9. Are you likely to so continue? Yes IV No II 5. Are you now under the influence of intercenting Versal	No Yes
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Residence of father (if deceased so state)	eade d
	of father While
Birthplace of father (State or foreign country) Web	The Contract of the Contract o
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for	Jen Day.
their support? Yes No Nesidence of mother (if deceased so state)	e ceased
141-1-	e of mother W
1 +0	T+ 00 - 13
Birtheless of father (State of Indiana,	state the information given
12. Full maiden name of mother 2778 Blary County of	cation is true and correct.
Residence of mother (if deceased so state) Danville, Ind.	umings
Occupation of mother New Address Race of mother White New Address	9
Birthplace of mother (State or foreign country) Subscribed and sword to before me this day of	savay deb
I depose and state the information given	Circuit Court
Signed Walter Parkers	
CONSENT OF PARENTS, PARENT OR GUARDIAN	
Subscribed and the state of San and 1920. We, the parents, of this applicant hereby give consent for this is	
Clerk HENDRICKS Circuit Court signs, state facts which render the consent of the other parent	Innecessary
COVERNIT OF THE PROPERTY OF THE	
CONSENT OF PARENTS, PARENT OR GUARDIAN	
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
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,	
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	
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	Father
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	Father Mother
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	
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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	Mother 19
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	Mother 19
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	Mother 19
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 Signed Signed Mother Signed Signed Signed Subscribed and sworn to before me this day of Cerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties. County directs the issuance of a marriage license to the above named parties.	Mother 19
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 Signed Signed Mother Signed Signed Signed Subscribed and sworn to before me this day of Cerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties. County directs the issuance of a marriage license to the above named parties.	Mother 19
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	we named parties, the and filed Circuit Court as husband and wife
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 Signed. Signed. Subscribed and sworn to before me this. County of HENDRICKS Signed. Signed. Subscribed and sworn to before me this. County of HENDRICKS Signed. Subscribed and sworn to before me this. County of HENDRICKS Signed. Subscribed and sworn to before me this. County of HENDRICKS Signed. Subscribed and sworn to before me this. County of HENDRICKS Signed. Subscribed and sworn to before me this. County written order issued. County by written order issued	Mother 19 Clerk ve named parties, the and filed Circuit Court as husband and wife
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 Signed. Signed. Subscribed and sworn to before me this. County of HENDRICKS Signed. Signed. Subscribed and sworn to before me this. County of HENDRICKS Signed. Subscribed and sworn to before me this. County of HENDRICKS Signed. Subscribed and sworn to before me this. County of HENDRICKS Signed. Subscribed and sworn to before me this. County of HENDRICKS Signed. Subscribed and sworn to before me this. County written order issued. County by written order issued	Mother 19 Clerk ve named parties, the and filed Circuit Court as husband and wife
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 Signed Signed Mother Signed Mother Signed Subscribed and sworn to before me this day of Cerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above county written order issued County written order issued and sworn to before me this applications of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE and the state of Indiana dates the day of Andrew was filed in my office a marriage license issued by the deefk of the above named parties. Be it further remembered, the following marriage certificate was filed in my office, to-wit: Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the Andrew of Andrews of Andre	Mother 19 Clerk ve named parties, the and filed Circuit Court as husband and wife in 95 Uaky Lindusky,
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 Signed Subscribed and sworn to before me this County of Court by written order issued County County County The Be It Remembered, the following marriage certificate was filed in my office, to-wit: Be it further remembered, the following marriage certificate was filed in my office, to-wit: Be it further remembered, the following marriage certificate was filed in my office, to-wit: All Maratan At the County of the consent of the other parent unnecessary. State of Indiana, County of Mender Indiana, County of Signed Subscribed and sworn to before me this day of Court by written order issued County of Maratan County of State of Indiana RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE 19.00, authorizing the joining togethe day of Anna Anna County of Maratan County of Maratan County of Maratan County of Maratan County, State of County of Maratan	Mother 19 Clerk ve named parties, the and filed Circuit Court as husband and wife in 95 Lindusky, Lindusky, Lindusky,
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 Signed. 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. County. County of Marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Of Indiana dates the day of and and like of the day of and and and the literature was filed in my office to wit: Be it further remembered, the following marriage certificate was filed in my office, to wit: Be it further remembered, the following marriage certificate was filed in my office, to wit: Be it further remembered, the following marriage certificate was filed in my office, to wit: Be it further remembered, the following marriage certificate was filed in my office, to wit: Be it further remembered, the following marriage certificate was filed in my office, to wit: Be it further remembered, the following marriage certificate was filed in my office, to wit: County State of Indiana. County State o	Mother 19 Clerk Ve named parties, the and filed A Circuit Court as husband and wife in 95 Under Manager, M
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 Signed. Signed. Signed. Signed. Signed. Signed. Subscribed and sworn to before me this. County of Marriage license having been refused to the above named parties. County. County of Marriage license issued by the desk of the subscribed in my office a marriage license issued by the desk of the subscribed in my office a marriage license issued by the desk of the subscribed in my office a marriage license issued by the desk of the subscribed in my office a marriage license issued by the desk of the subscribed in my office a marriage license issued by the desk of the subscribed in my office to wit: Be it further remembered, the following marriage certificate was filed in my office, to wit: Be it further remembered, the following marriage certificate was filed in my office, to wit: Be it further remembered, the following marriage certificate was filed in my office, to wit: Be it further remembered, the following marriage certificate was filed in my office, to wit: County State of Indiana. County State of Indiana. County State of Indiana. County State of Co	Mother 19 Clerk Ve named parties, the and filed A Circuit Court as husband and wife in 95 Under Manager, M
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 Signed Signed Signed Signed Subscribed and sworn to before me this day of 19. Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above county written order issued. Court by written order issued. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE RETURN OF MARRIAGE LICENSE issued by the deefk of the above named parties. RETURN OF MARRIAGE LICENSE issued by the deefk of the above named parties. RETURN OF MARRIAGE LICENSE issued by the deefk of the above named parties. RETURN OF MARRIAGE LICENSE issued by the deefk of the above named parties. RETURN OF MARRIAGE LICENSE issued by the deefk of the above named parties. RETURN OF MARRIAGE LICENSE issued by the deefk of the above named parties. RETURN OF MARRIAGE LICENSE issued by the deefk of the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Adam of the above named parties. RETURN OF MARRIAGE LICENSE issued by the deefk of the above named parties. County of Marriage license issued by the deefk of the above named parties. County, State of Indiana, Groom and the above named parties issued by the Clerk of the Circuit Court of the above named parties.	Mother 19 Clerk Ve named parties, the and filed A Circuit Court as husband and wife in 95 Under Manager, M
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 Signed Signed Signed Signed Signed Subscribed and sworn to before me this. County of Subscribed and sworn to before me this. County County of Subscribed and sworn to before me this. County of Subscribed and sworn to before me this. County County of Subscribed and sworn to before me this. County written order issued. County by written order issued. County by written order issued. County of Subscribed and sworn to before me this. County by written order issued. County by written order issued. County by written order issued. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Of Indiana dated the Statement of the county of subscribed in my office, to wit: Be it further remembered, the following marriage certificate was filed in my office, to wit: Be it further remembered, the following marriage certificate was filed in my office, to wit: Be it further remembered, the following marriage certificate was filed in my office, to wit: Signed Subscribed and sworn to before me this. County of Subscribed and sworn to before me this. Signed Subscribed and sworn to before me thi	Mother 19 Clerk Ve named parties, the and filed A Circuit Court as husband and wife in 95 Under Manager, M
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 Signed Signed Signed Signed Subscribed and sworn to before me this day of 19. COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties. County by written order issued. County by state of of the circuit Count of the circuit Count of the Circuit Count of the Circuit County of the Circuit County of the Circuit County of the Circuit County. County by the Clerk of the Circuit County of the Circuit County. County by the Clerk of the Circuit County of the Circuit County. County	Mother 19 Clerk Ve named parties, the and filed A Circuit Court as husband and wife in 95 Under Manager, M
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 Signed Signed Signed Signed Signed Subscribed and sworn to before me this. County of Subscribed and sworn to before me this. County County of Subscribed and sworn to before me this. County of Subscribed and sworn to before me this. County County of Subscribed and sworn to before me this. County written order issued. County by written order issued. County by written order issued. County of Subscribed and sworn to before me this. County by written order issued. County by written order issued. County by written order issued. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Of Indiana dated the State of the day of State of Indiana dated the State of Indiana Groom I	Mother 19 Clerk Ve named parties, the and filed A Circuit Court as husband and wife in 95 Under Manager, M

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE Date of Application HENDRICKS County

	2 ave of application
MALE 3 Salale	FEMALE Medical Examination Report Dated 3 January 1966
Medical Examination Report Dated	13 mm / 20 M
Name of Physician (ay mon) D. (C. 28 70.5)	Name of Physician
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)".	atement-Whoever procures the issuance of a license to marry by any false statement, representa-
MALE APPLICANT	FEMALE APPLICANT
Name First Middle Mast	Name First Middle Keenen
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
= 355. Kentucky Danville, Hewarks, Ind.	Maiden Name if Different Danville, Abudrick, In
Previous Marital Status: Never Married Mumber 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
Usual Occupation Saleman, Van Can	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Beautician; Blue Belle
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 Yes Yes	Pother (Specify)
2. Are you now or have you been within five (5) years an inmate of a county sylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No 4 Yes
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? No Yes
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 Vers
6. Are you now under the influence of intoxicating liquor? No Yes	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 V	4. Are you related to the groom closer than second cousin?
9. Are you likely to so continue? Yes E No	5. Are you now under the influence of intoxicating liquor?
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?
(a) List their full names, ages and addresses Name Age Address	7. Full name of father (if deceased so state) Danville 120
	Residence of father (if deceased so state)
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes□ No□	8. Full maiden name of mother Loxene Devier Leak
(c) Are you complying with any court order or orders issued for	Residence of mother (if deceased so state)
11. Full name of father ames Lowell Morris	Occupation of mother Cousew to - Race of mother who to
Residence of father (if deceased so state) Trans Rands Make	Birthplace of mother (State or foreign country)
Occupation of father Salesman, Van Cang Race of father White	
Birthnlace of father (State or foreign country)	State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.
of mother Tiscilla Joan Senson	
er Race of mother white	Signed Andrews of Good and State of the Stat
er (State or foreign country)	New Address.
I depose and state the information given	Subscribed and sworn to before mothis day of and a 1966
this application is true and correct.	Clerk HENDRICKS Circuit Court
Address 9355 Ventycky Daville	CONSENT OF PARENTS, PARENT OR GUARDIAN
to before me this day of Sanvar, 1966	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
NTS, PARENT OR GUARDIAN	of the other parent differences atymes
his applicant hereby give consent for this marriage. If only one parent	
ch render the consent of the other parent unnecessary	TO BE A SECOND OF THE SECOND O
	State of Indiana
	State of Indiana, County of HENDRICKS ss:
DRICKS 88:	Signed
gned Mrs. Anguilla Jan Domini	Clared
Subscribed and sworn to before me this 15th day of Sandan 190	Subscribed and sworn to before me thisday of
Clerk	day or
	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	Γ. A marriage license having been refused to the above named parties, the
in authorizes and directs the issuance of	art by written order issued
RETURN OF MARRIAGE LICENSE	AND MADE
and the was fitted in my office a marriage licens	se issued by the clerk of the Landing (Cinquit Count
James Liston may	
Be it further remembered, the following marriage certificate was filed in my of	d Dora Lynann Reency
here here	amaka contifer at a si 27 d
one chousand wine hunared and	+ duantilla)
State of Indiana, Groom James Lester Marris	1. Hendricks County, State of Indiana
and, brue de la	leader ab al
were by me united in marriage as authorized by a marriage license issued for the	hat purpose by the Clerk of the Circuit Court of Headkeeks
Dated this Id day of January , 19.66	Frederick a planis
	Signed George a Haires
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Ministers
	Signed Jan fall Ou. 1966.
The state of the s	Then Such s
	Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

	No.
AGE LICENSE	File Sook 28
County	Date of Application

HENDRICKS MALE Medical Examination Report Dated Medical Examination Report Dated Kaymon 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)". FEMALE APPLICANT MALE APPLICANT FirstMiddle Middle Last eenen Date of Birth Place of Birth (State or foreign country) 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 Last Marriage Ended By: White Negro Other (specify). Usual Occupation Color or Race Negro | Other | (specify). Date of birth verified by: Birth Cert. Judicial Decree Usual Occupation Other (Specify). rives Date of birth verified by:

Birth Cert.

Judicial Decree Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes 🗆 Drivers Other (Specify) .. Of Unsound Mind? Yes 🗌 2. Are you under guardianship as a person of unsound mind? No 🗹 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 sylum or home for indigent persons? An Imbecile? No To 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 G Yes 🗌 2. Are you under guardianship as a person of unsound mind? 5. Are you related to the bride closer than second cousin? No 🛛 Yes 🗌 6. Are you now under the influence of intoxicating liquor? 3. Are you afflicted with a transmissible disease? No P Yes 🗌 7. Are you now under the influence of a narcotic drug? No D Yes [4. Are you related to the groom closer than second cousin? 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 W 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) 7. Full name of father Sussell (a) List their full names, ages and addresses Name Address Residence of father (if deceased so state) ... Danvil Occupation of father want we Opholstonace of father w Birthplace of father (State or foreign country) 8. Full maiden name of mother - Uxene (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? No 🗆 Residence of mother (if deceased so state Yes 🗆 Occupation of mother Coufew. to Residence of father (if deceased so state). Birthplace of mother (State or foreign country). Indiana Occupation of father a esman. Van Can Race of father W WITE State of Indiana, Birthplace of father (State or foreign country). I depose and state the information given in this application is true and correct. HENDRICKS 12. Ful Occ Bir State o , hereby give my consent for to Subscri CONSE We, the Subscribed and sworn to before me this signs, s State of ROBERT W. MARLIN, JR. County Notary Public, Kent County, Michigan My Commission Expires Nov. 14, 1969 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 day of January of Indiana dated the Alth f....., 196 ..., authorizing the joining tygether as husband and wife James Dister Maris a Lynann Meny Be it further remembered, the following marriage certificate was filed in my office, to-wit: Trederick R. Daries + George a Laires hereby certify that on the 32 nd day of one thousand nine hundred and 6.4 at danuelle State of Indiana, Groom James Lester Marris of Beadricks County, State of Indiana and, Bride Lora Symann Keeney of Herdricks 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 Court of Headkecks Dated this ... L. rederick a planes Signed George a Harres Official Designation Ministers Filed and recorded in accordance with the laws of the State of Indiana this Is and day of Jebuary , 1966.

Signed

Lendens

8888888

11 6

Lips.

APPLICATION FOR MARRIAGE LICENSE

MALE HENDRICKS County File Dook 28		
Medical Examination Report Date 1	County 15 January 19 16	
Name of Physician	FEMALE Date of Application	
1000	Medical Examination Report Dated A any and 1916	
tion or pretense shall be fined in any sum not exceed a findiana Acts 1995	Name of Physician Lloyd Technology	
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	statement—Whoever procures the issuance of a li	
Name First Middle	a license to marry by any faise statement, representa-	
Date of Birth Month	Name FEMALE APPLICANT	
Place of Birth (State or foreign country) Day Pear 1944	Date of Birth Mari	
Private Indean	Day Den Oal	
Residence Address Street on R. R. City County State	(State or foreign country)	
Provious Marital States N	Residence Address Street or R. R. City County State	
Lost Marriages Francis Brown and Bro	Maiden Name if Different - Danville Janville Janville	
Divorce Annulment	Previous Manita-l Co.	
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages	
Usual Occupation Mechanic : U.S.A.F.	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) USAF 1-D.	Usual Occupation	
1. Are you now or have you been adjudged, diagnosed or considered as:	Down Down Talian Color	
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 sylum 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 remarked.	No Yes	
5. Are you related to the bride closer than second and a Yes	Of Unsound Mind?	
6. Are you now under the influence of intoxicating liquor?	2. Are you under guardianship as a person of unsound mind? No W Yes	
7. Are you now under the influence of a narcotic drug? No Yes No Yes No 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? No Yes	
(If yes, answer questions a, b, c) Yes	5. Are you now under the influence of intoxicating liquor? 6. Are you now under the influence of	
(a) List their full names, ages and addresses	6. Are you now under the influence of a narcotic drug? 7. Full name of father. A drian he Roy Yes	
Name Age Address		
	Occupation of father and Cysonwood the Race of father white	
	Birthplace of father (State or foreign country) Spance (ndiana	
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Edra Alberta Farrow	
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state) D. annile	
11. Full name of father Homes Vreston Souman	Occupation of mother Assembla, Aircraft Blect.	
Residence of father (if deceased so state) any ile un and	Birthplace of mother (State or foreign country)	
Occupation of father Carpente, Stulandace of father white	The state of the second st	
Birthplace of father (State or foreign country) Kansas City, Mo.	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 E STE Amelia Rugh	ap At, Sandall	
Residence of mother (if deceased so state)	Signed Stug Stud WX	
Occupation of mother Race of mother	New Address	
Birthplace of mother (State or foreign country) erre Haute, m. J. State of Indiana,	Subscribed and sworn to before me this day of day of and so 1906	
County of HENDRICKS I depose and state the information given in this application is true and correct.	Clerk HENDRICKS Circuit Court	
Signed Thalda. Downan	COLUMN THE PROPERTY OF THE PARTY OF THE PART	
New Address 22 Danville (ndy	CONSENT OF PARENTS, PARENT OR GUARDIAN	
Subscribed and sworn to before me this A and day of and and 1966	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		
signs, state facts which render the consent of the other parent unnecessary		
	State of Indiana, HENDRICKS ss:	
State of Indiana,	County of	
County of HENDRICKS	SignedFather	
Signed Father	Signed	
Signed	Subscribed and sworn to before me thisday of19	
Subscribed and sworn to before me thisday of, 19	Clerk	
Clerk	A 1/ O 1 and a series the	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	T. A marriage license having been refused to the above named parties, the	
COU	urt by written or and	
in authorizes and directs the issuance of		
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE	
Re At Remembered there was filed in my office a marriage ucens	se issued by the clerk of the mathorizing the joining together as husband and wife	
of Indiana dated the 20th day of January	, Betty J. Lendall	
Be it further remembered, the following marriage certificate was filed in my of	fice, to-wit: 22nd . January	
	ereby certify that on the and day of forther of leading	
a a	t Brownsburg County of Statistics	
State of Indian hundred and I have Bowman	County State of Indiana,	
State of Indiana, Groom Romand Sind Rough of	Lindrick of the Circuit Court of Hendrick	
were by me united in marriage as authorized by a marriage license issued for the	nat purpose by the Clerk of the Contains	
County.	Marrier C. Miller, Minister	
Dated this 22nd day of January, 1	Signed Calvary Full Gaspel Church	
	official Designation Caway 1966	
Filed and recorded in accordance with the laws of the State of Indiana this	Clerk Gala Gantala Ja Clerk	
San recorded the accordance with the	Signed Circuit Court	

MALE

Medical Examination Report Dated_

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

Medical Examination Report Dated_

ENDRICKS	County

Sanvan 1966
Date of Application FEMALE

ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state	ement-Whoever procures the issuance of a license to marry by any false statement, representa-
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	
MALE APPLICANT	FEMALE APPLICANT
Name First Middle Last	Name First Middle Last
Date of Birth Month Day Year	Date of Birth Month Day Year
February 22 1945	August 5 , 1945
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
RI Fillmore Putnan indiana	304 W. Marion Danville Hew Ind.
	Maiden Name if Different
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
and the second s	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	
Usual Occupation Stydent: Race Palu	Color or Race White Negro, Other (specify)
Date of birth verified by: Birth Cert, Judicial Decree	67 7. 11
Other (Specify) and Cand	Usual Occupation Sty Con T. 1.U.
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? No Yes Yes Yes Yes	Other (Specify)
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 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?	2. Are you under guardianship as a person of unsound mind?
5. Are you related to the bride closer than second cousin? No Yes	3. Are you afflicted with a transmissible disease? 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	The state of the s
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?	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?
(a) List their full names, ages and addresses	7. Full name of father transition Lee Hanson
Name Age Address	Residence of father (if deceased so state) Danville, Mo.
	Occupation of father Directo MQ. Malla Race of father White
	Birthplace of father (State or foreign country) Indian
	- 1 11 - 3
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother to by a War Dawfor
(c) Are you complying with any court order or orders issued for their support? Yes \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Residence of mother (if deceased so state)
11. Full name of father Oxmond Maston O' Harr	Occupation of mother whether Race of mother white
Residence of father (if deceased so state) Fillmae, Indiana	
Occupation of father taston enziTII Race of father white	Birthplace of mother (State or foreign country)
	State of Indiana, I denote and state the information given
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.
12. Full maiden name of mother Telen Madeline Kyark.	(borotte of Man Hansel)
Residence of mother (if deceased so state)	Signed Constance Mas Hanson
Occupation of mother leacher. Films Race of mother white	New Address
Birthplace of mother (State or foreign country) Putnan W. Ind.	Subscribed and sworn of before me this ALATA day of Januar, 1966
State of Indiana, I depose and state the information given	HENDRICKS HENDRICKS
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	HENDRICKS Circuit Court
as: I depose and state the information given	Clerk Circuit Court
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	CONSENT OF PARENTS, PARENT OR GUARDIAN
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County of HENDRICKS Signed Attributed New Address. Subscribed and sworn to before my first of this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary. Signed Manney Officer Mother Signed Mother Signed Manney Officer Mendricks Signed Manney Officer Mother Signed Mother Signed Mother Signed Mother Subscribed and sworn to before me thin a state of Indiana. County of County Officer Mendricks Signed Manney Officer Mendricks Signed Mendricks Signed Mendricks Signed Manney Officer Mendricks Signed Mendricks Signed Mendricks Signed Mendricks Signed Mendricks Circuit Court Father Signed Mother Signed Mother Signed Mother Subscribed and sworn to before me thin a series of Indiana, and state of Indiana dated the day of Manney Officer Mendricks Be it further remembered, the following marriage certificate was filed in my officer Manney Officer Manney Officer Mendricks Signed Mendricks County County Mendricks RETURN OF MARRIAGE LICENSE Be it further remembered, the following marriage certificate was filed in my officer Mendricks And State of Indiana, Groom Manney Mendricks Signed Mendricks Signed Mendricks Circuit Court Father Signed Mendricks Father Signe	Clerk 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, County of. HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this. day of 19. Clerk C. A marriage license having been refused to the above named parties, the rt by written order issued and marriage license to the above named parties. AND MARRIAGE CERTIFICATE e issued by the clerk of the forming together as husband and wife deceptory of the forming together as husband and wife deceptory of the forming together as husband and wife deceptory of the forming together deceptory of the field of the forming together deceptory of the field of the forming together deceptory of the field of t

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APPLICATION FOR MARRIAGE LICENS

HENDR	ICKS File Book 28
MALE Medical Examination Report Dated	County 15 Januar 1966
Name of Physician Paul Sanvay 1966	FEMALE Date of Application
ALL OUTSTIONS MUST BE ANGEL	Medical Examination Report Dated 10 Sanvar 1966
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False st make the fined in any sum not exceeding five hundred dollars (\$500.00)". Name First Middle	Name of Physician Par Stanley house MA
MALE APPLICANT	atement—Whoever procures the issuance of a license to many
Name Roas Middle Last	EDWAYS
Date of Birth Month Day	Name First Middle
Place of Birth (State or foreign country)	Date of Birth Month
Residence Address Street or R. R. City	Place of Birth (State or foreign country) Day Year 1917
Box 145 Slolesville He County State	Residence Address Street B. D. and
Previous Marital Status: Never Married Number of Previous Marriages	ATIO Contest of R. R. City County
Last Marriage Ended By: Death Divorce Annulment	Maiden Name if Different over and Indus, Marian
Colores Programment	Previous Marital Status: Never Married Number of Previous Marriages.
(specify)	Last Marriage Ended By:
Date of birth verified by: DRivth Cert Division 1	Divorce M Annulment 1 and 1938
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 over Mach Or; cherolet
Of Unsound Mind?	Date of birth verified by: Birth Cert. Judicial Decree
2. Are you under guardianship as a person of unsound mind? No Yes No Yes No Yes home for indigent persons?	Gother (Specify) Divers with the service of the ser
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: An Imbecile?
4. Are you amicted with a transmissible disease?	Of Unsound Mind?
6. Are you now under the influence of intoxicating linear a	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? Yes No	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?
(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 Style S
	Residence of father (if deceased so state)
A	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes □ No □	8. Full maiden name of mother. Clara Olene Stout
(c) Are you complying with any court order or orders issued for their support? Yes \(\text{No} \) Yes \(\text{No} \)	Residence of mother (if deceased so state)
1. Full name of father Leny y Clay Phillips	Occupation of mother Rage of mother White
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country) hinton Indian
Occupation of father	
Birthplace of father (State or foreign country) Winchesta, My	State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.
2. Full maiden name of mother Lovemna Conglecton	0 x = 9= 111 + 1
Residence of mother (if deceased so state)	Signed Jumela Ju M. Chulock
Birthplace of mother (State or foreign country) Winches te, Ky	New Address
tate of Indiana	Subscribed and sworn to before me this day of San San 1966
County of HENDRICKS I depose and state the information given in this application is true and correct.	Circuit Court
Signed Kogh 2. Shillips	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
ubscribed and sworn to before me this day of HENDRICKS	signs, state facts which render the consent of the other parent unnecessary
Clerk Circuit Court	signs, state facts which fender the consent of the other parent annecessity
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	
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	State of Indiana, HENDRICKS 88:
ate of Indiana,	County of
unty of	Signed
Signed Father Mother	SignedMother
Signed Mother Discribed and sworn to before me this day of 19	Subscribed and sworn to before me thisday of
oscribed and sworn to before me this	Clerk
	inco license having been refused to the above named parties, the
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT.	A marriage neense naving been returned and filed
authorizes and directs the issuance of	
RETURN OF MARRIAGE LICENSE	a issued by the clerk of the Level Circuit Court
Be It Remembered, there was filed in my office a marriage license	19 , authorizing the joining together as husband and wife
Indiana dated the day of and	manita & Mc Clintock
The the south figure was filed in my office	ce, ty-port:
Rev. Maurice C. Tright her	reby certify that on the some day of fundament,
thousand nine hundred and b.b. 7	Statutal County, State of Indiana
te of Indiana, Groom Roger J. Phillips	nasian County, State of Indiana,
Bride Granita J. Mr. Clintack of	
d, Bride franta J. Mc Clintack of the re by me united in marriage as authorized by a marriage license issued for the country	parpose of the Mills
inty.	Signed Rev Maurice C. Ahighty
ted this 32 nd day of January, 19 6 h.	noial Designation Fastar Lynhuist Baptist Church
26	the day of January, 1966.
ed and recorded in accordance with the laws of the State of Indiana this	gned John Lamball Ja Clerk

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No	10	
File	Book 28	
1	7 Sanvan 10	76h
	Date of Application	LYIV

MALE	FEMALE Medical Examination Report Dated 10 Sanuay 1966
Medical Examination Report Dated 10 0 and 1866 Name of Physician Robert 5. Greek M.D.	Name of Physician Robert S. Grief MD
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, representa-
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	FEMALE APPLICANT
Name Edward First Wade St.	Name Rettie Testement Steelman
Date of Birth Manth Day Year 947	Date of Birth Day Year
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) Residence Address
Residence Address Street or R.R. City County Law Ind.	Residence Address Street or H. R. City County State 730 1 2 1 2 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2
Previous Marital Status: Never Married Number of Previous Marriages	Bettie Sue Testemen
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Franc 6. Tenn 1965
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:	Date of birth verified by: Birth Cert. Dudicial Decree
An Imbecile? Of Unsound Mind? Yes 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 home for indigent persons? Yes ☐	1. Are you now or have you been adjudged, diagnosed or considered as: 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? 6. Are you now under the influence of intoxicating liquor? No Yes	2. Are you under guardianship as a person of unsound mind? No Yes 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	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	5. Are you now under the influence of intoxicating liquor? No Yes 6. Are you now under the influence of a narcotic drug? No Yes Yes Yes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father George Washington Testement S
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Custodian School Race of father white Birthplace of father (State or foreign country) Montkey, Tenn.
(b) Are you supporting or contributing to their support? Yes ☐ No ☐	8. Full maiden name of mother Ella Pear Collins:
(c) Are you complying with any court order or orders issued for Yes No	Residence of mother (if deceased so state)
11. Full name of father Edward Floyd Wade S	Occupation of mother Sales ad walks Surfament white Birthplace of mother (State or foreign country) Sun & Set / Ky
Occupation of father Machinethis Schuit Frace of father white	" I'm the same to make product the state of the same to remove the
Birthplace of father (State or foreign country) (No. 2012) Ind.	State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.
Residence of mother (if deceased so state)	Signed Bettie Jestement Steelman
Occupation of mother Sales land in Santa Prace of mother Marte	New Address Same
State of Indiana, County of HENDRICKS Birthplace of mother (State or foreign country) ss: I depose and state the information given in this application is true and correct.	Subscribed and sworn to before the this day of any and 19.00 HENDRICKS
County of HENDRICKS in this application is true and correct. Signed Bluvard & Wash f.	Clerk HENDRICKS Circuit Court
New Address R J. BX 41 Mooresulle Ind.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of day of 19 by 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	signs, state rates which render the consent of the other parent uniccessary.
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	
Share of Tables	State of Indiana, County of HENDRICKS State of Indiana, County of HENDRICKS
State of Indiana, County of HENDRICKS 88:	Signed Father
Signed Father Signed Mother	SignedMother
Subscribed and sworn to before me this	Subscribed and sworn to before me thisday of, 19,
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	RT. A marriage license having been refused to the above named parties, the
in authorizes and directs the issuance	ourt by written order issued
RETURN OF MARRIAGE LICENS	SE AND MARRIAGE CERTIFICATE
of Indiana dated the	mse issued by the clerk of the Hendred Circuit Court 1966, authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my	and Bettie Destement Steelman
1, Fred L. Steinhauer	office, to-wit:
one thousand nine hundred and 44	at Southpart, country of Marian,
and, Bride Bettle Destement Strelman of	at hills the all the second
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 Lendricks
Dated this 21st day of January, 19 6	6. 4. 0 4.
The same of the sa	Official Designation Justice of the Peace
Filed and recorded in accordance with the laws of the State of Indiana this	7th day of Ilhuary , 19 lele
	Signed John Garnall Ju. Clerk
	Linducks Circuit Court

APPLICATION FOR MARRIAGE LICENS

HENDRIC	File DOOK 28
MALE	County
Medical Examination Report Dated 12 Sanda 1911	FEMALE Date of Application
Name of Physician James E. Southa	Medical Examination Report Dated 5 Sanvan 1966
ALL QUESTIONS MUST BE ANSWERED. Chapter 100	Name of Physician
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500,00)"	tement—Whoever process
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 Midue	procures the issuance of a license to marry by any false statement, representa-
taul Falls	Name FEMALE APPLICANT
Date of Birth Month Day Year	Shir en Middle Tast
Place of Birth State or foreign country)	Date of Birth Day Year
Residence Address Street or R. R. City	Place of Birth (State or foreign country)
lenn, Danville, Henricks, Inch	Residence Address Street or R. R. City County States
of Frevious Marriages	Maiden Name if Different, Darville, Henrick, Ind.
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status V
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
Usual Occupation Corp.: ISMC.	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Negro Qther (specify)
Other (Specify) USMC 1.D.	Usual Occupation Un Para Dlar Co
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?	Other (Specify) Drives Licenso.
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? No Yes	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? No Ves
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a passella described.	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? 10. Do you have minor children from one or more former marriages? No Yes	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? 7. Full name of father ACOMO Nother Fellows
Name Age Address	Party of the same
	Occupation of father 2. Vice lest have Race of father White
	Birthplace of father (State or foreign country) Parke (0, 1, 1, 1)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Elizabeth Ann Mandenhall
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state) Dancille, Ind.
11. Full name of father Sohn Arvil Mackey	Occupation of mother Go K: HC. Hosp- Race of mother white
Residence of father (if deceased so state) an vile, India	Birthplace of mother (State or foreign country) Blooming dale lud
Occupation of father Tainter Self engrace of father while	
Birthplace of father (State or foreign country) T kasantville In U.	State of Indiana, HENDRICKS Sa: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother 170112 Way Dunn	Mis low her Fellows
Residence of mother (if deceased so state)	Signed Marie Jame
Occupation of mother (DOM: Tred) The Race of mother Militia	New Address. 17th day of January 19 8
State of Indiana, I depose and state the information given	Subscribed and sworn to before me this
County of HENDRICKS ss: in this application is true and correct.	Clerk Circuit Court
Signed Feel Echward Macket	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 1431, Say to T	We, the parents, of this applicant hereby give consent for this marriag
Subscribed and swern to before me this day of HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unneces
Clerk Chent	
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 Ind
	County of
State of Indiana,	Signed
County of HENDRICKS a Mackey Father	Signed
Signed Mottler	Subscribed and sworn to before me thisday of
Subscribed and sworn to before mathis day of day of 190.00	Superior
Clerk	. At the above name
COMPLETE IN MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above name and the street of the stre
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER CO	urt by written order issued
directs the issuance o	f a marriage license to the
MARRIAGE LICENSI	AND MARKET COURT
Be It Remembered, there was filed in my office a marriage licen	se issued by the clerk of the
of Indiana dated the day of	Jurieu Ort
Be it further remembered, the following marriage certificate was filed in my o	fice, to-wit:
THE THE PARTY STATEMENT	
- The state of the	County, State of The Andrew
Day & durand markey	County, State of
state of Indiana, Groom Pall Cally of of and, Bride Stilley Sul Illaus 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 for	1 p. Did . A Thomas Cable
19-11	Signed B. ht t minister
	Official Distriction, 18 th part
State of Indiana this	18th day of Bankall Je Clerk
Filed and recorded in accordance with the laws of the State of Thanks	Signed Circuit Court

APPLICATION FOR MARRIAGE LICENSE

HENDRIC	KS File Pook 28
MALE	County 17 Sanvan 1966
Medical Examination Report Dated 12 Sangar 1966	FEMALE Date of Application
Name of Physician Sames E. Southan	Medical Examination Report Dated 5 Sanvan 1966
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 presents of the control of the co	Name of Physician Sames E.S
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False stated in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name First Midno	tement—Whoever procures the issuance of a license to marry by any false statement
Name First Middle Middle	FEMALE APPLICANT
Date of Birth Month Pay Vear	First Middle Last
Place of Birth (State or foreign country)	Date of Birth Day Year
Residence Address Street or R. R. City County State	Place of Birth (State or foreign country)
lenn, Danville, Hewitte, 140)	Residence Address Street or R. R. City County States
Let Maniage Ended By	Maiden Name if Different, Darville, Hendrick, Ind.
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 Page
Vother (Specify) USMC. 1.D.	Henrel Occupation 1
1. Are you now or have you been adjudged, diagnosed or considered as:	on employed
Of Unsound Mind? No Yes No	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 sylum or 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? No Yes	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? 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	3. Are you afflicted with a transmissible disease?
8. Are you able to support a family? Yes V No No	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 Yes
10. Do you have minor children from one or more former marriages? No Yes No Yes	6. Are you now under the influence of intoxicating liquor? No Yes
(a) List their full names, ages and addresses	7. Full name of father George Luther Fellows
Name Age Address	Residence of father (if deceased so state) Danville ludiane
	Occupation of father & vice lest wide Race of father white Birthplace of father (State or foreign country)
	8. Full maiden name of mother Elizabeth Ann Manden Wall
(c) Are you complying with any court order or orders issued for their support? Yes No Ver No Ver	Residence of mother (if deceased so state) Danille, lad.
11. Full name of father Sohn Arvil Mackey	Occupation of mother Gook: HC Hosp- Race of mother white
Residence of father (if deceased so state) Sanville, Ind.	Birthplace of mother (State or foreign country) Blooming dale Ind.
Occupation of father ain Ter Self and Race of father White	State of Indiana, I depose and state the information given
Birthplace of father (State or foreign country) Y kasantville Ind.	County of HENDRICKS ss: in this application is true and correct.
Residence of mother (if deceased so state)	Signed Shirley Sul Fellows
Occupation of mother Cook: Federals: Race of mother white	New Address
Birthplace of mother (State or foreign country) Lenxy (, Ind.	Subscribed and sworn to before me this day of day of 19.0
State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.	Clerk HENDRICKS Circuit Court
- HIM AM A.	
	是一种,我们就是在一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个
Subscri	
CONSE T MISCAL THE DE MARKES	hereby give my consent for
We, the	, hereby give my consent for
signs, my In fan, Calvard II	ackly
marry the less tellows	
State o	
County	14 th 1 mer
Subscribed and sworn to before me t	his day of an 1
Subscri	Tk Tk
	gianula Mood
COMI	Notary Public
	De grand and a second a second and a second
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE Con Circuit Court
Be It Remembered, there was filed in my office a marriage licens	se issued by the clerk of the the joining together as husband and wife
day of	
1 The land dated the ar	fice, to-wit:
Be it further remembered, the following marriage certificate was filed in my of	pereby certify that on the 17th day of Jangery County of Hendricks
1, Cos ruchara oriona	The dricks County, State of Indiana
one thousand nine hundred and I Educard Markey State of Indiana Groom Paul Educard Markey	County State of the the
and, Bride Shilling Suse Illands of were by me united in marriage as authorized by a marriage license issued for to County.	that purpose by the Clerk of the Circuit Court of
were by me united in marriage as authorized by a marriage license isolate,	6 Per Richard Thomas Cable
	Official Designation Baptist Princeter , 19.66.
	The state of the s
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS ___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 Middle 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. Last Marriage Ended By: Death Divorce Annulment Color or Race White Negro Other [(specify) Usual Occupation White Negro | Other | (specify). Date of birth verified by: Birth Cent. Judicial Decree Usual Occupation Unemployed 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). 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 home for indigent persons? An Imbecile? If answer to 3 is "yes" has the cause of such condition been removed? Yes 🗌 Of Unsound Mind? 4. Are you afflicted with a transmissible disease? Yes 🗌 2. Are you under guardianship as a person of unsound mind? 5. Are you related to the bride closer than second cousin? No Th Yes 🗌 6. Are you now under the influence of intoxicating liquor? 3. Are you afflicted with a transmissible disease? Yes 🗌 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 🗆 5. Are you now under the influence of intoxicating liquor? 9. Are you likely to so continue? 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 Address Residence of father (if deceased so state). Occupation of father Repairmen. Music Bokkace of father Whi Birthplace of father (State or foreign country) 8. Full maiden name of mother..... (b) Are you supporting or contributing to their support? No 🗆 Yes 🗌 Residence of mother (if deceased so space) Nq 🗆 11. Full name of father.... Occupation of mother tous Residence of father (if deceased so state) Birthplace of mother (State or foreign country). Occupation of father State of Indiana, Birthplace of father (State or foreign country) ... 12. Full maiden name of mother... Residence of mother (if dece Occupation of mother..... Birthplace of mother (State or foreign country) .. state the information given State of Indiana, HENDRICKS HENDRICKS County of Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent 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 ensent of the other parent unnecessar costo du State of Indiana, HENDRICKS State of Indiana, County of .. County of Father Signed Trapnic 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. 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... of Indiana dated, the. 19. 6.6., authorizing the joining together as husband and wife Be it further remembered, the following rriage certificate was filed in my office, to-wit: ... hereby certify that on the .. 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. Official Designation. Filed and recorded in accordance with the laws of the State of Indiana this

Signed.

.Clerk

....Circuit Court

Dated this ..

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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE Book 28 HENDRICKS County MALE Date of Application Medical Examination Report Dated. FEMALE 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, representa-FEMALE APPLICANT 1908 Previous Marital Status: Never Married Number of Previous Marriage Death Divorce Annulment Last Marriage Ended By: Previous Marital Status: Never Married
Number White Negro Other (specify). Color or Race Last Marria Death Divorce Usual Occupation Fre Color or Race Date of birth verified by: Other (Specify). Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile? Of Unsound Mind? Other (Specify) Yes 🗆 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 home for indigent persons? An Imbecile? If answer to 3 is "yes" has the cause of such condition been removed? Yes 🗌 Of Unsound Mind? 4. Are you afflicted with a transmissible disease? Yes 🗆 2. Are you under guardianship as a person of unsound mind? 5. Are you related to the bride closer than second cousin? No W Yes 🗌 6. Are you now under the influence of intoxicating liquor? 3. Are you afflicted with a transmissible disease? Yes 🗌 7. Are you now under the influence of a narcotic drug? Yes 🗆 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? No 🗆 10. Do you have minor children from one or more former marriages? No Yes No BY Yes (If yes, answer questions a, b, c) (a) List their full names, ages and addresses Address Residence of father (if deceased so state) Occupation of father ... Birthplace of father (State or foreign country)..... 8. Full maiden name of mother Wortha Yes No No (b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for their support? Residence of mother (if deceased so state) Yes 🗌 No 🗌 11. Full name of father Birthplace of mother (State or foreign country). We chantes Residence of father (if deceased so state) State of Indiana, Birthplace of father (State or foreign country)... Sox Flora Belle 12. Full maiden name of mother.... Residence of mother (if deceased so state) Occupation of mother ... Birthplace of mother (State or foreign country) Zionerille, Ind. I depose and state the information given in this application is true and correct. Circuit Court State of Indiana, HENDRICKS County of 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...... work to before me this HENDRICKSCircuit 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. Father State of Indiana, Mother HENDRICKS County ofFather 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 Court by written order issued.... ...authorizes and directs the issuance of a marriage license to the above named parties.County.... 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.. , 1966, authorizing the joining together as husband and wife Marjorie & mise of Indiana dated the 22 Be it further remembered, the following marriage certificate was filed in my office, to-wit!

I, Marun N. Look hereby certify ...hereby gertify that on the 29th County, State of Advana County, State of Indiana) one thousand nine hundred and (e. le were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of Skndrice County. Signed Mary

Official Designation

Signed.

Clerk

.Circuit Court

Form Prescribed By Health under Authority

STATE OF INDIANA

Indiana State Board of APPLICATION FOR MARRIAGE LICENSE File Chap. 126, Ind. Acts 1905 HENDRICKS County Date of Application MALE FEMALE Medical Examination Report Dated Medical Examination Report Dated Name of Physician Name of Physician ALL QUESTIONS MUST BE XNSWERED. 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 Middle Name norris Box 330 Previous Marital Status: Never Married Number of Previous Marriages. Death Divorce Annulment Previous Marital Status: Never Married Number of Previous Marriages. White Negro Last Marriage Ended By: Color or Race Other [(specify)... Death Divorce Annulment Usual Occupation White Negro | Other | (specify) ... Color or Race Date of birth verified by: ☐ Birth Cert. ☐ Judicial Decree Usual Occupation Grevers reins 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? 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? 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? Yes 🗌 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? No 🗆 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) (a) List their full names, ages and addresses Name Age Address (b) Are you supporting or contributing to their support? Yes 🗆 No П (c) Are you complying with any court order or orders issued their support? Yes 🗌 No 🗆 Occupation of mother / Muri (if deceased so state). Birthplace of mother (State or foreign country) Occupation of father. Birthplace of father (State or State of Indiana, HENDRICKS County of. 12. Full maiden name of mother. Residence of mother (if deceased Occupation of mother New Address. Birthplace of mother (State or foreign country Subscribed and sworn to before me th State of Indiana, depose and state the information given this application is true and correct. HENDRICKS HENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN Subscribed and sworn to before We, the parents, of this applicant hereby give consent for this marriage. If only one parent HENDRICKS 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 State of Indiana, County of .. HENDRICKS County of .. Father 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 ducky County Court by written order issued 1-20-66and 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...... of Indiana dated the .. 1906, authorizing the joining together as husband and wife Vorky dr. Be it further remembered the following marriage certificate was filed in my office, to-wit: Darbara Venita Drewe hereby certify that on the A. 7 one thousand nine hundred and State of Indiana, Groom. Ulua and, Bride Duchara were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of Official Designation ! Renester Filed and recorded in accordance with the laws of the State of Indiana this. Ind Signed.

.....Circuit Court

Dated this

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

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County MALE Medical Examination Report Dated FEMALE 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, representa-Name of Physician FEMALE APPLICANT Date of Birth rances Previous Marital Status: Never Married | Number of Previous Marriages Death | Divorce | Annulment | Hamilton 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 | Usual Occupation S Color or Race Date of birth verified by: Birth Cert. Judicial Decree Other (Specify) .. 1. Are you now or have you be An Imbecile? 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? 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 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? Yes 🗆 4. Are you afflicted with a transmissible disease? Yes 🗆 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? Yes 🗌 6. Are you now under the influence of intoxicating liquor? 3. Are you afflicted with a transmissible disease? No D Yes 🗌 Yes 🗆 7. Are you now under the influence of a narcotic drug? No Ta Yes 🗆 Yes 🗆 4. Are you related to the groom closer than second cousin? Yes No No 8. Are you able to support a family? 5. Are you now under the influence of intoxicating liquor? 9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? No 🗌 Yes 🛂 Yes 🗆 (If yes, answer questions a, b, c) (a) List their full names, ages and addresse 7145 E.82W Occupation of father Carata Alleson. Birthplace of father (State or foreign country) 8. Full maiden name of mother. Clarabell. Yes No 🗆 (b) Are you supporting or contributing to their support? Yes 🔲 No 🖫 Occupation of mother to the contract of 11. Full name of father...... Birthplace of mother (State or foreign country) Residence of father (if deceased so state). Occupation of father Tay me: Settle. State of Indiana, HENDRICKS Birthplace of father (State or foreign country)....Soon.v.i 12. Full maiden name of mother Opal Residence of mother (if deceased so state) ... Occupation of mother North Ard : St Vincon Birthplace of mother (State or foreign country) Raint Lick, Kin HENDRICKS ss: I depose and state the information given in this application is true and correct. Circuit Court State of Indiana, HENDRICKS County of .. Signed Donald Eugene Sill CONSENT OF PARENTS, PARENT OR GUARDIAN New Address Great Lakes We, the parents, of this applicant hereby give consent for this marriage. If only one parent N day of Sansa signs, state facts which render the consent of the other parent unnecessary.... thefore me this 130 HENDRICKSCircuit 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 ofFather State of Indiana, HENDRICKS Mother County ofFather Signed.. Subscribed and sworn to before me this... Mother 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....authorizes and directs the issuance of a marriage license to the above named parties.County..... RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE One Ka Circuit Court Be It Remembered, there was filed in my office a marriage license issued by the flork of the... 1900., authorizing the joining together as husband and wife Sandra Lee Francis Be it further remembered, the following marriage certificate was filed in my office, to-wit:

I, Hardel Lamer hereby gertificate was filed in my office, to-wit: hereby gertify that on the 5th .. County, State of Indiana County, State of Indiana), one thousand nine hundred and...... Hendricks 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. Lebruary , 19 66.

Official Designation.

Clerk

Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

County HENDRICKS

	No. 2
	File Book 28
	22 San vay 1966 Date of Application
	Date of Application
A. W.	205-1211

FEMALE MALE Medical Examination Report Dated 20 Medical Examination Report Dated_

Name of Physician Name of Physician	Name of Physician A. IT. A. III.
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False sta	tement-Whoever procures the issuance of a license to marry by any false statement, representa-
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	FEMALE APPLICANT
Name First Middle Last	Name First Middle Last
Name Steren Edward Ross	Sanet Sur Wheth
Date of Birth Month Day Year	Date of Birth Month Day Year L
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)
Residence Address Street of R. R. City County State	Residence Address / Street or R. R. City County State
RI hizton Hadrick Ind.	North Salam Hawlack Indian
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different
	Previous Marital Status: Never Married Number of Previous Marriages
Last Marriage Ended By: Death Divorce Annulment	Frevious marital Status. Never marited - Framber of Trevious maritages
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Ward Commention S. I S. T. T. T.	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Color of Race White E Regio Collect Collectify
Other (Specify)	Usual Occupation : Sook Keope. Danille dat
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? 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 as your or	1. Are you now or have you been adjudged, diagnosed or considered as:
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? No Yes
6. Are you now under the influence of intoxicating liquor?	3. Are you afflicted with a transmissible disease?
7. Are you now under the influence of a narcotic drug? No Yes Ves Ves No Ves	4. Are you related to the groom closer than second cousin? No F Yes
8. Are you able to support a family? 9. Are you likely to so continue? Yes No Ves No Ves No Ves	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	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 Lerry Galen Wyethy
Name Age Address	Residence of father (if deceased so state) at h Saleun, Jul
	Occupation of father Famer Race of father White
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother. Partie Irene Sohnse
(b) Are you supporting or contributing to their support? Yes No (c) Are you complying with any court order or orders issued for	, w. + c -
their support?	Residence of mother (if deceased so state)
11. Full name of father Toyle Toward Soss	Occupation of mother A. A. A. Race of mother W. A. C.
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father tarme: Selt: Race of father with	The second secon
Birthplace of father (State or foreign country) Ec Roy CP, 16.	State of Indiana, HENDRICKS Second to the information given in this application is true and correct.
12. Full maiden name of mother Anna hou Atckman	County of
Residence of mother (if deceased so state)	Signed Caret Sue Wyelk
Occupation of mother Lauseucke Race of mother white	New Address Sauge
Birthplace of mother (State or foreign country)	Subscriber and sworp to before my cha 122nd day of Sanday 1966
State of Indiana, County of HENDRICKS State of Indiana, I depose and state the information given in this application is true and correct.	HENDRICKS
	Clerk Circuit Court
Signed Steven Edward Ross	
New Address. 77 2 tay 140.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworh to before me wis 22 and ay of 2 and 1966	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	
signs, state facts which render the consent of the other parent unnecessary	
· · · · · · · · · · · · · · · · · · ·	State of Indiana, HENDRICKS
State of Indiana,	County of
County of HENDRICKS	SignedFather
Signed Father	Signed
Signed Child Fix Hass Mother	
Subscribed and sworn to before me this day of day of 1906	Subscribed and sworn to before me thisday of
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR'	T A mamias lines had been been been been been been been bee
	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 MARRIAGE CERTIFICATE
Be It Remembered, there was filed in my office a marriage licen.	
of Indiana dated the day of January	19.66, authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my of	· (but lineth)
one thousand nine hundred and	hereby certify that on the 38th day of January
11	at famestown, County of Done,
State of Indiana, Groom Struen Edward Rass	of Hendricks County, State of Indiana
and, Bride fault Due Truth of	Vendricks County, State of Indiana,
were by me united in marriage as authorized by a marriage license issued for t	that purpose by the Clerk of the Circuit Court of Lenducks
Dated this 26 th day of January 1066	
, 19.6 6	Signed William & Tresslar
The second secon	Official Designation Methodist Play wing and
Filed and recorded in accordance with the laws of the State of Indiana this	3rd day of Fellery
	, 19. L. b.

..Clerk

Circuit Court

Form Prescribed By

Indiana State Board of Health under Authority APPI ICAMPAGE APPI	
Health under Authority Chap. 126, Ind. Acts 1905 APPLICATION FOR I	MARRIAGE LICENSE
HENDRIC	CKS THE DOOR AD
MALE Medical Examination Report Dated 17	
of tundan 966	FEMALE Date of Application
Name of Physician . D. Gaddy W.D.	Medical Examination Report Dated 17 Sauvan 1866
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	Name of Physician N.D. Galdy, MD.
MALE APPLICANT	tement—Whoever procures the issuance of a license to marry by any false statement, representa-
Name First — Middle DI. Last	FEMALE APPLICANT
Date of Birth Month Pay	First Middle Last
Place of Birth (State or foreign country) 1943	Date of Birth Month Day
Residence Address Street or R. R. City County State	Place of Birth (State or foreign country)
321 Stadium Dr. Brownsbury (bu)	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name il Different Solmant Indels Maries, Ind.
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	
Usual Occupation Prints' Radio	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 Act. Clak. Blue Grass-Stretch
Of Unsound Mind?	Date of birth verified by: Birth Cert. Judicial Decree
2. Are you under guardianship as a person of unsound mind? No Yes Yes Yes	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county sylum or home for indigent persons? 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 \(\subseteq \text{Yes} \)	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 narcotic drug? No Z Yes Z	3. Are you afflicted with a transmissible disease?
8. Are you able to support a family? Yes V No	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? 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? No Yes
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. Law You e Dugan
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so store) In diameted to lude
11. Full name of father Suron Bueford Phillips	Occupation of mother Louise Race of mother White
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Machinett. All don-Race of father white	The state of the s
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS State of Indiana, HENDRICKS Bas: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Talita	moundan.
Residence of mother (if occased so state)	Signed Some Some Some Some Some Some Some Some
Occupation of mother. Race of mother. Race of mother. In January	Subscribed and sworn to before me this 222 day of Sanua 1966
State of Indiana, I depose and state the information given	Subscribed and sworn to be lot the the Clerk HENDRICKS Circuit Court
County of HENDRICKS ss: in this application is true and correct.	
Signed Organe K. Shillip	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address Source Control of the Co	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and swarn to before me this day of 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,
	County of Sate of All Hendricks
State of Indiana,	Signed
County of HENDRICKS Signed Father	SignedMother
Pioties	Subscribed and sworn to before me this
Subscribed and sworn to before me thisday of	Clerk
Clerk	I are the above named parties, the
COMPANY DESCRIPTION OF LICENSE ISSUED BY ORDER OF COUL	RT. A marriage license having been refused to the above named parties, the court by written order issued
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY	ourt by written order issued
in County County authorizes and directs the issuance	of a marriage license to the doctor
TOTAL OF LICENS	AND MALE COURT
Be It Remembered, there was filed in my office a marriage lice	mse issued by the celk of the
of Indiana dated the	
Example R. Phillips filed in my	office, to-wit: 29th day of Janyary,
Be it further remembered, the following marriage certificate was filed in my I, Lester B. Yearisk	hereby gertify that on the and country of Hendricks,
one thousand nine hundred and 66 R Philips	at Dendricks County, State of Indiana
one thousand nine hundred and Phelips	County, State of hardy,
State of Indiana, Groom Engine R. Philippin of and, Bride Jan Dugan of were by me united in marriage as duthorized by a marriage license issued for County.	that purpose by the Clerk of the Circuit Court of Head Wille
were by a marriage license issued jo	and the same
County. Dated this 29th day of January, 196.	6. Signed Lester B. Yerrick
Dated this 29th day of January	or in Decignation Munistry

Signed..

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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

File Sook 28

2 4 Sanuar 196

Date of Application

... Circuit Court

HENDRICKS _County Date of Application FEMALE Medical Examination Report Dated Medical Examination Report Dated Z 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 Kina Date of Birth Maiden Name if Differen 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 M Negro □ Other □ (specify) Last Marriage Ended By Death Divorce White Negro Color or Race Other (specify) Date of birth verified by: Birth Cert. 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 T Of Unsound Mind? 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 advlum 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? 2. Are you under guardianship as a person of unsound mind? No 📝 Yes 🗌 6. Are you now under the influence of intoxicating liquor? 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? Yes F No 🗆 10. Do you have minor children from one or more former marriages? Yes Z No 🗆 (If yes, answer questions a, b, c) (a) List their full names, ages and addresses 7. Full name of father. Residence of father (if deceased so state) Occupation of father. Tarmer Birthplace of father (State or foreign country). Namey house (b) Are you supporting or contributing to their support? 8. Full maiden name of mother. No 🗆 (c) Are you complying with any court order or orders issued for their support? Residence of mother (if deceased so state) No 🗆 IXXXX Occupation of mother Residence of father (if deceased so state). Birthplace of mother (State or foreign country) ... Occupation of father ale man, Cen. ling Race Birthplace of father (State or foreign country). State of Indiana, and state the information given application is true and correct. HENDRICKS 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)...... rame Ala. State of Indiana, I depose and state the information given in this application is true and correct. HENDRICKS County of ... HENDRICKS .Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN New Address We, the parents, of this applicant hereby give consent for this marriage. If only one parent 1900 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, HENDRICKS State of Indiana, County of .. Signed. 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 Creust Court by written order issued 25 Sanvan 1968 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 glerk of the...... of Indiana dated the .. Be it further remembered, the following marriage certificated was filed in my office, to-wit: o.b., authorizing the joining together as husband and wife hereby certify that on the. one thousand nine hundred-and .. State of Indiana, Groom. of Hendrick were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court Official Designation Filed and recorded in accordance with the laws of the State of Indiana this ... I the

.... Circuit Court

STATE OF INDIANA Health under Authority APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS Book 28 _County MALE 24 Saway 19 Date of Application Medical Examination Report Dated FEMALE 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)". FEMALE APPLICANT Residence Ad Previous Marital Status: Never Married V Number of Previous Marriage Death | Divorce | Annulment | Last Marriage Ended By: Previous Marital Status: Never Married Number of Previous Marriages White Negro Color or Race Other [(specify). Last Marriage Ended By: Death Divorce Annulment Date of birth verified by: Birth Cert. Judicial Decree Color or Race White Negro | Other | 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? Other (Specify) ... 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? 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 M Yes 🗌 6. Are you now under the influence of intoxicating liquor? 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 🗀 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 Name Age Address Occupation of father Acrem 18 Self Birthplace of father (State or foreign country) 8. Full maiden name of mother (b) Are you supporting or contributing to their support? Yes No No (c) Are you complying with any court order or their support? Residence of mother (if deceased so state) No I 11. Full name of father Occupation of mother. Residence of father (if deceased so Birthplace of mother (State or foreign country) State of Indiana, Birthplace of father (State or foreign country). HENDRICKS 12. Full maiden name of mother... Occupation of mother Tro Osci Co. Ity Con Bace of m Birthplace of mother (State or foreign country) ... State of Indiana, HENDRICKS County of CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage signs, state facts which render the consent of the other parent un HENDRICKS Mothe 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 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 24 any 1966 and filed authorizes and directs the issuance of a marriage license to the above named parties. 31. \$ ApoWatur RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE of Indiana dated the..... Debra Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the 39th I, Narren a. Robbins County, State of Indiana County, State of India of Gendricks State of Indiang, Groom Kibert 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 Signed Narren a. Dated this. Official Designation ...

Filed and recorded in accordance with the laws of the State of Indiana this. 3/ot

Indiana State Board of Health under Authority Chap. 126, Ind. Acts 1905 APPLICATION FOR MARRIAGE LICENSE HENDRICKS		
HENDR	MARRIAGE LICENSE	
MALE	County Pile Sook 28	
Name of Physician B. 1	FEMALE Date of Application	
TREAD AND	Medical Examination Report Dated 19 Sanuary 1966	
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	statement—Whoever the	
Name First Middle	makever procures the issuance of a license to marry by any false statement, representa-	
Date of Birth Month Day Asher	Name FEMALE APPLICANT	
Place of Birth (State or foreign country)	Date of Birth Ponth Day	
Residence Address Street or R. R. City County State	Place of Birth (State or foreign country)	
Tancoon ed Plaintield He Indi	Residence Address Street or R. R. Aty County State	
Last Marriage Ended By	Maiden Name if Different 102 Main tiels then, Ind.	
Color or Race White IV Norm I	Previous Marital Status: Never Married Number of Previous Marriages	
Usual Occupation Student Stude	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) 1. Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation 8 to dent: Plan Sield.	
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes 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 sylum 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?	An Imbecile?	
5. Are you related to the bride closer than second cousin? 6. Are you now under the influence of intoxicating liquor?		
7. Are you now under the influence of a narcotic drug?		
8. Are you able to support a family? 9. Are you likely to so continue?	-M-5	
10. Do you have minor children from one or more former marriages? (If yes, answer questions a, b, c)	AFFIDAVIT	
(a) List their full names, ages and addresses Name Age Addre CTAT	E OF INDIANA	
JIAI	E OF INDIANA SS:	
COU	NTY OF Hendricks	
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for	Claude H. Asher	
their support?	AME	
Residence of father (if deceased so state)	203 Hanceek Rd., Plainfield, Indiana	
2 = 11	DDRESS	
Birthplace of father (State or foreign country)	Deposes and says upon his (or her) oath that:	
Residence of mother (if defended to state) Right City	, Claude H. Asher, hereby give my consent for	
Occupation of mother Troubert Control of mother		
State of Indiana, I depose and state th	y sen, Rebert E. Asher, to marry Debbie	
County of HENDRICKS in this application is	IcCellum.	
New Address SI BY 702 P		
Subscribed and sworn to before me this HENDRICKS		
Clerk	THE PROPERTY OF THE PARTY OF TH	
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage.		
signs, state facts which render the consent of the other parent unnecess		
attached.		
State of Indiana,	M name	
County of HENDRICKS Signed	Claude Hushis	
Signed Mys - (Laude 195)	SIGNED	
Subscribed and sworn to before me this day of Subscribed and sworn to before me this subscribed and sworn to be subscribed and sworn to	scribed and sworn to before me this 24 day of January	
	66 By 0)	
COMPLETE IF MARRIAGE LICENSE ISSUED BY OF	FOLLY MOTARY PUBLIC	
in Carly authorizes and dir	19 114-19	
RETURN OF MAI	commission expires 3-14-67	
Be It Remembered, there was filed in my offe	מינון מי ביויי עם מוניים	
The state of the s	office, to-wit: 29th day of January	
Be it further remembered, the following marriage certificate was filed in my 1, Naview C. Robbins		
000 41	Hadricks County, State of	
(Hendricks County, State of State A.	
and, Bride Delica f. Me Collism of were by me united in marriage as authorized by a marriage license issued for County.	that purpose by the Clerk of the Citation	
	6. Signed Narren a. Kabbins	
Dated this 37 39th day of January	Official Designation Christian Marie 1966	
Filed and recorded in accordance with the laws of the State of Indiana this	3/st day of Dambald Jr Clerk	
Filed and recorded in accordance with the laws of the State of	Signed Jerdricks Circuit Court	

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS ___County

No.	25	
File_	Book	28
2	Samu Date of Appli	any 1966

......Circuit Court

MALE 5 12	FEMALE Medical Examination Report Dated 17 Sanua 1966
Medical Examination Report Dated	Name of Physician Welter ME Mannis M.D.
Name of Physician	
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 Middle Last
Name First Middle Last	Name Sue Ann Eastes
Date of Birth Month Day Year	Date of Birth Month 25 1950
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)
Residence Address Street of R. R. City County State	Residence Address Street or R. City County State
3246 Clove Dr. Hewroks, Inc.	Maiden Name if Different
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	
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation Parater: CE. Mansure	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Student: Ben Davis.
Other (Specify)	Date of birth verified by: Birth Cert. Judicial Decree
An Imbecile? Of Unsound Mind?	Other (Specify)
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: An Imbecile? Yes
home for indigent persons? 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?	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? 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
9. Are you likely to so continue?	5. Are you now under the influence of intoxicating inquisi-
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? 7. Full name of father
(a) List their full names, ages and addresses Name Age Address	Residence of father (if deceased so state) Indiamonics lud.
Addition 1.00	Occupation of father Clark: Let. We 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 Lettie May 15427
(c) Are you complying with any court order or orders issued for	Residence of mother (if deceased so state)
their support? 11. Full name of father. Charles Merval Harding	Occupation of mother Waites Race of mother White
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Machina Anchesace of father White	State of Indiana, I depose and state the information given
Birthplace of father (State or foreign country)	County of
12. Full maiden name of mother	Signed Sue ann Eastes
Residence of mother (if deceased so state)	New Address.
Occupation of mother	Subscribed and worn to before me his 125 day of Sansan 19.6.
State of Indiana, I depose and state the information given	Clerk Circuit Court
County of HENDRICKS in this application is true and correct.	
Ishrum R2 Bx H5 Indal Ind.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sylph to before mathia 25 day of San Jon 1966	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	tants separates con
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Wares mothers consist
signs, state facts which render the consent of the other parent unnecessary	as how where abouts are unknown
	State of Indiana,
State of Indiana,	County of HENDRICKS SS:
County of HENDRICKS	Signed Howard Carries Father
Signed Sonath and Harding Mother	Signed Mother
Signed A. C. A. John Subscribed and sworn to before me this	Subscribed and sworn to before me this day of 19.000
Clerk	Clerk
COMPLETE IE MAPPIACE LICENSE ISSUED BY OPDED OF COL	JRT. A marriage license having been refused to the above named parties, the
	Court by written order issued 25 San vor 6 and filed
	e of a marriage license to the above named parties. 3) a a a to \$ Eastes moth
	ISE AND MARRIAGE CERTIFICATE
We It Remembered, there was filed in my office a marriage lie	cense issued by the clefk of the Court
of Indiana dated the 25th day of annuar	, 19 authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my	and Sue Ann Eastes y office, to-wit:
1, Ried M. Stewart	hereby gertify that on the 39 th day of January,
one thousand nine hundred and	at Dudgeport, County of Marion,
	of Marian County, State of Indiana
	Marian County, State of Addants,
were by me united in marriage as authorized by a marriage license issued for County.	or that purpose by the Clerk of the Circuit Court of
Dated this 29th day of January, 196	6.6. Sims food In Atrus 47
	Official Designation Daston, Methodist (Surah)
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Paston, Mulanust Cult

.Circuit Court

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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS County MALE Medical Examination Report Dated Date of Application FEMALE 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)". Middle FEMALE APPLICANT Residence A 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)... Color or Race Last Marriage Ended By: Death Divorce Annulment Usual Occupation 34 esman Color or Race Date of birth verified by: Birth Cert. Judicial Decree Other 13 (specify) .. Other (Specify) ... Usual Occupation Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile?
 Date of birth verified by: Birth Cert. | Indicial Decree Of Unsound Mind? 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 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? 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 🗆 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? Yes No 🗆 9. Are you likely to so continue? No 🗆 5. Are you now under the influence of intoxicating liquor? Yes 🔽 10. Do you have minor children from one or more former marriages? No 🗆 Yes 🗌 6. Are you now under the influence of a narcet (If yes, answer questions a, b, c) (a) List their full names, ages and addresse Address Occupation of father Mallman Birthplace of father (State or foreign (b) Are you supporting or contributing to their support? Yes 🗌 No 🗆 (c) Are you complying with any their support 2 No 🗆 Birthplace of mother (State or foreign country) .. Residence of father (if deceased Occupation of father ec. Off xe HENDRICKS Birthplace of father (State or foreign country). 12. Full maiden name of mother....V.e. Birthplace of mother (State or foreign country). Nachis State of Indiana, HENDRICKS County of ... CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one par Subscribed and sworn 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. noterized State of Indiana, HENDRICKS County of State of Indiana, HENDRICKS County of..... Signed, Subscribed and sworn to before COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the County Crevit Court by written order issued 28 Danuay 1966authorizes 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 desk of the authorizing the joining together as husband and wife Brenda Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the 28 th day of January 1, Narren a. Robbins at Plainfield County, State of Indiana of Hindricks County, State of Indiana, one thousand nine hundred and.... were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of Benduck County. Signed Marren a County. Official Designation Cheir Dated this ... Filed and recorded in accordance with the laws of the State of Indiana this. 3/st.

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APPLICATION FOR MARRIAGE LICENSE

FOR MARRIAGE LICENSE

ENDRICKS

County

Date of Application

MALE	HENDRICE	County 2555
Medical	pers Dates 2 4 Saw (19 18)	Date of Application
Name o	Damas P Charles	Marie Communition Report Plans
ALL QUESTIC	The species of the second	dall media
tion or pretens		Carle State of Land State of D.
and the second	WALK APPLICANT	the second property of the language of a financial provided to the part of the second property.
Name		PERALS APPLICANT
Date of Birth	the back by	January 23, 1966
Place of Birth	The last	The land
Residence Addr	had range	PARA SELECTION OF THE PARAMETER AND THE PARAMETE
8	The Designation of the Party of	
Previous Marita	We the parents do hereb	y give our consent for
Last Marriage	Brenda Lee Berlin and R	
Color or Race		
Color of Race	obtain a marriage licen	Se. W. See Speed April 2012 Property Cl. Assessment Cl.
Usual Occupatio	The state of the s	
Date of birth ve	10 Top Cort. O And Sol Bestea	Pharles P. Berlin
Other (S		the deline
An Imb Of Uns		1
2. Are you und	The same of several states	Francis Derlin
3. Are you not home for inc	the matter and the state at the same and a sount parties as	00111101
If answer to 4. Are you affi		Kokert G. Hank JR.
5. Are you rela		The first the representative as a party of the last of
6. Are you nov	Section of Stophentar Sparit Section 2 Section 1	
8. Are you able		and briefer Comments of the State of the Sta
9. Are you like 10. Do you have	The same of the sa	o he fore we a notery public in
(If yes, ansv	Subscribed and sworn to	o before me, a notary public in tate of Indiana this 23rd day of
(a) List thei	Jahuary 1966	
		Merchith 4 Hope
	(O) (V) (O)	Meredith L. Pope, Notary Public
	28份为20。	E Allinea
(b) Are you (c) Are you	My Commission Expires	leb. 41769
their sup	The December of the Control of the C	The William Trust Roman
11. Full name of	WIND LEVE	
Residence of	The Court of the C	FILED
Occupation of		Richard Judiana
Birthplace of	was bear bateas!	JAN 2 5 1966
Residence of	La Low Marine Marine To The Control of the Control	50 4 0010
Occupation of		John Jambold fr.
Birthplace of	Madram, indicate	CLERK HENDRICKS COURT
State of Indiana,		
County of	Et Day Durak Co	The state of the s
		SHEARING OF PARTIES STREET OF STADULES.
7	and and being	the the sentential this post-one decks are examine for this story and the
Subscribed and sw	Any of Nacottemporal Physics County County	which while the property to the property of the order parent occupants.
		the state of the s
CONSENT OF PA		
We, the parents, c	the state of the s	
, state facts		A STATE OF THE PARTY OF THE PAR
۵-		
State of Indiana,		
County of		
	the the words	mortore ma tuis day of Standard 1940
C. V.	100 UL	Clerk
Subscribed and swo		
	OPPUR OF COUR	T. A marriage license having been refused to the above named parties, the urt by written order issued
COMPLETE	F MARRIAGE LICENSE ISSUED BY ORDER OF COOL	urt by written order issued. 28 Sauvas 1944 and filed
	County	f a marriage license to the above named parties
in Class	County Co	AND MARRIAGE CERTIFICATE Len Je Circuit Court
	RETURN OF MARRIAGE LICENSE	se issued by the deak of the the joining together as husband and wife
那	e It Remembered, there was filed in my ones a man	, 19 bb, authorizing the joining Barlin
of Indiana Jak	ad the	
Be it fourth	o set le following marriage certificate was filed in my o	process certify that on the 28 th day of January
1. Of an	ven a. Robbins	hereby certify that on the south, country of Headricks, at Plainfield, State of Indiana
one thousand	ine hundred and 66 , M 4 M.	[1] In a half country, Source of
State of Indian	na Groom Robert Gene Haak go	Sundricks County, State of Indiana,
and, Bride	Grenda Lee Berlia	that purpose by the Clerk of the Circuit Court of
were by me uni	of Groom Replet Gene Haak good of Granda See Berlin of Granda of G	Warren A Robbias
County.		Signed Marie + Minister
Dated this	38th day of June	Official Designation Christian, 1966.
	time this s	3/st day of Januald Ja Clerk
Filed and recor	ded in accordance with the laws of the State of Indiana this	Signed January Circuit Court
10001		

a Waly

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS ___County

No	2	7
File	Book	28
2	8 San	van 1966
	Date of App	olication

MALE 22	FEMALE Medical Examination Report Dated 28 January 1966
Medical Examination Report Dated & Sanua 1966	Medical Examination Report Dated 200 and 1966
Name of Physician A. Cedric Johnson dr.	Name of Physician A. Ce dric Solundar Or.
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False statement of the statement	tement-Whoever procures the issuance of a license to marry by any false statement, representa-
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	FEMALE APPLICANT
Name First Middle List	Name A First Middle Last
Joseph F. Christian	Date of Birth Month, Day Year
Date of Birth Month 22 1947	December 21 1937
Place of Birth State or Joreign country	ludian aroles, lud.
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
	Previous Marital Status: Never Married Number of Previous Marriages
Last Marriage Ended By: Death Divorce Annulment	
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce P Annulment
Usual Occupation Seam on : VSN.	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation ashier. Tooks
Other (Specify) 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? No Yes \to Yes	Dother (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 around or	1. Are you now or have you been adjudged, diagnosed or considered as:
home for indigent persons?	An Imbecile? Of Unsound Mind? No 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? No 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 No Yes	3. Are you afflicted with a transmissible disease?
6. Are you now under the influence of intoxicating liquor? 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? 9. Are you likely to so continue? Yes No	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	6. Are you now under the influence of a narcotic drug? No W Yes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father Chester O. Dre Kessen
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Leat theat him 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 Many one + Helen Fancher
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state)
11. Full name of father Sosph Kyle hrightam	Occupation of mother
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Occupation of father wase Contral Race of father white	State of Indiana, State of Indiana, I depose and state the information given
Birthplace of father (State or foreign quuntry) & Jan Sluth	County of HENDRICKS ss: in this application is true and correct.
12. Full maiden name of mother.	signed Marionic Juthrouse
Occupation of mother Bake: RSC.1. Race of mother Walt Te	Same
Birthplace of mother (State or foreign country) Sal Tville, Va	Subscribed and sworn to before me this 28 day of Samuan, 1866.
State of Indiana, Indiana, I depose and state the information given	HENDRICKS
County of HENDRICKS 88: In this application is true and correct.	Clerk Circuit Court
Signed Joseph C. hashidan	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 be ore me this day of day of law and 1990.	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 concent of the other parent unnecessary	
torenty Divorced. Mother	
has cratads.	State of Indiana, County of HENDRICKS Ss:
State of Indiana, HENDRICKS	
County of Signed Father	SignedFather
Signed MNA THIMAON Jumes Mother	SignedMother
Subscribed and sworn to before me the 28 day of Day upon 1966	Subscribed and sworn to before me thisday of
John Jandell J. Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUL	RT. A marriage license having been refused to the above named parties, the
	ourt by written order issuedand filed
in authorizes and directs the issuance	of a marriage license to the above named parties.
RETURN OF MARRIAGE LICENS	SE AND MARRIAGE CERTIFICATE
Be It Remembered, there was filed in my office a marriage lice	nse issued by the clerk of the
of Indiana dated the day of Altuary	, 19.2.E., authorizing the igining together as husbana and wife
Be it further remembered, the following marriage certificate was filed in my	and Marjorie Jo. Suttlerow
1, Eugen E. Crawley	hereby certify that on the 1st day of February
one thousand nine hundred and 66	at Plainfield County of Hendricks
State of Indiana, Groom Joseph C. Christian	of Hendricks County, State of Indiana
and, Bride Mayarie J. Sutterow of	Hendricks County, State of, Indiana,
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 Headricks
Dated this 1st day of February, 19 6	6 6 6 1
, 10	Signed Eugene E. Crayley
Pilled and recorded in secondary with their	Official Designation Justice of the Peace
Filed and recorded in accordance with the laws of the State of Indiana this	day of chicary, 19 let
	Signed John Samball Ji Clerk
	Circuit Court

APPLICATION FOR MARRIAGE LICENSE

MALE	County 29 January 1966
Medical Examination Report Dated 13 Sanua 1966	FEMALE Date of Application
Name of Physician Dames E. Dames M	Medical Examination Report Dated 13 Sanvan 1966
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acta 1995	Name of Physician Sames E. Stamm M
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name First Mistr.	tement—Whoever procures the issuance of a license to marry by
Name First Middle	FPMALE ADDRESS STATEMENT, representa-
Date of Birth Month Day Kinkendall	Name First Middle
Place of Birth (State or foreign puntry)	Date of Birth Ad Nobth how Geiger
Indianapolis Ind.	Place of Birth (State or foreign country)
Residence Address Street or R. D. City Gounty State	Residence Address Street by R.
Previous Marital Status: Never Married Number of Previous Marriages	City County State
Last Marriage Ended Buy	Maiden Name if Different Can VIIIC, +Kuntucks, Ind.
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 Mechanic: Walter olds.	Color on D.
Date of birth verified by: Birth Cert. Judicial Decree	Aregro Other (specify)
1. Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation Clerk: PSCI
Of Unsound Mind? No Yes No Yes No Yes No 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 pollum or home for indigent persons?	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 here.	An Imbecile?
4. Are you afflicted with a transmissible disease?	Of Unsound Mind?
5. Are you related to the bride closer than second cousin? No Yes 6. Are you now under the influence of intoxicating liquor? No Yes	2. Are you under guardianship as a person of unsound mind? No Yes No Yes 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?
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 ☐ (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 Yau Early Gergary
Name Age Address	Residence of father (if deceased so state)
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother Shirtey Marie Lloy 3.
(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).
11. Full name of father. Charles Ellon Kikend	Race of mother white
Residence of father (if phecased so state) Danville, Indiana	Birthplace of mother (State or foreign country)
Occupation of father & Forenan . Bud, Arte Pot father white	
Birthplace of father (State or foreign country) Lnd RlS., Ind	State of Indiana, HENDRICKS as: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Lura Ella Smith	of h
Residence of mother (if deceased so state) Dan ville, India	Signed Mary Sur Dergy
Occupation of mother Race of mothets M. Race of M. Race	New Address.
State of Indiana. I depose and state the information given	Subscribed and sworn to before me this day of HENDRICKS Clerk Circuit Court
County of HENDRICKS as: I depose and state the internation is true and correct.	Clerk Circuit Court
Signed Sawid Fee Gekendal	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 9870 W. 1875, 140715, 140.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and swern to before me thing day of 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, Unique ss:
	County of
State of Indiana, HENDRICKS 88: 10 100	SignedFather
County of Mikerdall & Father	Signed
Signed January Whendal Mother	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me this 21th day of Clerk	Clerk
to have the same of the same o	having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the court by written order issued
County	of a marriage license to the above named parties.
authorizes and directs the issuance	TOPPLACE CERTIFICATE.
RETURN OF MARRIAGE LICENS. Be It Remembered, there was filed in my office a marriage licen.	E AND MARRIAGE CERTIFICATE Court Court use issued by the flefk of the court are issued by the flefk of the court and wife
Be It Remembered, there was filed in my office to here	use issued by the clerk of the solution is such as his band and wife and the solution is the solution in the solution is the s
of Indiana dated the Wendall and	ma towit:
Be it further remembered, the following marriage certificate was filed in my o	hereby certify that on the day of Hendricks,
1, Sonald n. Dayle	at Alandricks County of Hendricks,
one thousand nine hundred and le Likendall	of County, State of hallan,
State of Indiana, Groom Daniel Girls of	Hendelike Clark of the Circuit Court of Hendricks
and, Bride Mally Stu Gugla of were by me united in marriage as authorized by a marriage license issued for County.	that purpose by the Stern of
County. Dated this was a supported by a manual of the supported by the su	signed Donald R. Dayler
1/1/	Official Designation asst. Minister, Minister, 19 66.
	23rd day of Jamball Ja Clerk
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Signed Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS ____County

...Circuit Court

MALE Medical Examination Report Dated 29 Sanua 1966	FEMALE Medical Examination Report Dated 29 Januar 1966	
Name of Physician Sames M	Name of Physician Fred Sanders MD.	
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 P. First O Middle Last	Name Virst / Middle Upst	
Date of Birth Month Day Tear Year	Date of Birth A Month Day Year	
Place of Birth (State or foreign country)	Place of Birth (State or Aprign gountry)	
Musatine lowa	Beech trong 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	
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages	
	Last Marriage Ended By: Death Divorce Annulment	
Color or Race White W Negro Other (specify)		
Usual Occupation Laborer: 29 L. Heel	Color or Race White Negro Other (specify)	
Date of birth verified by: Birth Cert, Judicial Decree Other (Specify)	Usual Occupation Clerk: 10775	
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? No Yes 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 agylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No D Yes	
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?	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? No Yes	3. Are you afflicted with a transmissible disease? No ✓ Yes □	
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 inflience of a narcotic days?	
(a) List their full names, ages and addresses	7. Full name of father. Very Denver 15 ow) qu	
Name Age Address	Residence of father (if deceased so state)	
	Occupation of father Was No Race of father Was It	
	Birthplace of father (State or foreign country)	
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother with a same Herron	
their support?	Residence of mother (if deceased so state)	
11. Full name of father Kichard Oxren Hathaman Sr.	Occupation of mother Sook Keep Race of mother Was	
Occupation of father (if deceased so state) BTKinson, TIN.	Birthplace of mother (State or foreign country)	
Birthplace of father (State or fgreign country)	State of Indiana, I depose and state the information given	
12. Full maiden name of mother elise Marie, Foor	County of HENDRICKS in this application is true and correct.	
Residence of mother (if deceased so state) Fyitlaw, lawa	Signed Julia Viella Reveland	
Occupation of mother Lowers Race of mother Whit	New Address Same	
Birthplace of mother (State or foreign country) Wapello lowa	Subscribed and sword to before me only 31st day of January	
State of Indiana, County of HENDRICKS I depose and state the information given in this application is true and correct.	Olu Cambol Glerk HENDRICKS Circuit Court	
County of MENDRICKS in this application is true and correct. Signed Richard O. Hathawarb 95.	Werk Court	
New Address.	CONSENT OF PARENTS, PARENT OR GUARDIAN	
Subscribed and swork before the 3134 day of 3 and 1966	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		
signs, state facts which render the consent of the other parent unnecessary		
	State of Indiana,	
State of Indiana,	County of HENDRICKS	
County of HENDRICKS	Signed Father	
SignedFather	Signed Mother	
Signed Mother Subscribed and sworn to before me this day of 19	Signed Mother Subscribed and sworn to before me this day of 19	
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	urt by written order issued	
in authorizes and directs the issuance o		
Be It Remembered, there was filed in my office a marriage licen	E AND MARRIAGE CERTIFICATE	
	nd 19.0., authorizing the joining together as husband and wife	
of the following marriage certificate was freed in my o	ffice, to-wit:	
one thousand nine hundred and (6		
and the state of t	at Danville , County of Hendricks	
and Bride July & Royuls of Indiana		
were by me united in marriage as authorized by a marriage license issued for that murrose by the Clark of the		
Dated this 4th day of tellurary, 1966. Signed Am B. Carter.		
The state of the s	Official Designation Daptiet Ministry	
Filed and recorded in accordance with the laws of the State of Indiana this	7th day of February 1066	
	Signed John My and la la la la	

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

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRI	CKS County File 5 February 19
MALE Medical Examination Report Dated	Deoliso
() stranglob	FEMALE Date of Application
Name of Physician I homes & Chase MA	Medical Examination Report Dated February 1961
ALL QUESTIONS MUST BE ANSWERED Chart	Name of Physician 7
tion or pretense shall be fined in any sum not exceeding five hundred dollars (False str	atement un
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False struction or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name First Middle	Whoever procures the issuance of a license to marry by any false statement
Name Middle	FPMALE ADDRESS CONTROL OF THE PERSON OF THE
Date of Birth Month Day	Name First FEMALE APPLICANT
1 Deuro 25 Year	Date of Birth and Saddle Late +
Place of Birth (Mate or foreign country)	Day Year
Residence Address Street of &R. Gity County	Place of Birth (State of foreign country)
Smith wille Manage 1 State	Residence Address on Judiana
Previous Marital Status: Never Married Number of Previous Marriages	City County State
Last Marriage Ended By: Death D	Maiden Name if Different So. Sanville Hend, (nd)
Annulment Mensor	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	The state of the s
Usual Occupation Testa - 30	Last Marriage Ended By: Death Divorce Annulment
Date of bifth verified by: Birth Cert. Judicial Decree	Color or Race White Negro C Other C (waith)
Other (Specify)	Aregro Other (specify)
1. Are you now or have you been adjudged, diagnosed or and the same an	Usual Occupation Clark - Typist: St. of Rd.
An Imbecile? Of Unsound Mind? No Fyes	Date of birth verified by: Birth Cert. Judicial Decree
2. Are you under guardianship as a person of unsound mind? No Ves No Ves	Bother (Specify) Insurance Jolian
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 1	An Imbecile?
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 intoxicating liquor? No X 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?	5. Are you now under the influence of intoxicating liquor?
10. Do you have minor children from one or more former marriages? No Yes \(\text{(If yes, answer questions a, b, c)} \)	6. Are you now under the influence of a parcotic drug?
(a) List their full names, ages and addresses	7. Full name of father. Is vin Cecil Hatte 177
Name Age Address	Residence of father (if dedeased soystate).
	la tarata: este
	Occupation of father And Trace 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
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state) anville, ind;
11. Full name of father Sichael Lee Dickens	Occupation of mother. Lawsen Race of mother White
Residence of father (if deceased so state) mith wille, Ind.	
Occupation of father Steam 217e Litte: Lahey Race of father	Birthplace of mother (State or foreign country)
	State of Indiana, I depose and state the information given
Birthplace of father (State or foreign country)	County of HENDRICKS ss: in this application is true and correct.
12. Full maiden name of mother. J. No.	Card Stolledit
Residence of mother (if deceased so state)	Signed Signed
Occupation of mother Race of mother	New Address.
Birthplace of mother (State or foreign country) Sea Hy	Subscribed and open to lefore me this day of day of the subscribed and open to lefore me this day of the subscribed and open to lefore me this day of the subscribed and open to lefore me this day of the subscribed and open to lefore me this day of the subscribed and open to lefore me this day of the subscribed and open to lefore me this day of the subscribed and open to lefore me this day of the subscribed and open to lefore me this day of the subscribed and open to lefore me this day of the subscribed and open to lefore me this day of the subscribed and open to lefore me this day of the subscribed and the subscri
State of Indiana, County of HENDRICKS Sas: I depose and state the information given in this application is true and correct.	Clerk Circuit Court
County of Across	
Signed Charles A. D. J.	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address SAQS. Howe	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworn to before me this 5 th day of 19 6.0	signs, state facts which render the consent of the other parent unnecessary
Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent differences
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
Share A.T. N	County of
State of Indiana, Country of HENDRICKS 88:	SignedFather
Father	SignedMother
SignedMother	Subscribed and sworn to before me thisday of
Signed day of 19	Subscribed and sworn to before the Calebana Clerk
Clerk	
	T. A marriage license having been refused to the above named parties, the parties with the parties of the parties of the above named parties, the parties of
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license liaving seems and filed
County Co	ourt by written order issued
in authorizes and directs the issuance o	f a marriage license to the above hames partial
In	E AND MARRIAGE CERTIFICATE Lendricks Circuit Court use issued by the clerk of the country of the joining together as husband and wife the country of the cou
RETURN OF MARKIAGE III	ise issued by the clerk of the
Be It Remembered, there was filed in my office hereares	, 19. 6 6, authorizing the joining together as hasoline
of Indiana dated the IIII aay of	cara fi
(A 4 (D)) A SUIDER	fice, to-wit:
Be it further remembered, the following marriage cypically	hereby certify that on the day of County of Headricks,
1, Kee Thomas C. Dury	at Monese County, State of Indiana
one thousand nine hundred and be the thousand nine hundred and	of Mondel County, suite of Indiana
1 4 4 101) It. Allecter	Gendricks County, State of Malika,
and, Bride of Indiang, Groom of All Indiang, Groom of and, Bride 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 anythorized by a marriage license issued for	1 1 F B
County. Dated this 12th day of Lebeusey, 19 k.	6. Simed Key Thomas C Dely
11 fl	Minister)
	Official Designation The Leavest 19 6 6.
Gtate of Indiana this	15th day of Simball Ja Clerk
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Dendkirks Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

No. 3 |
File Book 28

5 February 1966

Date of Application

MALE
Medical Examination Report Dated 4 February 1966
Name of Physician Sames F. Southard, MD.

Name of Physician Sames F. Southard, MD.

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-

County

ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Research 18 tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	FEMALE APPLICANT
MALE APPLICANT	Middle A Last
Name First Middle Start	hinda hinda
Date of Birth Month Day Year	Date of Birth Month Day Year
April 13, 1952	Place of Birth (State or foreign country)
Place of Birth (State & foreign country)	Indianagold Ind.
Residence Address Street or R. R. City County State	Residence Address Street of R. R. City County State
198 N. Tenn St., Danville, Henry, Ind	Maiden Name if Different
Previous Marital Status: Never Married Number of Previous Marriages	hinda h. Franklin.
Last Marriage Ended By: Death Divorce Angulment C	Previous Marital Status: Never Married Number of Previous Marriages
Lew 65	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	Hew 63
Usual Occupation Lineman: Hew REMC.	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Wastress: Westwood Inn.
Dother (Specify) Drives hiceuse.	Date of birth verified by: Birth Cert. Judicial Decree
1. Are you now or have you been adjudged, diagnosed or considered as:	
An impectie! Of Unsound Mind?	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 actum or Yes Yes Yes	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes □
home for indigent persons?	No TR Von D
If answer to 3 is "yes" has the cause of such condition been removed? No Yes Yes	Of Unsound Mind?
4. Are you afflicted with a transmissible disease? No Yes Yes No Yes Yes No Yes 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?	4. Are you related to the groom closer than second cousin?
8. Are you able to support a family? Yes No Yes No Yes No O	5. Are you now under the influence of intoxicating liquor?
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? No Yes	6. Are you now under the influence of a narrotic drug?
(If yes, answer questions a, b, c)	7. Full name of father Kaymond Levi Jank In.
(a) List their full names, ages and addresses Name Age Address	Residence of father (if deceased so state)
Name 13 RR Danville lud.	Occupation of father Kestraunt and Race of father Man to
Christines.	Birthplace of father (State or foreign country).
56993	M. +L. File Whatake
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother
(c) Are you complying with any court order or orders issued for	Residence of mother (if deceased so state)
their support? Ather V 3 tring Sellow.	Occupation of mother Wa: tresq. Westweenice of mother Whate
11. Full name of father.	Birthplace of mother (State or foreign country). Bath From the
Residence of father (if deceased so state)	Birthplace of mother (State of Folds) costs,
Occupation of father	State of Indiana, HENDRICKS Sa: I depose and state the information given in this application is true-and correct.
Birthplace of father (State or foreign country) Ft Wayne Ind.	County of HENDRICKS ss: in this application is true-and correct.
12. Full maiden name of mother Kyby Ellen Remme!	Line & Marsmyell
Residence of mother (in deceased so state) Albian Indiang	Signed
Occupation of mother busewith Race of mother with	New Address.
Birthplace of mother (State or foreign country) Kawalluttle, Ind.	Subscribed and sworn to before me this A. A. day of
	Clerk Circuit Court
State of Indiana, County of HENDRICKS ss.: I depose and state the information given in this application is true and correct.	Olerk
Signed Vick la Min fellow	DARWING DARWING OR CHARDIAN
New Address 198 N. Tenny D. meile la	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and soon to before me this 15th day of Februs, 1946	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 parent, of this applicant hereby give consent for this marriage. If only one parent	Commenced Commenced to the second to the second the part day of the
signs, state facts which render the consent of the other parent unnecessary	
	State of Indiana,
	County of Season
State of Indiana,	
County of HENDRICKS	SignedFather
SignedFather	Signed Mother
Signed Mother	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me thisday of	Clark
Clerk	
COMPLETE IE MARRIACE LICENSE ISSUED BY ORDER OF COU	RT. A marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF GOO	Court by written order issued
County	fourt by written order issued
in authorizes and directs the issuance	of a marriage license to the above named parties.
RETURN OF MARRIAGE LICEN	SE AND MARRIAGE CERTIFICATE
Be It Remembered, there was filed in my office a marriage lic	ense issued by the clerk of the Hendricks Circuit Court
of Indiana dated the day of Jebruary	, 19,66, authorizing the joining together as husband and wife
dick a Stringfellow	and Sinda d. Musingill
Be it further remembered, the following marriage certificate was filed in my	
1, Rew. Raymond Skelton	hereby certify that on the day of televille,
one thousand nine hundred and	at Roganspart, Ind., County of Case,
State of Indiang, Groom Alick U. Stringfellow	of Hendricks County, State of Indiana
and, Bride Linda L. Marsingell of	Hendrecke County, State of Indiana,
were by me united in marriage as authorized by a marriage license issued fo	r that purpose by the Clerk of the Circuit Court of Herdricks
Country	
Dated this 12th day of Jehruary , 196	Signed Klev, Raymand Skeltag
	Official Designation Ministely)
	Official Designation Minister
Filed and recorded in accordance with the laws of the State of Indiana this	, 19 Ga.

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County MALE Medical Examination Report Dated FEMALE Medical Examination Report Dated. Name of Physician_ ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False statement—White tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". Name of Physician MALE APPLICANT FEMALE APPLICANT 1948 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). Color or Race Last Marriage Ended By: Death | Divorce | Annulment | Works: Date of birth verified by: Color or Race Birth Cert. | Judicial Decree 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 Cen. _ Judicial Decree Yes 🗆 Of Unsound Mind? Other (Specify)... 2. Are you under guardianship as a person of unsound mind? Yes | Yes | Drived Licent' 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: county sylum or No Yes An Imbecile? If answer to 3 is "yes" has the cause of such condition been removed? No No Yes | Yes | 4. Are you afflicted with a transmissible disease? Of Unsound Mind? No [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? No P 6. Are you now under the influence of intoxicating liquor? 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 🗆 No P 9. Are you likely to so continue? 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 Address Residence of father (if deceased so state) Occupation of father Sant Tatran : In . PIHL Race (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? No 🗆 es 🗌 11. Full name of father..... Residence of father (if deceased so state) Birthplace of mother (State or foreign country) Occupation of father Die xtk: State of Indiana, Birthplace of father (State or foreign country). HENDRICKS 12. Full maiden name of mother. Residence of mother (if deceased so state) Occupation of mother. Birthplace of mother (State or foreign country) Soach Jale, Ind State of Indiana, I depose and state the information given in this application is true and correct. ... Circuit Court HENDRICKS County of ... Signed Milhael CONSENT OF PARENTS, PARENT OR GUARDIAN New Address We, the parents, of this applicant hereby give consent for this marriage. If only one parent day of Telynam signs, state facts which render the consent of the other parent unnecessary 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 unnec State of Indiana, HENDRICKS State of Indiana, HENDRICKS County of Father 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, theCourt by written order issued... authorizes and directs the issuance of a marriage license to the above named parties.County... RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE We It Remembered, there was filed in my office a marriage license issued by the clerk of the...... 19.6.6..., authorizing the joining together as husband and wife 9 th. of Indiana dated the..... marriage certificate was filed in my office, one thousand nine hundred State of Indiana, Groom. that purpose by the Clerk of the Circuit Co were by me united in County. Dated this. Filed and recorded in accordance with the laws of the State of Indiana this... Signed

APPLICATION FOR MARRIAGE

HENDRICKS File Book 28				
MALE Medical Examination Po	5.	7	County	5 Februarians
Medical Examination Re	port Dated 29	Januar 1966	FEMALE	Date of Application
Name of Physician	VI.M. A:+	he Mi.	Medical Examination Report Date	2950 1061
ALL QUESTIONS MUST BE ANS	WERED. Chapter 126, I	ndiana Acta toos	Name of Physician M. Action Report Date	A:+1/2
ı	MALE APPLICANT	ive hundred dollars (\$500.00)".	tement—Whoever procures the issuence	Times, M.D.
Name First	Middle		assuance of a licens	e to marry by any false statement, representa-
Date of Birth Month	heon	Chandler	Name First	APPLICANT
Place of Birth (State or foreign con	10	Year	Date of Birth Mohib	Kana lake Last
Plam ti-	11 1.000	MADE	December 1	Day
Residence Address Stree			Place of Birth (State or foreign country)	1948
Previous Marital Status: Never		had been appealed to		
Last Marriage Ended By:		State Of Indiana		
Colon on Passe White	Manager Hard	County of Morgan		February 4,1966
Color or Race White	TO PERSONAL PROPERTY OF THE PARTY OF THE PAR	and(y)		4,1700
Usual Occupation Fuctor		Creek Charles		
Date of birth verified by: Bi	-			
1. Are you now or have you been	dged,	allest & of	- 00 0	
An Imbecile? Of Unsound Mind?	100000000000000000000000000000000000000	account c. on	another has gin	ven consent.)
2. Are you under guardianship a 3. Are you now or have you be	to	n Michael	Seon Chandler dicence to mar	to accel
home for indigent persons? If answer to 3 is "yes" has th	0			to reporty for
4. Are you afflicted with a tran	~	narrage l	icence to mar	ry Lanet Kay Wilson
 Are you related to the bride c Are you now under the influ 	The same of the same of			and the same of th
7. Are you now under the influ-			CARROLL SALES	
8. Are you able to support a fa 9. Are you likely to so continue				Albert E Chandler
10. Do you have minor children fr (If yes, answer questions a, b				Albert PCharles
(a) List their full names, age	of the latest of			The state of the s
Name		State Of Indiana		
*,*************************************		County Of Morgan		0
			- C	time mach est
(b) Are you supporting or co	-	My Comm Expires 10-	1-68	Laura Mae West
(c) Are you complying with a their support?	Cirt or	The state of	Million Property Comments	THE RESERVE OF THE PERSON OF T
11. Full name of father	E	She legal		The second of the second of
Residence of father (if deceas				
Occupation of father 2.16.3	721			
Birthplace of father (State or		olm times, Amarka !		A STATE OF THE PARTY OF THE PAR
12. Full maiden name of mother.				
Residence of mother (if decea	(Line	The second secon		THE RESERVE TO THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TW
Birthplace of mother (State or				
State of Indiana,	7 444	The second section is	RESIDENCE OF STREET STREET	
County of HENDRICKS	1 - 1 16	A PRINCIPLE OF THE PRINCIPLE.		
Signed	A STATE OF THE STA		British A street	A DESCRIPTION OF THE PARTY OF T
New Address	, s+h .	. Tol 1000	We, the parents, of this applicant hereby give	consent for this marriage. If only one parent
Subscribed and sworn to before me	day o	HENDRICKS Circuit Court	signs, state facts which render the consent of	the other parent unnecessary
CONCEDURACIONAL	Cierk	- Control of the cont		
We, the parents, of this applicant h		this marriage. If only one parent		
signs, state facts which render the				
Poren	s direce	D. Father	State of Indiana,	
notorized) consent	attacher.	County of	2.1.1
State of Indiana,	}ss:		Signed Clave	no Willows Father
County of HENDRICKS		Father	Signed Ofal	Wilson Mother
Signed			Subscribed and sworn to before me this	5th of te try 1966
Subscribed and sworn to before me t	his oth day o	restrang 1964	Subscribed	lu Jan Voll (Clerk
	John D	Clerk	Name of the Party	to the show named parties the
COMPLEMENT OF STATE OF	TIGENGE ISSI	ED BY ORDER OF COUR	r. A marriage license having been refu	sed to the above named parties, the
COMPLETE IF MARRIAGI	County		r. A marriage license having been refu urt by written order issued f a marriage license to the above named p	parties
	The second secon	WARRIAGE LICENSE	AND MARRIAGE	Ar Circuit Court
Me At Wement	ored there was file	d in my office a marriage licens	se issued by the cierk of the	oining together as husband and wife
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 description of Indiana dated the day of Library and Janet Nay Wilson				
mile of the Charles and office, thewit:				
Be it further remembered, the	following marriag	Wipen h	ereby certify that on the	, County of Hendricks
I,	are of	4		unty, State of Spliane
one thousand nine hundred and State of Indiana County, State of Indiana				
and, Bride 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 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 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 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 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 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 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 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 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 were likely and the Clerk of the Circuit Court of Hendricks were likely as the Clerk of the Circuit Court of Hendricks were likely as the Clerk of the Circuit Court of Hendricks were likely as the Clerk of the Circuit Court of Hendricks were likely as the Clerk of the Circuit Court of Hendricks were likely as the Clerk of the Circuit Court of Hendricks were likely as the Clerk of the Circuit Court of Hendricks were likely as the Clerk of the Circuit Court of Hendricks were likely as the Clerk of the Circuit Court of Hendricks were likely as the Clerk of the Circuit Court of Hendricks were likely as the Clerk of the Circuit Court of Hendricks were likely as the Clerk of the Circuit Court of Hendricks were likely as the Clerk of the Circuit Court of Hendricks were likely as the Clerk of the Ci				
were by me united in marriage as authorized by a marriage license issued for that purpose of				
7 0		7 churup 61	Signed Fran	O D Pedas
Dated this 12	day of	1	Official Designation	19 6 6
			3 day ob	model go clerk
Filed and recorded in accorda	nce with the laws of	f the State of Inarana this	Signed Jend	Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No	3	3		
File	Bo	oK	28	3
8	Fel	6810	~	1966
	Date of	Applica	tion	

MALE Medical Examination Report Dated 7 Te bruen 1966	FEMALE Medical Examination Report Dated 5 February 1966
Name of Physician Dorid B. Haggan, MD.	Name of Physician Down to license to marry by any false statement, represents
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	FEMALE APPLICANT
MALE APPLICANT Middle Last	Name , Kirst Middle Last
William Robert (Veyer	Date of Birth Month Day Year
May 24 1948	Place of Birth (State or) oreign country)
area Address Street or R. R. City County State	Residence Address Street or R. R., City County State
607 W. Main, Plamfield, Hen, Ind.	Maiden Name if Different
Marital Status: Never Married Number of Previous Marriages	Previous Marital Status: Never Married Number of Previous Marriages
rriage Ended By: Death Divorce Annulment	TIEVIOUS MANIANT SANIANT SANIA
Race White Negro Other (specify)	Last Marriage Ended 59.
upation Sarrie Startenant: Claphan	Color or Race White Negro Other (specify)
rth verified by: Birth Cert. Judicial Decree	Usual Occupation Unemployed
now or have you been adjudged, diagnosed or considered as: Imbecile? Yes	Date of birth verified by: Birth Cert. Sudicial Decree
Unsound Mind? Under guardianship as a person of unsound mind? No Yes Yes	1. Are you now or have you been adjudged, diagnosed or considered as:
n now or have you been within five (5) years an inmate of a county sylum or rindigent persons? No Yes The to 2 is "yea" has the cause of such condition been removed? No Yes Yes The to 2 is "yea" has the cause of such condition been removed?	An Imbecile? Of Unsound Mind? No Yes
afflicted with a transmissible disease?	2. Are you under guardianship as a person of unsound mind? No Yes
related to the bride closer than second cousin? No Yes Yes Ye	3. Are you afflicted with a transmissible disease?
now under the influence of a narcotic drug? No W Yes No W Yes No \(\text{Yes} \) No \(\text{Yes} \)	4. Are you related to the groom closer than second cousin?
m likely to so continue?	5. Are you now under the influence of intoxicating liquor? No Yes No Yes
have minor children from one or more former marriages? No Yes answer questions a, b, c)	7. Full name of father how and was
ht their full names, ages and addresses Name Age Address	Residence of father (if deceased so state)
	Occupation of father Truck dy 1777- Race of father While
	Birthplace of father (State or foreign country)
cre you supporting or contributing to their support? Yes No	8. Full maiden name of mother
helt support?	Occupation of mother Assemble: Estator Race of mother White
name of father (if deceased so state) Plana Carlo	Birthplace of mother (State or foreign country) Acon 6., Tenn.
pation of father Buye: Hooks. Race of father white	The Court of the C
place of father (State or foreign country) hames wille, Ind.	State of Indiana, HENDRICKS County of in this application is true and correct.
maiden name of mother.	Signed Della Veane Tapier
ance of mother (if deceased so state)	New Address
place of mother (State or foreign country)	Subscribed and sworn to before me this Ath day of the sworn to before me this Ath day of the sworn to before me this Ath day of the sworn to be sworn
HENDRICKS I depose and state the information given in this application is true and correct.	HENDRICKS Circuit Court
Signed William Robert Meyer	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 609 W. Mara St. Matherield, W.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
and ever the before me this day of day of Circuit Court	signs, state facts which render the consent of the other papent unnecessary
TOF PARENTS, PARENT OR GUARDIAN	Father aptorized
parents, of this applicant hereby give consent for this marriage. If only one parent	Consart attached.
ate facts which render the consent of the other parent unnecessary	
has consent	State of Indiana, HENDRICKS ss:
State of Indiana,	County of
County of HENDRICKS Signed Father	Signed Phillips
Signed Seprette 14. Mayer Matter	Signed William State of Festivan 1006
Subscribed and sworn to before me this	Subscribed and sworn to before me this
	ourt by written order issued 8 the broad 19 can and filed
	of a marriage license to the above named parties. 3) as eye ware.
RETURN OF MARRIAGE LICENS	SE AND MARRIAGE CERTIFICATE
	onse issued by the clerk of the Circuit Court
141-11-1 15-1-1 141-1-25	and Nella Diane Nasband and wife
Be it further remembered, the following marriage certificate was filed in my	office, to-wit:
one thousand nine hundred and less	at Plainfield County of Gendricks
State of Indiana, Groom Milliam Robert Muyer	of Hendricks County, State of Indiana
and, Bride Nella Cleane Mapier of	Hendricks County, State of Indiana,
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 Hendricks
Dated this 12th day of February, 196	6 Signed Donald I. Mc Mahan
and between the thether	Official Designation Methodist Clergy
Filed and recorded in accordance with the laws of the State of Indiana this	
	Signed John Sambald Jr. Clerk
	Circuit Court

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

Date of Application

County

vita la constanti de la consta
MALE STATE PRINT PARTY A To be was 1966
Medical Examination Report Dated
Name of Physician David B. Haggard, MD.
Name of Physician

FEMALE 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)". FEMALE APPLICANT MALE APPLICANT February 8, 1966 We, Robert O. Meyer and Geneva H. Meyer, parents of William R. Meyer, hereby give our consent to his marriage. Robert O. Meyer State of Indiana :55 Country of Hendricks Subscribed and sworm to before me the undersigned No Yes white notary Public this 8th day of February 1966. my Comm. 24p. 7-10-66 , lenn. Circuit Court only one parent State of Indiana, HENDRICKS County of. State of Indiana, HENDRICKS Father County of Father MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the Court by written order issued 8th February 1966 and filed authorizes and directs the issuance of a marriage license to the above named parties. 33 a page Watter. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Be It Remembered, there was filed in my office a marriage license issued by the clefk of the , 1960, authorizing the joining together as husband and wife Nella Diane Natier the following marriage certificate was filed in my office, to-wit: ...hereby cartify that on the ... were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of ... druary , 1966. Dated this

Signed.

....Clerk

......Circuit Court

APPLICATION FOR MARRIAGE LICENS

HENDRIC	KS File Book 28
MALE Medical Examination Report Dated 7 Leb.	County 8 Telyson 1966
R11 (1966	FEMALE Date of Application
Name of Physician W Martley MD	Medical Examination Report Dated 7 Februar 19hh
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 present tion or pretense shall be fined in any sum not average 126, Indiana Acts 1905 present	Name of Physician RW. Kirtlen WD
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False stated in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name First	tement—Whoever procures the issuance of a license to marry by
N Vigare	
Date of Birth Month Day Err.	Name First Middle Lock
Place of Birth (State on foreign country)	Date of Birth Oxanna Jane Bay iss
Residence Address Street of R. R. City	Place of Birth (State or foreign) (State or foreign)
Hillarest Ct., Danville Jones State	Residence Address
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Columbia Danville Hen. 140.
Last Marriage Ended By: Death Divorce Annulment	
Color or Peace White ID News II at	Previous Marital Status: Never Married Number of Previous Marriages
(specify)	Last Marriage Ended By: Death Divorce Annulment
Date of bight verified by: Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)
Dother (Specify) / trans	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? No Yes Yes Yes Yes Yes Yes Yes Yes	Dother (Specify)
3. Are you now or have you been within five (5) years an inmate of a county sylum 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? 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? 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 No Yes No No	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?
(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 Vorman Con Say 132
	Occupation of father KE. Sales: Falb & Price of father white
	Birthplace of father (State or foreign country) Indian a ola, Ind
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Sarah Sane Walls
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state) Danville, Ind
11. Full name of father Donald Alley Exp	Occupation of mother Cashier . Krojer Race of mother white
Residence of father (if deceased so state) Dany 1/5 Ind	Birthplace of mother (State or foreign country) Danville, Ind.
Occupation of father Shipping Clark: Chargage of father. While	State of Indiana, I denose and state the information given
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.	Signed Raylanca Jan Saylass
Occupation of mother (if decased so state) Rate of mother white	New Address
Birthplace of mother (State or foreign country) Sharedan, Mo.	Subscribed and sworn & before my wall ste day of Televis 1046
State of Indiana.	Clerk Circuit Court
County of HENDRICKS 88: in this application is true and correct.	The Assessment of the State of
Signed Signed Signed Biville Ind.	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 197 Bth day of Telephon 196	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and overn to ore me the day of HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN	Tank and a second
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Las custada:
signs, state facts which render the consent of the other parent unnecessary	
	State of Indiana, HENDRICKS ss:
Control of the contro	County of Father
State of Indiana, County of HENDRICKS	Signed Jane Bayles yother
Signed	Signed 8th day of terms 166.
Signed, 19	Subscribed and sworn to before me that
Subscribed and sworn to before me this	A powies the
DV OPDER OF COU	RT. A marriage license having been refused to the above named parties, the court by written order issued
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUL	Court by written order issued
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 lice	ense issued by the clerk of the
of Indiana dated the 17 th and of	and or amaning
Be it further remembered, the following marriage certificate was filed in my	office, to-wit: hereby certify that on the 18th day of Flaguary, County of Herdricks
Minester of the Christian Church	hereby certify that the country of Sentantial of Sentantia
one thousand nine hundred and left All (40)	of Herdricks County, State of Jaking,
State of Indiana Groom Michael allen ap	Hendricks Court of Hendricks
State of Indiana Groom Mitall allen of and, Bride Royana fand Buyliss of were by me united in marriage as authorized by a marriage license issued for County.	r that purpose by the Clerk of the Circuit Court
were by me united in marriage as authorized by a marriage hoense to the first the same and the same and the same and the same are the same and the same are the same and the same are the s	6 Rev George a Harries
County. Dated this 18th day of 19th	
	19 th day of the Clerk
Filed and recorded in accordance with the laws of the State of Indiana this	19th day of Gintall of Clerk Signed Circuit Court
Filed and recorded in accordance with the days of	Signed Jerdunks Com

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS ___County

No. 35
File Book 28

S Tebruary 1966
Date of Application

	FEMALE
MALE Secret Poted & Televillan 1966	Medical Examination Report Dated 8 February 1966
Medical Examination Report Dated	PILL K. + I MIN
Name of Physician W Natley, M.D.	Name of Physician
A took was the "Felse ste	tement-Whoever procures the issuance of a license to marry by any false statement, representa-
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	
MALE APPLICANT	FEMALE APPLICANT
Name First Middle Last	Name First Middle Last
Kohant A. O'Neal	Date of Riveh Month Day Year
Date of Birth Month Day Year	Date of Birth Month
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)
IN I Can about Ind.	Brunswick MC,
Residence Address Street or R. R. City County State	Residence Address Street or R. City County State
1639 N. Aruburn, Speedway, Morton, Inc.	Maiden Name if Different
Previous Marital Status: Never Married Number of Previous Marriages	Elizabeth h. hitchtield.
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
Last Marriage Ended by: Death & Divotee Minimum	Duty Divini D. Annihment D.
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
(21.)	Color or Race White Negro Q Other (specify)
Usual Occupation Superantewan. 12.1.	Color or Race White Negro Other (specify)
Date of birth verified by:	Usual Occupation Howsen it
Other (Specify) british his ende.	Date of birth verified by: Birth Cert. Judicial Decree
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes	J- 500 1 500,00
Of Unsound Mind?	Other (Specify)
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 county sylum 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?	2. Are you under guardianship as a person of unsound mind?
5. Are you related to the bride closer than second cousin? No Yes	3. Are you afflicted with a transmissible disease?
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a parcetic drug? No Yes	
1. Are you now under the influence of a fine-court and	4. Are you related to the groom closer than second cousin?
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?
10. Do you have minor children from one or more former marriages?	6. Are you now under the influence of a narcotic drug? No 🗖 Yes 🗆
(If yes, answer questions a, b, c)	7. Full name of father I Lenny Edga hetchield
(a) List their full names, ages and addresses	2 1.1.2
Same Name See 1639 Address Aburn, Sw	Residence of father (if deceased so state)
John Albert 19	Occupation of father
Soseph Mehael 12	Birthplace of father (State or foreign country)
Mary Ann 8 + +	8. Full maiden name of mother Lida Estrage Oliver
(b) Are you supporting or contributing to their support? Yes No	b. Full mander man of the state
(c) Are you complying with any court order or orders issaed for	Residence of mother (if deceased so state) no iamazolis ind
100 100 100 100	Occupation of mother
11. Full hame of father	119 1/2
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father	State of Indiana
Birthplace of father (State or foreign country)	State of Indiana, HENDRICKS Section 1 Section 2 Hendricks Section 2 Section 2 Hendricks Section 2 Hendricks Hendricks
12. Full maiden name of mother Elizabeth Sadie Rilen	County of
	Signed Elizabeth & masarin
Residence of mother (if deceased so state)	0 0
Dans of mother M. A.	
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 Ebruan, 1906
Birthplace of mother (State or foreign country) \\ \ \J-angold, \lnd.	Subscribed and sworn to before me this day of Lebruan 1906
State of Indiana, County of HENDRICKS Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given in this application is true and correct.	Subscribed and sworn to before me this day of the sworn to before me this
Birthplace of mother (State or foreign country) State of Indiana, St	Subscribed and sworn to before me this day of HENDRICKS Clerk Court
State of Indiana, County of HENDRICKS Signed Signed State or foreign country) State of Indiana, Ss: I depose and state the information given in this application is true and correct.	Subscribed and sworn to before me this day of Lebruan 1906
State of Indiana, County of MENDRICKS Signed Sand State the information given in this application is true and correct. New Address 39 A A A A A A A A A	Subscribed and sworn to before me this day of HENDRICKS Clerk Clerk Court CONSENT OF PARENTS, PARENT OR GUARDIAN
State of Indiana, County of HENDRICKS Signed Other (State or foreign country) New Address 1639 New Address 1639 Aday of County of Japanese and state the information given in this application is true and correct.	Subscribed and sworn to before me this day of HENDRICKS Clerk Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
State of Indiana, County of MENDRICKS Signed Sand State the information given in this application is true and correct. New Address 39 A A A A A A A A A	Subscribed and sworn to before me this day of HENDRICKS Clerk Clerk Court CONSENT OF PARENTS, PARENT OR GUARDIAN
State of Indiana, County of HENDRICKS Signed Other (State or foreign country) New Address 1639 New Address 1639 Aday of County of Japanese and state the information given in this application is true and correct.	Subscribed and sworn to before me this day of HENDRICKS Clerk Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
State of Indiana, County of HENDRICKS Signed New Address 39 Subscribed and swarn to before me this day of 19 19 19 19 19 19 19 1	Subscribed and sworn to before me this day of HENDRICKS Clerk Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
State of Indiana, County of HENDRICKS Signed Other (State or foreign country) New Address 1039 Subscribed and swern to before me this Clerk HENDRICKS Clerk 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	Subscribed and sworn to before me this day of HENDRICKS Clerk Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
State of Indiana, County of HENDRICKS Signed August Augus	Subscribed and sworn to before me this day of HENDRICKS Clerk Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
State of Indiana, County of HENDRICKS Signed Other (State or foreign country) New Address 1039 Subscribed and swern to before me this Clerk HENDRICKS Clerk 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	Subscribed and sworn to before me this day of HENDRICKS Clerk Clerk 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, County of HENDRICKS Signed Other (State or foreign country) New Address 1039 Subscribed and swern to before me this Clerk HENDRICKS Clerk 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	Subscribed and sworn to before me this
State of Indiana, County of HENDRICKS Signed State of Indiana, New Address 10 39 Subscribed and swern to before me this Clerk HENDRICKS Clerk 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,	Subscribed and sworn to before me this day of HENDRICKS Clerk 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 State of Indiana, County of HENDRICKS
State of Indiana, County of MENDRICKS Signed New Address 39	Subscribed and sworn to before me this
State of Indiana, County of MENDRICKS Signed Subscribed and swern to before me this Clerk HENDRICKS Clerk HENDRICKS Clerk HENDRICKS Signed Subscribed and swern to before me this Clerk HENDRICKS Clerk 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, State of Indiana,	Subscribed and sworn to before me this day of HENDRICKS Clerk 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, County of HENDRICKS Signed Father
State of Indiana, County of HENDRICKS Signed Japan Salar True and correct. Clerk 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, County of HENDRICKS 88:	Subscribed and sworn to before me this day of HENDRICKS Clerk Clerk 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, County of HENDRICKS Signed Father Signed Mother
State of Indiana, County of HENDRICKS Signed Japan Subscribed and swern to before me this Clerk HENDRICKS Clerk HENDRICKS Clerk HENDRICKS Signed Subscribed and swern to before me this Clerk HENDRICKS Clerk HENDRICKS State of Indiana, County of HENDRICKS Signed Subscribed and swern to before me this Subscribed and swern to be on the subscribed and swern to be on	Subscribed and sworn to before me this day of HENDRICKS Clerk 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, County of HENDRICKS Signed Father
State of Indiana, County of HENDRICKS Signed Jay Clerk HENDRICKS Subscribed and swarn to before me this Clerk HENDRICKS Clerk HENDRICKS Clerk 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, County of HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this day of 19	Subscribed and sworn to before me this day of HENDRICKS Clerk Clerk 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, County of HENDRICKS Signed Father Signed Mother
State of Indiana, County of HENDRICKS Signed Address	Subscribed and sworn to before me this day of HENDRICKS Clerk Clerk 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, County of HENDRICKS Signed Father Signed Mother
State of Indiana, County of HENDRICKS Signed Signed Signed Subscribed and swern to before me this signs, state facts which render the consent of the other parent unnecessary State of Indiana, County of HENDRICKS Signed Sign	Subscribed and sworn to before me this day of HENDRICKS Clerk 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, County of Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk
State of Indiana, County of HENDRICKS Signed Odd of Control of 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 Signed Father Signed Father Signed Father Signed Father Signed Mother Subscribed and sworn to before me this day of Control of the other parent unnecessary State of Indiana, County of HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	Subscribed and sworn to before me this day of HENDRICKS Clerk 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, County of Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk RT. A marriage license having been refused to the above named parties, the
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Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS County 9 February Date of Application MALE Medical Examination Report Dated_ FEMALE Medical Examination Report Pated. Name of Physician ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False statement—Whoever procures the iss MALE APPLICANT sance of a license to marry by any false state Name FEMALE APPLICANT Date of Birth rlan Previous Marital Status: Never Married | Number of Previous Marriages 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 E . A Usual Occupation Date of birth verified by: Birth Cert Judicial Decree Color or Race Other (Specify)... Usual Occupatio Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile?
 Date of hirth verified by: Birth Cert. Judicial Decree Of Unsound Mind? 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 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? No 🗆 Yes 🗆 Of Unsound Mind? 4. Are you afflicted with a transmissible disease? No M Yes 🗌 2. Are you under guardianship as a person of unsound mind? 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? 7. Are you now under the influence of a narcotic drug? No 🔽 Yes 🗌 4. Are you related to the groom closer than second cousin? Yes [8. Are you able to support a family? Yes No 🗆 Yes [Yes 9. Are you likely to so continue? No 🗆 5. Are you now under the influence of intoxicating liquor 10. Do you have minor children from one or more former marriages? Yes 🗌 No D (If yes, answer questions a, b, c) raundorla (a) List their full names, ages and addresses Name Address Nettre (b) Are you supporting or contributing to their support? Yes 🗆 No 🗆 Are you complying with any court order their support? No 🗆 Birthplace of mother (State or foreign country)..... Residence of father (if deceased so state) Occupation of father. State of Indiana, HENDRICKS 12. Full maiden name of mother..... CSS. 1.C Residence of mother (if deceased so state). Birthplace of mother (State or foreign country) HENDRICKS ss: I depose and state the information given in this application is true and correct. Circuit Court State of Indiana, HENDRICKS County of .. ennuty F. CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent erdran ..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 State of Indiana, Signed. HENDRICKS County of ... 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 CTECKET Court by written order issued 10 February 1966authorizes and directs the issuance of a marriage license to the above named parties.County. 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 19.6.6, authorizing the joining together as husband and wife of Indjana dated the ... Be it further remembered, the following marriage certificate was filed in my office, to-wit: County, State of The one thousand nine hundred and a marriage license issued for that purpose by the Clerk of the Circuit Court of State of Indiana, Groom and, Bride Dated this ..

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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No. Book 28

14 Gebruary 1966

Date of Application

HENDRIC	County Date of Application
MALE Medical Examination Report Dated 12 th Seb. 1966	FEMALE Medical Examination Report Dated Jeff, 1966
Name of Physician Mully A. Sarfield, M.D.	Name of Physician Martin W. Harques, 11 U.
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	Name First Middle / , Last
Name Donald Mindle Campbell	Shirley A. L'Homme
Date of Birth Month Day Year 1943	Date of Birth December 1st 1946
Place of Birth (State or foreign country) Spencey, Indiana	Place of Birth (State or foreign country) WOKCESTON, MOSS.
Residence Address Street or R. B. St. Speednay, Morion, Ind.	Residence Address (19 Street or R. R., Brounsburg, Hend, Ind.) Maiden Name if Different
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	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	Last Maringe Made 27.
Usual Occupation Armed Services Date of birth verified by: □ Birth Cert. □ Judicial Decree.	Color or Race White Negro Other (specify)
Other (Specify) Armed Forces I.D. Card	Usual Occupation ACA, Indianapolis Ind.
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 Dother (Specify)DVIVETS Ligense
Of Unsound Mind? 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 county a flum 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? 2. Are you under guardianship as a person of unsound mind? No Ves
5. Are you related to the bride closer than second cousin? No Yes 6. Are you now under the influence of intoxicating liquor? No Yes	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 No
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? Thur wm of father Ar Thur Wm. L. Homme
(a) List their full names, ages and addresses Name Age Address	Residence of father (if deceased so state) 6/9 Saratoga, Browns
	Occupation of father Maintenance Race of father White
	Birthplace of father (State or foreign country) Worcestor, Mas
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Georgina Roberla Mine
(c) Are you complying with any court order or orders issued for their support? Chester Carl Cambell No	Residence of mother (if deceased so state)
11. Full name of father	Occupation of mother RCN, Indpls Race of mother White
Residence of father (if deceased so state) Pencer, Ind. Occupation of father Farmes Race of father White	Birthplace of mother (State or foreign country) KESCIII , LOWO
Birthplace of father (State or foreign country) Spencer Ind.	State of Indiana, HENDRICKS Sa: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother. Cora Johnson	County of
Residence of mother (if deceased so state). deceased Occupation of mother	Signed Illa Known Brown
Occupation of mother. A D N & Race of mother Wille Birthplace of mother (State or foreign country) STIENSVILLE, IND.	New Address / Land All Market 1016
State of Indiana, Section 1	Subscribed and sworn to before me this day of HENDRICKS HENDRICKS Circuit Court
County of HENDRICKS Signed Soulce R. Campiell	Jeron San Jero Clerk Court
New Address & & # 1 HMH-462 Someton	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of Thursty 1966.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
JANN HAMINALA, JOCCIER 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	Commence of the control of the contr
State of Indiana,	State of Indiana, County of
County of HENDRICKS	SignedFather
SignedFather	Signed
Signed	Subscribed and sworn to before me thisday of, 19,
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COLU	RT. A marriage license having been refused to the above named parties, the
Hendricks County arcuit o	ourt by written order issued 14th Lebeury and filed
in Clerks' Office authorizes and directs the issuance	of a marriage license to the above named parties. I day Wainer
RETURN OF MARRIAGE LICENS	SE AND MARRIAGE CERTIFICATE
of Indiana dated the day of levery	
donald R. Campbell	Shirley Al'Hamme
Be it further remembered, the following marriage certificate was filed in my	office, to-wit:
one thousand nine hundred and	hereby certify that on the 14th day of February
State of Indiana, Groom Lanald R. Campbell	of Marian County of Indiana
and, Bride Shirley a. L. Homme of	Hendricks County State of Indiana.
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 Hendricks
Dated this 14th day of February, 1960	e Ruld & W. hl.
The state of the s	Official Designation Methodist Minister
Filed and recorded in accordance with the laws of the State of Indiana this	

Circuit Court

barg Ind

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS MALE County Medical Examination Report Dated_ FEMALE Name of Physician Medical Examination Report Dated T ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False statement—Whoever procures the issuance of a license to 1 tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". Middle FEMALE APPLICANT Date of Birth Place of Birth (St Previous Marital Status: Never Married 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 USAF Date of Wirth verified by: Birth Cert. | Judicial Pecree Color or Race Armans 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 Dirth Cert / Yes 🗆 Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No 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 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? 6. Are you now under the influence of intoxicating liquor? No [7. Are you now under the influence of a narcotic drug? Yes 🗆 3. Are you afflicted with a transmissible disease? Yes 🗆 8. Are you able to support a family? 4. Are you related to the groom closer than second cousin? No 🗆 9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? Yes No 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 7. Full name of father ... Name Address Residence of father (if deceased so state). Occupation of father 2 2 2 1 2 1 Birthplace of father (State or foreign country) (b) Are you supporting or contributing to their support? Yes No No (c) Are you complying with any court order or orders issued for their support? Residence of mother (if deceased so state) No [11. Full name of father Occupation of mother Residence of father (if deceased so stat. Birthplace of mother (State or foreign country) Occupation of father State of Indiana, Birthplace of father (State or foreign country). 610 Gano: HENDRICKS 12. Full maiden name of mother N County of. Florge Residence of mother (if deceased so sta inne Chapman Occupation of mother. Race of mother White Birthplace of mother (State or foreign country) Zlain tield (wu. State of Indiana, I depose and state the information given in this application is true and correct. HENDRICKS HENDRICKS County of CONSENT OF PARENTS, PARENT OR GUARDIAN New Address... So and sworn to before me this 14+h We, the parents, of this applicant hereby give consent for this marriage, If James to ... Circuit Court CONSENT OR 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. Signed My Mary Subscribed and sworn to before me this... Subscribed and sworn to before n COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above namedCounty....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 19. Co, authorizing the joining together as husband and wife Chipman) of Indiana dated the. 18th Be it further remembered, the following marriage certificate was filed in my office, to wit: one thousand nine hundred and State of Indiana, Groom Alona 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. February , 19 66. Dated this. Official Designation ...

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

STATE OF INDIANA

Chap. 120, 211di 2200	TEICATION FOR	MARRIAGE LICENSE	No38
WITT	HENDI	ILICKS	File Book 28.
MALE Medical Examination Report		County	14 February 1966
Name of Physician	1 1966	FEMALE	Date of Application
	leyd Terry CMD	Medical Examination Report Dates	d & 8 Tebruan 1966
ALL QUESTIONS MUST BE ANS		Name of Physician	1 - Cliffe
	Yalso "Falso	statement Whoever procures the issuance of a license	C
Name First		or a license	to marry by any false statement, representa-
Date of Birth Mon			THE RESERVE OF THE PARTY OF THE
Place of Birth (State or for			
Residence Address			The state of the s
423 1		101 S. 8th Street	THE RESERVE OF THE PERSON NAMED IN
Previous Marital Status		THE ACT OF THE PROPERTY OF THE	A
Last Marriage Ended By		February 7, 1966	d.
Color or Race V			
	Tithee and Verna	Alberta McKee, give our conse	
Usual Occupation Date of Mirth verified by	for our son, Larry Alan	May.	nt
Other (Specify)	Thweatt on look	McKee, to marry Miss Sara Loui	Se
1. Are you now or hav An Imbecile?	T206 Section	Street, Plainfield, Indiana.	
Of Unsound M		Indiana.	AND DESCRIPTION OF THE PARTY OF
2. Are you under guar 3. Are you now or ha		11 1011	THE RESIDENCE OF THE PARTY OF T
If answer to 3 is ";		Gude McKe	
4. Are you afflicted w		Aude McKee	-0
5. Are you related to 6. Are you now unde		9/21 - 000 -	4 92 91
7. Are you now unde		Verna albert	a The Keel
8. Are you able to su 9. Are you likely to		Verna Alberta McKee	-0
10. Do you have minor	STATE OF KENTUCKY		-0
(If yes, answer qu (a) List their full	THE OF RENTUCKY		-0
Name	COUNTY OF CALLOWAY)		
			The state of the s
***************************************	T Pohout 0		P.
(b) Are you supp	1, Robert O. Miller	, Notary Public in and for the	State and
(c) Are you comp their support	County aforesaid, do hereby c	ertify that the share	
11. Full name of fath	Signad and a	that the above and fore	egoing was
Residence of fath	signed and acknowledged befor	e me in said County by Aude Mo	Kee and
Occupation of fa	Verna Alberta McKee to be the	ir free set and to a	
	20 0 5		erect.
12. Full maiden nam	This the 7th day of	February, 1966	P
Residence of mot		- Harry	11.0
Occupation of me		Logran Cr (WULL IS
State of Indiana,		NOTARY PUBLIC, CA	LLOWAY COUNTY.
County of H		KENTUCKY	A STATE OF THE PARTY OF THE PAR
		MY COMMISSION EXP	IRES APRIL 19,
N			parent
Subscribed and swor			and the second
- em			
We, the parents, of			
signs, state facts w		FILE	D
Mo-		FEB 1 4 1966	
State of Indiana,		00 4 001	Dather
County of		John fambold CIRCUIT	CURT
		CLERK HENDRICKS SUPERIOR	The state of the s
Subscribed and swo			Clerk
			the
COMPLETE			filed
COMPLETE I	A CONTRACTOR OF THE PARTY OF TH	to the show named n	
in	authorizes and directs the issuance	of a marriage license to the above named p	
	TANDLACE LICEN	SE AND MARKIAGE CHALLE	dusks Circuit Court
Be It Remembered.	there was filed in my office a marriage lice	ense issued of 1966, authorizing the jo	ining together as husband and wife
of Indiana dated the	2.40aay 0)	and MMML	
Beithard B	Ritchelf my fled in my	office, to-wit: 27th	down of February
I, Law J	wing marriage certificate was filed in my	at It Jugustines Church of Headricks Cou	County of Hendricks!
one thousand nine hundred and	/	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	nty, State of
	1 MININI TUCKY		inty, State of
and, Bride Lynne C	Left man of the state of the st	r that purpose by the Clerk of the Circuit Co	urt of
were by me united in marriage as a	uthorized by a marriage license issued for	11 A Hans	Glastia
County. Dated this. 27th do	y of Library, 19.	Signed Fred	
ada citisad	9 -)	Designation	11

Official Designation.

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

, 19. 6 6.

...Clerk

...Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS _County

....Circuit Court

	Date of Application
MALE 3 Tal 186	FEMALE 7 Fel 186
Medical Examination Report Dated	Medical Examination Report Dated
Name of Physician David B. Haggard M.D	Name of Physician David D. Haggard MD
	Wheever procures the issuance of a license to marry by any false statement represents
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False stattion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	ement—whoever procures the issuance of a needse to marry by any raise seatement, representa-
MALE APPLICANT	FEMALE APPLICANT
Name First Middle A C Last	Name First Middle Last
angu Han Vi Kee	Date of Birth Month Day Year
Date of Birth	Place of Birth (State or foreign country)
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 Cunty State
La Conter Ballard, My.	Maiden Name if Different
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
Color or Race White Negro Other (specify)	
Usual Occupation Minister.	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Same tand:
Other (Specify)	Date of birth verified by: Birth Cert Judicial Decree
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes	Other (Specify)
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes 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	Of Unsound Mind?
4. Are you afflicted with a transmissible disease? No Yes No Ye	2. Are you under guardianship as a person of unsound mind? No P Yes
5. Are you related to the bride closer than second cousin? 6. Are you now under the influence of intoxicating liquor? No Yes Yes 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?
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	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 Charles William I wear
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Engineer W.BC., Race of father What
	Birthplace of father (State or foreign country) Yaducah
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother ecile
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for their support? Yes \Boxed No \Boxed	Residence of mother (if\deceased so state)
11. Full name of father Aude Mc Kee	Occupation of mother tousewife, Race of mother white
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country). Beed, Grove, Ind
Occupation of father White	Charles and a many a superior for the few and a second or second as
Birthplace of father (State or foreign country) M. T. Janua.	State of Indiana, HENDRICKS I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Verna Alberta avunlen	County of
Residence of mother (if\deceased so state) Myrray Ky	Signed Dara Laural Thweall
Occupation of mother toutewat . Rage of mother White	New Address.
Birthplace of mother (State or foreign country) Sikes town, Mo.	Subscribed and sworn to before me this day of Februar, 1966
State of Indiana, ss: I depose and state the information given	HENDRICKS Circuit Court
County of HENDRICKS SS: A this amplication is true and correct.	
Signed 3200 Co As	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address Bx 282 La Cente	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and swonn to before me this day of 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.	
Paents Notarrew state-	
ment a Hagher: Votaren state-	State of Indiana,
ment a Haghw. State of Indiana,	State of Indiana, County of
State of Indiana, County of HENDRICKS State of Indiana, Base State Stat	HENDRICKS Ss:
HENDRICKS SS:	County of Signed Signed Father
County of HENDRICKS Signed Father Signed Mother	County of Signed Father Signed Mother
County of HENDRICKS Signed Father	County of Signed Signed Father
County of HENDRICKS Signed Father Signed Mother	County of Signed Father Signed Mother
Signed	County of Signed Father Signed Mother Subscribed and sworn to before me this day of
Signed Father Subscribed and sworn to before me this Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	County of Signed Father Signed Mother Subscribed and sworn to before me this day of Clerk CT. A marriage license having been refused to the above named parties, the
Signed Father Signed Mother Subscribed and sworn to before me this Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	County of
Signed Father Signed Mother Subscribed and sworn to before me this Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY County authorizes and directs the issuance of the county of the coun	County of Signed Father Signed Mother Subscribed and sworn to before me this day of Clerk CT. A marriage license having been refused to the above named parties, the purt by written order issued and filed of a marriage license to the above named parties.
Signed Father Signed Mother Subscribed and sworn to before me this Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE	County of
Signed Father Signed Mother Subscribed and sworn to before me this Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT County	County of Signed Father Signed Mother Subscribed and sworn to before me this day of Clerk CT. A marriage license having been refused to the above named parties, the purt by written order issued and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE Circuit Court
Signed Signed Mother Subscribed and sworn to before me this Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance of Indiana dated the day of Jebruary	County of
Signed Father Signed Mother Subscribed and sworn to before me this Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance of Indiana dated the day of Tebruary Be it further remembered, the following marriage certificate was filed in my Be it further remembered, the following marriage certificate was filed in my	Signed
Signed Signed Subscribed and sworn to before me this COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE Is authorizes and directs the issuance of Indiana dated the day of ANY Alan Be it further remembered, the following marriage certificate was filed in my I, Medical	Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk CT. A marriage license having been refused to the above named parties, the purt by written order issued and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE Circuit Court 19
Signed Signed Signed Signed Signed Subscribed and sworn to before me this Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE Of Indiana dated the day of Jebuary Be it further remembered, the following marriage certificate was filed in my I, one thousand nine hundred and	County of Signed Father Signed Mother Subscribed and sworn to before me this day of Mother Subscribed and sworn to before me this day of Mother Clerk CT. A marriage license having been refused to the above named parties, the purt by written order issued and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE Circuit Court Marriage license issued by the clerk of the Mother Marriage license to the above named parties.
Signed Father Signed Mother Subscribed and sworn to before me this LICENSE ISSUED BY ORDER OF COUNTY County County County County in authorizes and directs the issuance RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE Be it further remembered, there was filed in my office a marriage lice of Indiana dated the day of Debuary Be it further remembered, the following marriage certificate was filed in my I, One thousand nine hundred and County State of Indiana, Groom Mary Class Medical State of Indiana, Groom Medical State of Indiana Medical State of India	Signed Father Signed Mother Subscribed and sworn to before me this day of Clerk AT. A marriage license having been refused to the above named parties, the purt by written order issued and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE Circuit Court parties issued by the clerk of the Circuit Court parties issued by the clerk of the Circuit gether as husband and wife and Circuit for the Circuit for the confice, to wit: Thereby certify that on the State day of Circuit for the confice, to wit:
Signed Father Signed Mother Subscribed and sworn to before me this Live of Liv	Signed Signed Mother Signed Mother Subscribed and sworn to before me this day of 19 Clerk CT. A marriage license having been refused to the above named parties, the purt by written order issued and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE Circuit Court 19 County of the Subscribed and wife and Souther as husband and wife and Souther as
Signed Signed Signed Signed Subscribed and sworn to before me this Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE Be it further remembered, there was filed in my office a marriage lice of Indiana dated the day of Televisian Be it further remembered, the following marriage certificate was filed in my I, one thousand nine hundred and State of Indiana, Groom State of Indiana, Groom ALLY ALL AND ALL ONE ALL AND AND	County of Signed Father Signed Mother Subscribed and sworn to before me this day of 19
Signed Signed Signed Signed Subscribed and sworn to before me this Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE Be it further remembered, there was filed in my office a marriage lice of Indiana dated the day of Televisian Be it further remembered, the following marriage certificate was filed in my I, Mall one thousand nine hundred and State of Indiana, Groom AND LL one thousand nine hundred and State of Indiana, Groom AND LL one thousand nine hundred and State of Indiana, Groom AND LL one were by me united in marriage as authorized by a marriage license issued for County.	County of Signed Father Signed Mother Subscribed and sworn to before me this day of 19
Signed Signed Mother Subscribed and sworn to before me this Signed Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance of Indiana dated the day of Personal County Be it further remembered, the following marriage certificate was filed in my in the following marriage i	Signed Signed Mother Subscribed and sworn to before me this day of
Signed Signed Signed Signed Subscribed and sworn to before me this Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE Be it further remembered, there was filed in my office a marriage lice of Indiana dated the day of Televisian Be it further remembered, the following marriage certificate was filed in my I, one thousand nine hundred and State of Indiana, Groom State of Indiana, Groom ALLY ALL AND ALL ONE ALL AND AND	County of Signed Father Signed Mother Subscribed and sworn to before me this day of 19 Clerk CT. A marriage license having been refused to the above named parties, the purt by written order issued and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE are issued by the clerk of the State Circuit Court 19 In the purpose by the Clerk of the Circuit Court of Leature County, State of Leature County, Sta

Dated this ..

STATE OF INDIANA Health under Authority APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS County MALE Medical Examination Report Dated. Date of Application FEMALE Irvin Medical Examination Report Dated 10 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, representa-FEMALE APPLICANT Date of Birth vra Place of Birth Previous Marital Status: Never Married Number of Previous Marriages. Death | Divorce | Annulment | Last Marriage Ended By: Previous Marital Status: Never Married Number of Previous Marriages. Color or Race Negro | Other | (specify)... Last Marriage Ended By: Death | Divorce | Annulment | Color or Race Date of birth verified by: Birth Cert. | Judicial Decr Other (Specify)... Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile?
 Date of birth verified by: wirth Cert. | Judicial Decree / Yes 🗆 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 county home for indigent persons? 1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? 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? Yes 🗆 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? Yes 🗆 6. Are you now under the influence of intoxicating liquor? 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? No 🗆 5. Are you now under the influence of intoxicating liquor? Yes 🗆 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 Address Occupation of father Mail Corrie Indeb 8. Full maiden name of mother Clayola (b) Are you supporting or contributing to their support? Yes 🗌 No 🗆 (c) Are you complying with any court order or their support? Yes 🗌 Warran Ins. 11. Full name of father ... Birthplace of mother (State or foreign country) Sakhell, Residence of father (if deceased so state). Occupation of father Warn towarde State of Indiana, (0. jul. HENDRICKS Birthplace of father (State or foreign country). County of ... 12. Full maiden name of mother. VioleT Residence of mother (if Occupation of mother Dusewite. Birthplace of mother (State or foreign country). Some (S., IN.) HENDRICKS State of Indiana, ... Circuit Court HENDRICKS County of ... CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent New Address signs, state facts which render the consent of the other parent unnecessary. HENDRICKS .. Clerk... CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent State of Indiana, HENDRICKS Father State of Indiana, HENDRICKS 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....authorizes and directs the issuance of a marriage license to the above named parties. ..County RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE Hudricks Be It Remembered, there was filed in my office a magriage license issued by the clerk of the..... . 1966, authorizing the joining together as husband and wife and Maron Ann Bellamy ficate was filed in my office, to-wit: of Indiana dated the Robert ...hereby certify that on the.... Be it further remembered, the followin 1, Marren County, State of Indian one thousand nine hundred and morgan 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.

Signed War

....Circuit Court

Official Designation ...

Felluary, 1966.

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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

File Book 28

Date of Application 1966

_____Circuit Court

MALE
Medical Examination Report Dated 11 Februaria Medical Examination Report Dated 12 Februaria 1966
Name of Physician F. P. Sones M.D.

Name of Physician F. P. Sones M.D.

Name of Physician F. P. Sones M.D.

HENDRICKS County

ALL QUESTIONS MUST BE ANSWERI	ED. Chapter 126, Indiana A	cts 1905 prescribes "False state	ment-Whoever procures the issue	ance of a license	to marry by any i	alse statement, representa-
tion or pretense shall be fined in any su	11 1103 11111111	red dollars (\$500.00)		FEMALE AP	PLICANT	
MALI	E APPLICANT	Last	Name First	THE RESERVE	Middle	Last V
Name First	Middle	Clark.	Warily Moor	n	Day	Year Year
Date of Birth Manth	Day	1922	Date of Birth	L	6	1938
Place of Birth (State or foreign country)		1120	Place of Birth (State or foreign	country)	111	
In dian ad oli	3, Indans	County State	Residence Address Str	reet or R R.	City	County State
Residence Address Street or R.	R. Il By Ind	- Out were M. S.	RI Da	m ville,	Hen	LAGERS' INO.
6200 Snaph	d Number of Previous	Marriages2	Maiden Name if Different	an N	(. Ti	Hany
Previous Marital Status: Never Married			Previous Marital Status: Nev	Married N	Sumber of Previou	s Marriages
Last Marriage Ended By	Divorce Annulm	Nacion -			5/ Annul	ment (A)
Color or Race White Negro	Other (specify).		Last Marriage Ended By:	Death Di	vorce Annul	Marion
Color or Race White Negro		1	Color or Race White	Negro 🗆 O	ther [(specify)
Usual Occupation Sales: S	hank Word	e hee.	Color or Race	, 1	> 1	CANDON STREET
Date of birth verified by: Birth Cer			Usual Occupation	: Ind	· Dell.	
Other (Specify)		dos	Date of birth verified by:	Birth Cert. Ju	idicial Decree	
1. Are you now or have you been adjud An Imbecile?	ged, diagnosed or considered	No Yes Ves Ves	Other (Specify)		wic out	
Of Unsound Mind? 2. Are you under guardianship as a pe	erson of unsound mind?	No Yes 🗆	1. Are you now or have you b	been adjudged, dia	gnosed or consider	ed as:
3. Are you now or have you been wit	thin five (5) years an inm	ate of a county sylum or No Yes	An Imbecile?			No W Yes
home for indigent persons? If answer to 3 is "yes" has the caus			Of Unsound Mind?			No F les
4. Are you afflicted with a transmissi	ible disease?	No Fies	2. Are you under guardianshi	ip as a person of	unsound mind?	No Yes L
5. Are you related to the bride closer	than second cousin?	No Yes Ves	3. Are you afflicted with a tr	ransmissible diseas	se?	No Yes
6. Are you now under the influence of 7. Are you now under the influence of	of a narcotic drug?	No Wes 🗆	4. Are you related to the gro	oom closer than se	econd cousin?	No Yes
8. Are you able to support a family?		Yes No 🗆	5. Are you now under the in			No Yes
9. Are you likely to so continue?		Yes No Yes	6. Are you now under the ir			1 No Pos
10. Do you have minor children from of (If yes, answer questions a, b, c)			7. Full name of father	Kalph	New	Ton Tittay
(a) List their full names, ages and		Address	Residence of father (if de	eceased so state)	Lawren	ce (0., 11):
Name	Age	Address	Occupation of father		Texas 6. Rac	e of father whate
			Birthplace of father (Star		1	sence bo, III
				-/-	- 41 -	ie Packer
	uting to their support?	Yes No	8. Full maiden name of mot		1	a = 6 TIL
(b) Are you supporting or contrib (c) Are you complying with any c	ourt order or orders issued		Residence of mother (if	deceased so state)hand	whit
their support?	7	1 0 1	Occupation of mother.	tousen . K		ee of mother
11. Full name of father.			Birthplace of mother (Sta	ate or foreign cou	ntry) Craw	6, III
Residence of father (if deceased s	state))te	Birthplace of mother (ou			
Occupation of father		ce of father White	State of Indiana,	1.	I depose an	d state the information give plication is true and correc
Birthplace of father (State or for			County of		in this api	neation is true and estre
12. Full maiden name of mother		scille Smith	Cian	Maril	we Bu	ziah
Residence of mother (if deceased	so state Y LOC	MIX, MIZ	Sign	ned Land	5	
Occupation of mother	Sem + Rac		New Addre	ess		51
Birthplace of mother (State or for	reign country) Bloo	ming Ten, Ind.	Subscribed and sworn to bef	ore me this	day of	
State of Indiana,) I denose and	state the information given	Xaliar -	James	Clerk	DRICKS Circuit Cou
County of HENDRICKS	in this appl	lication is true and correct.				
Signed	orman to al	1 1	CONSENT OF PARENTS,	PARENT OR GU	ARDIAN	
New Address	20 V. Dre	Xel Inopis	We, the parents, of this app			marriage. If only one pare
Subscribed and sword to before me	157 day of	rebryan, 1966	signs, state facts which rene			
Jala James	Clerk HEND	RICKS Circuit Court	signs, state facts which rene	der the consent o	the other paren	C dimeessary
CONSENT OF PARENTS, PARENT	OR GUARDIAN					
We, the parents, of this applicant he	ereby give consent for this	marriage. If only one parent				
signs, state facts which render the			The second of the second of			
				3-40 540		
			State of Indiana,	KS }	88:	
State of Indiana,)		County of			
County of HENDRICKS	}ss:		Signed			Fath
Signed		Father	Signed			Mot
		Mother				
Subscribed and sworn to before me t		, 19	Subscribed and sworn to be	fore me this	day of	
		Clerk	THE REAL PROPERTY.			Cl
					C	hove named nartice
COMPLETE IF MARRIAGE	E LICENSE ISSUEI	BY ORDER OF COU	RT. A marriage license h	aving been re	fused to the	bove named parties,
***************************************	County		Court by written order issue	ed	***************************************	and n
in	authorize	es and directs the issuance	of a marriage license to th	ne above name	d parties.	and the second
	RETURN	OF MARRIAGE LICEN	SE AND MARRIAGE CE	RTIFICATE	1 0.	6
Be It Remem	bered, there was filed i	in my office a marriage lie	ense issued by the clerk of	the Z	Lendric	Circuit Co
of Ludiana dated the	19th day of	+ Sebruare	1 . 1966.0	authorizing the	e joining toget	her as husband and u
of Induna dated the	norma	W Hollarb	and Marily	M.	Kusi	sk)
Be it further remembered, th	ie following marriage	certificate was filed in my	office, to-wit:			Charles Bridge Co.
I,		na v	hereby certify that on the	e	day of	
one thousand nine hundred	and	\$ 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	at		, County	of
State of Indiana, Groom						
and, Bride						
were by me united in marria						
were by me united in marria County.	ge as aninorized by a	marriage acense issuea f	or that purpose by the Clerk	of the Otreut	Court of	THE REST OF THE PARTY.
Dated this	day of		Charles of the commence of the			
			Signed			
			Official Designation			
Filed and recorded in accord	lance with the laws of	the State of Indiana this.	day of			, 19
	The second secon				The second second	

APPLICATION FOR MARRIAGE LICE

HENDRI	ICKS File Fook 28
MALE Medical Examination Report Dated 9 15 1	County 15 Fe Larvan Jalon
Name of Physician Dored 2 1 1 1966	FEMALE Date of Application
D. 1	Medical Examination Report Dated 9 Februar 1966
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False st MALE APPLICANT Name First Middle	Name of Physician Devid B. Haggard All
MALE APPLICANT	atement—Whoever procures the issuance of a license to marry
Name First Middle	FPMALD COMMAND AND AND AND AND AND AND AND AND AND
Date of Birth Month Day	Name First Middle
Place of Birth (Scale or foreign country)	Date of Birth Month
Residence Address Street of R. R. Indiana	Place of Birth (State on Greign country)
Box 461 Clermant the State	Residence Address Street - B. Street
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different State
Last Marriage Ended By: Death Divorce Annulment	Dance it Different Dance, Ind.
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
Usual Occupation A 31	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race
Other (Specify)	Usual Occupation Cher (specify)
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? No Y Yes 2. Are you under guardianship as a person of unsound mind? No Y Yes Ye	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county sylum or home for indigent persons?	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 L Yes
5. Are you related to the bride closer than second cousin?	Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes
7. Are you now under the influence of a possession but Yes	3. Are you afflicted with a transmissible the
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 received.	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.
	Residence of father (if deceased so state) Be to have
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes□ No□	8. Full maiden name of mother. Beulah Mac Mullins
(c) Are you complying with any court order or orders issued for their support? Yes Not	Residence of mother (if deceased so state)
11. Full name of father Ernest Harrison Fine cont	Occupation of mother Labore: Hy grade Race of mother whate
Residence of father (if deceased so state) Clarmont Ind.	Birthplace of mother (State or foreign country) Weeksbury, Ky
Occupation of father Mach insel: Allega Race of father. White	State of Indiana.
Birthplace of father (State or foreign country) (nd tamapo (12), 140.	County of
12. Full maiden name of mother. // Abel Conf. Dearks:	Signed Helen Hunt
Occupation of mother (if deceased so state) Race of mother White	New Address.
Birthplace of mother (State or foreign country) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Subscribed and evern to before me this AS day Tely and 196
State of Indiana, depose and state the information given	Clerk HENDRICKS Circuit Court
County of HENDRICKS in this application is true and correct.	
New Address Box Abl Clarmour Jud	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me that A A day of Chryan 1946.	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	
signs, state facts which render the consent of the other parent unnecessary	
	State of Indiana, HENDRICKS ss:
State of Indiana.	County of
County of HENDRICKS	Signed
Signed Father Mother	Signed
Signed	Subscribed and sworn to before me this
Clerk	
an cour	T. A marriage license having been refused to the above named parties, the urt by written order issued
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COOR	T. A marriage license having been refused to the and filed and filed and filed for marriage license to the above named parties.
1 limete the iggilance of	1 a married
in authorizes and direct LICENS	E AND MARRIAGE CERTIFICATE Circuit Court se issued by the clerk of the
RETURN OF MARKING	se issued by the clerk of the Court to the clerk of the Circuit Court to the Court
	Tolon Lunt
of Indiana dated the Siricast was filed in my o	nd Hella fice, to-wit:
Be it further remembered, the following marriage certificate was filed in my o	hereby certify that on the 19th day of Landricks
1, g cears f. and	at Descensive County, State of Indiana
one thousand nine hundred and I Juneat	County, State of Allana,
State of Indiana, Groom Cariff M. Groom of	that aurnose by the Clerk of the Circuit Court of Henduscks
were by me smited in marriage as authorized by a marriage license issued for	that purpose of
10 11	Signed Clary (Battet)
	Official Designation Ministel Superior 19 66.
. L. Jimme this	23 nd day of Gambald Jo. Clerk
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Jerdareka Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No. 28
File Book 28
Date of Application 466

HENDRICKS _County Date of Application MALE Medical Examination Report Dated 198 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)". FEMALE APPLICANT MALE APPLICANT First Middle Name Date of Birt Previous Marital Status: Never Married E Number of Previous Marriages Previous Marital Status: Never Married Number of Previous Marriages. Death Divorce Annulment Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: White Negro Other Color or Race (specify). Usual Occupation Sa Negro | Other | (specify)... Date of birth verified by: Birth Cer Usual Occupation Other (Specify) .. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Birth Cert. | Judicial Decree Date of birth verified by: 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? Yes [An Imbecile? If answer to 3 is "yes" has the cause of such condition been removed? No 🗆 Yes 🗌 Of Unsound Mind? 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? ↑ Yes □ 3. Are you afflicted with a transmissible disease? Nes 🗆 6. Are you now under the influence of intoxicating liquor? 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 🗆 5. Are you now under the influence of intoxicating liquor? 9. Are you likely to so continue? 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) 7. Full name of father. (a) List their full names, ages and addresse Address Residence of father (if deceased so state)... Occupation of father TVAV . Am Stee Birthplace of father (State or foreign country).... 8. Full maiden name of mother. Alba-t (b) Are you supporting or contributing to their support? Yes \square No П Are you complying with any court order or orders issued for their support? Residence of mother (if deceased so state) Yes 🗌 No 🗆 Occupation of mother. 11. Full name of father. ndiana Residence of father (if deceased so state) Birthplace of mother (State or foreign country). of father. Whi State of Indiana, I depose and state the information given in this application is true and correct. Birthplace of father (State or foreign country) HENDRICKS County of .. 12. Full maiden name of mother Donita Residence of mother (if deceased so state) ... Occupation of mother ... 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 HENDRICKS .Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN New Address We, the parents, of this applicant hereby give consent for this marriage. If only one parent HENDRICKS 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 State of Indiana, County of ... County of HENDRICKS Signed. 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, theCounty..... 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 Hendricks of Indiana dated the .. 19.6.6, guthorizing the joining together as husband and wife Be it further remembered, the following marriage certificate was filed in my office, to-wil. one thousand nine hundred and ... 4 State of Indiana, Groom ... Befeski of Will County, 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 County. Official Designation .. Filed and recorded in accordance with the laws of the State of Indiana this. 2. 3.4.

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE File Book 28
15 February 1966
Date of Application HENDRICKS County MALE
Medical Examination Report Dated 10 51

Name of Physician Fred P Washington	Medical Examination Report Dated 10 Televan 1966
am ar ar ar ar ar	
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	ment—Whoever procures the issuance of a license to marry by any false statement, representa-
Name Name Lost Lost	FEMALE APPLICANT
Date of Birth Month Day Year	Name First Middle Last
Place of Birth (State or foreign equntry)	Date of Birth Month Day Year
Residence Address Sweet or R. R. City County State	Place of Birth (State or foreign country)
202 Grobs St., Plaintich Had Ind.	Residence Address Street r 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 Gas Station attendan: Blanton	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Restance
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 \(\)	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county oxylum or home for indigent persons? Yes	1. Are you now or have you been adjudged, diagnosed or considered as: 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? No Yes	Of Unsound Mind?
5. Are you related to the bride closer than second cousin? No Yes 6. Are you now under the influence of intoxicating liquor? No Yes	2. Are you under guardianship as a person of unsound mind? No Yes 3. Are you afflicted with a transmissible disease? No Yes Ye
7. Are you now under the influence of a narcotic drug? No Y Yes	4. Are you related to the groom closer than second cousin?
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?
10. Do you have minor children from one or more former marriages? No Yes	6. Are you now under the antiuence of a narcotic drug?
(a) List their full names, ages and addresses Name Age Address	7. Full name of father 1. (if deceased so state) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	Occupation of father Sar Warranty Rose 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
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state)
11. Full name of father	Birthplace of mother (State or foreign country) Montovia Indian-
Residence of father (if deceased so otate). Than American Why To	A Lat. 4b - Information given
Occupation of father (State or foreign country).	State of Indiana, HENDRICKS Ss: I depose and state the Information and correct. In this application is true and correct.
12. Full maiden name of mother Dorothy tangua Hutter	Signed Fatricia Joan Draix
Residence of mother (if deceased so state) Race of mother. White	New Address. 1906
Birthplace of mother (State or foreign country)	Subscribed and sworn to before the HENDRICKS Circuit Court
State of Indiana, HENDRICKS as: I depose and state the information given in this application is true and correct.	Clerk Clerk
Signed William Roup Trump	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 133 E. Spring St., Fill	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and swore to before me the hand day of Che by was 19 000	signs, state facts which render the consent of the other parent unnecessary
CHARDIAN CHARDIAN	
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 remer the consent of the other parent unnecessary.	
	State of Indiana, HENDRICKS County of
State of Indiana.	Signed
County of HENDRICKS Fathe	Signedday of
Signed Mother	Subscribed and sworth
Subscribed and sworn to before me this	k parties, the
D DV ORDER OF CO	OURT. A marriage license having been refused to the above named parties, the Court by written order issued
COMPLETE IF MARRIAGE LICENSE ISSUED BY	Court by written order issued
and directs the issual	nce of a married
Be It Remembered, there was filed in my office a marriage	ENSE AND MARRIAGE CERTIFICATE license issued by the clerk of the ioning together as husband and wife a vacia sound sound to the control of
70. 74 22 emembered, there was filed in my opin	want Detail Joan William
of Indiana dated the Ray Trum P fled in	my office, to-wit: 15th day of 1
of Indiana dated the State day of day of Be it further remembered, the following marriage certificate was filed in I. I author the following marriage certificate was filed in the following the following marriage certificate was filed in the following marriage certificat	my office, to-wit: hereby certify that on the 15th day of Hendricks, at Plainfield County, State of Indiana, Hendricks,
1,	Hendricks . State of nauna,
one thousand nine hundred and State of Indiana, Groom Silliam Ray Srump of and, Bride Latricia Joan Luy were by me united in marriage as authorized by a marriage license issued County.	Hendricks Growit Court of Hendricks
and Bride Patricia Jan Ling issue	for that purpose by the Clerk of the
were by me united in marriage as authorized by a marriage weeks	gle signed Karren a roburt
were by me united in marriage as authorized by a marriage County. Dated this 19th day of Jellusty, 1	
	17 +1 day of
Filed and recorded in accordance with the laws of the State of Indiana to	signed John Samthal Circuit Court
rued and recorded in accordance	

597 Form Prescribed By Indiana State Board o Health under Authori NAMES OF STREET OF STREET STREET, STRE Chap. 126, Ind. Acts February 14, 1966 MALE Medical Exar States bearing states Devel + D. Fr bare se 18 to b Name of Phy ALL QUESTIONS M To Whom It May Concern: PENALE APPLICAN This is to ceritify that we, the undersigned, are respectively mother and father of William Ray Trump. may We do hereby give our full consent to the marriage of 40the aforesaid William Ray Trump. Previous Marital Sta Last Marriage Ende Color or Race Usual Occupation Date of birth verifies Other (Specif 2. Are you under a If answer to 2 i 400 4. Are you afflicte 2004 ED THE 8. Are you able to No B Year 9. Are you likely NAME OF 10. Do you have mi State of Indiana (If yes, answer (a) List their f County of Hendricks) of tal lar year to waster or significant report that they attack, Ind. Before me, a notary public in and for the aforesaid to al seed to county and state, personally appeared Raymond Trump and had brokens (b) Are you so Dorothy Trump and acknowledged the execution of the (c) Are you co Sales of proper , by by The of management and the A foregoing statement. 11. Full name of f Planted Lines States from Mr. H. Occupation of William acompany is the first from the Birthplace of to designed they took 12 Full maiden r Places in the light My commission expires March 7, 1969. Birthplace of State of Indiana. in a the brush 1264 White Const Mentioned Street Const CONSENT OF B We, the parents, signs, state facts' State of Indiana. County of ___ THE TACK LICENSE ISSUED BY ORDER OF COLUMN A ORD County Du 29-184 County white to the section bearing parties 3 da COMPLETE anthorizes and directs the dame. e those RETURN OF MARRIAGE LICENSE A 130 ., guthorizing the joining together as pusoana ana wife is it interastered, there was filed in my affice a marriage Service many Patricia Joan Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the 15th day of February at Plainfield of Hendricks County, State of Indiana

County, State of Indiana

County, State of Indiana Marren a. Robins one thousand nine hundred and 66. 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. day of Jelmary, 19.66. Official Designation Chec Dated this 12 th Filed and recorded in accordance with the laws of the State of Indiana thisCircuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS ___County

No			4	6		
File.	-	3	200	sk	2	8
	1	6	Fe	620	an	1966
		Date	of App	plicatio	on	7

MALE Medical Examination Report Dated 16 February 1966	FEMALE Medical Examination Report Dated 16 February 1966			
Name of Physician Jyvin Cohen MD.	Name of Physician Irvin Cohen MD.			
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	Name First Middle 1 Last			
Name First Middle Last	Tavline It. Thomas			
Date of Birth Month Day Year	Place of Birth (State of Foreign country)			
Residence Address Street or R. R. City County State	Residence Address Street or R. R. City County (State			
101 W. Warn Plays field, the land.	Maiden Name if Different Note Planned Lew Ind.			
Previous Marital Status: Never Married Number of Previous Marriages	Pauline H. Casimir			
Last Marriage Ended By: Death Divorce Annulment Delevered	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 Cett Judicial Decree	Color or Race White Negro Other (specify)			
Other (Specify) Drives hicenso.	Usual Occupation Control of Laboratory Contr			
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Of Unsound Mind? No ✓ Yes ☐	Date of birth verified by: Birth Cert. Judicial Decree			
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 sylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes			
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?			
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? 9. Are you likely to so continue? Yes No	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 □			
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?			
(a) List their full names, ages and addresses Name Age Address	7. Full name of father			
Suzanne A. 7 1544Woodlaw Are.	Residence of father (if deceased so state) Race of father Race of father			
Isafelle Te 13	Birthplace of father (State or foreign country)			
(b) Are you supporting or contributing to their support? Yes No V	8. Full maiden name of mother.			
(c) Are you complying with any court order or orders issued for their support? Nother war, w. New Fatters and No. No.	Residence of mother (if deceased so state)			
Residence of father (if deceased so state)	Occupation of mother Race of mother Race of mother Ally.			
Occupation of father at - Myr. Columnia Race of father White	The second of th			
Birthplace of father (State or foreign country) This deliberation of Miles 12. Full maiden name of mother 150 61 6 7 7 9 7	State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.			
Residence of mother (if deceased so state) Sharan Hill Per	signed Pauline N. / homas			
Occupation of mother. Race of mother. White	New Address.			
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this leth day of Teleman, 1966			
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Clerk Circuit Court			
New Address Danckle Mark Rambiel	CONSENT OF PARENTS, PARENT OR GUARDIAN			
Subscribed and sworn to before me this late day of character 1900	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	Afficial the 1966 the employee and the foreign to the contract of the contract			
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 Signed Father	SignedFather			
SignedMother	Signed			
Subscribed and sworn to before me this	Subscribed and sworn to before me thisday of			
	Clerk			
	T. A marriage license having been refused to the above named parties, the urt by written order issued			
in authorizes and directs the issuance o	f a marriage license to the above named parties.			
Be It Remembered, there was filed in my office a marriage licen	E AND MARRIAGE CERTIFICATE			
of Indiana dated the 20th day of 1-e way	se issued by the elerk of the			
Be it further remembered, the following marriage certificate was filed in my o				
1, algere C. Clauley	hereby certify that on the 20th day of February			
one thousand nine hundred and Q. Q.	at Plainfield Country of Hendricks			
and, Bride Pauline J. Thomas of Hendricks County, State of Indiana, of Hendricks County, State of Indiana, were by me wited in which the state of Indiana,				
County.	that purpose by the Clerk of the Circuit Court of Sendricks			
Dated this 20th day of Televary, 1966	8 8 1			
and the state of t	Official Designation Justice of the Harry			
Filed and recorded in accordance with the laws of the State of Indiana this	1st day of march 1966			
	Signed Joff Lamburd Je Clerk			
	Hendricks Circuit Court			

19.....

_Clerk

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Clerk eit Court 595

	County 17 Februar 1866
MALE Medical Examination Report Dated 14 Februar (966)	FEMALE
Name of Physician Arvin Cohen HA	Medical Examination Report Dated 14 February 1966
	Name of Physician IY vin Cohen MD.
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False stater tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	ment-Whoever procures the issuance of a license to marry by any false statement, representa-
MALE APPLICANT	FEMALE APPLICANT
Name Sack Middle Last	Name First Middle Last
Date of Birth Day Year 7	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
Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different
Previous marital control	
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (apecify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation Savice Sta Attendant: Cooks bol.	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Vagan 2 longed
Other (Specify)	Date of birth verified by: Birth Cert. Judicial Decree
An Imbeche No Yes	Other (Specify)
2. Are you now or have you been within five (5) years an inmate of a county assum or No Yes	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes
3. Are you now or have you been with home for indigent persons? If answer to 3 is "yes" has the cause of such condition been removed? No Yes Yes	Of Unsound Mind?
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	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? Yes No	5. Are you now under the influence of intoxicating liquor? 6. Are you now under the influence of a narcotic drug? No Yes Yes
10. Do you have minor children from one or more former marriages.	7. Full name of father Llaryen Phillips Hessiles
(a) List their full names, ages and nourceses	Residence of father (if deceased so state)
Name Age Address	Occupation of father
	Birthplace of father (State or foreign country)
Yes No □	8. Full maiden name of mother.
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for Yes No	Residence of mother (if deceased so state)
their supports Clave Devan Cook;	Occupation of mother was a company of the company o
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Race of father	State of Indiana. HENDRICKS State of Indiana. HENDRICKS State of Indiana. State of Indiana. HENDRICKS State of Indiana.
Birthplace of father (State or foreign country) and Sperier	S. County of Solice and Ann He
12. Full maiden name of mother Natha Jean Maria	Signed State To Table 1
Residence of mother (it deceased so state) Race of mother What	New Address. day of February
Occupation of mother (0)	Subscribed and worn before me things HENDRICKS
State of Indiana, State of Indi	ven det. Gerk Gerk
County of HENDRICKS	PARENT OR GUARDIAN
Signed Service /	Landicant hereby give consent for this
New Address Address day of February 186	signs state facts which render the consent of the other
Subscribed and aworn to before the thin Clerk HENDRICKS Circuit C	ourt Spanish
CONSENT OF PARENTS, PARENT OR GUARDIAN	rent
signs, state facts which render the consent of the other parent unnecessary	State of Indiana, HENDRICKS
Fathes	County of
	Signed
State of Indiana, County of HENDRICKS State of Indiana, HENDRICKS	ather Signed day of day
Signed	other Subscribed and sworn to before me this day of the subscribed and sworn to before me this day of the subscribed and sworn to before me this day of the subscribed and sworn to before me this day of the subscribed and sworn to before me this day of the subscribed and sworn to before me this day of the subscribed and sworn to before me this day of the subscribed and sworn to before me this day of the subscribed and sworn to before me this day of the subscribed and sworn to before me this day of the subscribed and sworn to before me this day of the subscribed and sworn to before me this day of the subscribed and sworn to before me this day of the subscribed and sworn to be subscribed and subscribed and sworn to be subscribed as the subscribed and subscribed and sworn to be subscribed as the subscribed and subscri
SIKITED	
Subscribed and sworn to below	A marriage license having been refused to the above
COMPLETE IN MARRIAGE LICENSE ISSUED BY ORDER OF	COURT. A marriage license having been refused Translated Court by written order issued
COMPLETE IN MARRIAGE LICENSE	Suance of a marriage license to the above named parties. LICENSE AND MARRIAGE CERTIFICATE Live the rieft of the successful to the state of the successful to the successful
and directs the	CERTIFICATE CALL STORY
TON OF MARION	incorporation of the first the second to the
there was filed in my ob	1000
of Indiana dated the day of	and and fewit: 18th day of Jehr
the following marriage certification	hereby cells 1 111
Be it further remembered, the Robbins	at Banke County, State of July
one thousand nine hundred and le R Cask State of Indiana, Groom Jack R Lask and, Bride Reservation Jan Hessley were by me united in marriage as authorized by a marriage license is County.	hereby certify that on the County of Shape at Plainfield County, State of Shape County, Sh
State of Indiana, Groom Jack A 1 1000	of that surpose by the Clerk of the Circuit Court
hi herry war. Bronse is	sued for the
were by me united in marriage as authorized by a me	, 19.6.6. Signed Christian minister
were by me united in marriage as authorized by a marriage them. County. Dated this	Official Designation Christiany J. 19.6 Cler
Filed and recorded in accordance with the laws of the State of Indian	na this 2/st day of Dambald Circuit Cou
the State of Indian	
dance with the laws of the state	Signed J. Stendrick

Father Mother 18---

Clerk

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Clerk sit Court

STATE OF INDIANA

595

h under Authority	ATTLICATION FOR M	ARRIAGE LICENSE
126, Ind. Acts 1905	APPLICATION FOR M. HENDRICK	a The Table
	- I DAICH	County 17 telyan 1966
MALE Medical Examination	Report Dated 14 Telyna (6)	FEMALE Date of Application
	1 01	Medical Examination Report Dated 14 Restray 1966
Name of Physician	Trin Cohen, M.D	Name of Physician Ivvin Cohen MD.
QUESTIONS MUST BE	ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state	ment-Whoever procures the issuance of a license to marry by any false statement, representa-
or pretense span be mice	MALE APPLICANT	radever procures the issuance of a license to marry by any false statement, representa-
First	Middle Last	Name Final Final
e Sack	K. LOOK	Kebecca A Middle Hessley
APRIL	1947	Date of Birth Month Day Year
e of Birth (State or for	gn country)	Place of Birth (State or fortist) country)
dence Address	treet or R. R. City County State	Residence Address Street or R.R. City County , State
Ky he	sanon, soone, Indiana	Maiden Name if Different Parntield Hawrish Ind.
ious Marital Status: No	ver Married M Number of Previous Marriages	maden Name it Dinerent
t Marriage Ended By:	Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
White	Negro Other (apecify)	Last Marriage Ended By: Death Divorce Annulment
or or mace	-1 11 1	
nal Occupation Sav	Ce Sta Attendart. Cooks by	Color or Race White Negro Cother (specify)
	Birth Cert. Judicial Decree	Usual Occupation Unem 7 longed
Other (Specify)	u been adjudged, diagnosed or considered as:	Date of birth verified by: Birth Cert. Judicial Decree
An Imbecise:	No My Yes	Other (Specify)
law consediar	ship as a person of unsound mind? Now Yes or you been within five (5) years an inmate of a county sylum or Now Yes or Yes	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes
		Of Unsound Mind?
to you afflicted with	a transmissible disease?	2. Are you under guardianship as a person of unsound mind?
to the	bride closer than second cousin :	3. Are you afflicted with a transmissible disease?
now under th	e influence of intoxicating inquor: e influence of a narcotic drug? No Yes	4. Are you related to the groom closer than second cousin?
Are you able to suppo	rt a family?	5. Are you now under the influence of intoxicating liquor?
Tillede to so i	ontinue? No Yes	Now Yes
THE PERSON PERSONS AND PERSONS ASSESSED.	ns a. D. C.	7. Full name of father Harvey Phillips Hessil
(a) List their full nar	nes, ages and addresses Age Address	Residence of father (if deceased so state)
Name		Occupation of faction and fact
***************************************		Birthplace of father (State or foreign country)
***************************************	Yes No □	8. Full maiden name of mother News
(b) Are you supporti	ng or contributing to their support? Yes No L No L with any court order or orders issued for Yes No L	Residence of mother (if deceased so state)
(a) A so you complyii	g with any cours and	
their support?	Ol la land.	Annation of mathematics in the state of the
their support?	Close Daila lank.	Commelies of method Dank Weidy. Called the Address of the Called t
11. Full name of father	Ol la land.	Commettee of method Dank Weist. Called the Management of the Called the Calle
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11. Full name of father. Residence of father Occupation of fa' Birthplace of f' 12. Full maiden ' Residence o' Occupatio' Birthpla State of Ir County o	To Whom It May Concern: I, Chin Cook, do h	February 17, 1966 ereby give y conset to the
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11. Full name of father Residence of father Occupation of fa' Birthplace of f' 12. Full maiden ' Residence o' Occupatio' Birthpla State of Ir County o Subst CON: We, signs State Coun Subsc CON	To Whom It May Concern: I, Ching Cook, do h marriage of my son Jack R. Subscribed and sworn to be	February 17, 1966 ereby give y conset to the cook. FEB 171966 John Jambold Jr. CIERK HENDRICKS SUPERIOR COURT CHERK HENDRICKS SUPERIOR 177th day of
11. Full name of father. Residence of father Occupation of fa' Birthplace of f' 12. Full maiden ' Residence o' Occupatio' Birthpla State of Ir County o Subst CON: We, signs State Coun	To Whom It May Concern: I, Ching Cook, do h marriage of my son Jack R. Subscribed and sworn to be	February 17, 1966 ereby give y consect to the Cook. FEB 171966 John Jambold Jn. CREAK HENDRICKS COURT. CLINI Coll. Clini Coll. Gore me this 17th day of
11. Full name of father Residence of father Occupation of fa' Birthplace of f' 12. Full malden ' Residence o' Occupatio' Birthpla State of Ir County o Subsc CON: We, ' signs State Coun Subsc CON	To Whom It May Concern: I, Ching Cook, do h marriage of my son Jack R. Subscribed and sworn to be February 1966.	February 17, 1966 ereby give y consect to the Cook. FEB 171966 John Jambold Jn. CREAK HENDRICKS COURT. CLINI Coll. Clini Coll. Gore me this 17th day of
their support: 11. Full name of father. Residence of father. Occupation of father. Residence of f. 12. Full maiden residence of Occupation. Birthpla State of Ir. County of Ir. Subsc. CON: We, signs. CON: Subsc. CON. Subsc. CON. Subsc. CON. Subsc. CON. Subsc. CON. Subsc.	To Whom It May Concern: I, Ching Cook, do h marriage of my son Jack R. Subscribed and sworn to be February 1966.	February 17, 1966 ereby give y consect to the Cook. FEB 171966 John Jambold Jn. CREAK HENDRICKS COURT. CLINI Coll. Clini Coll. Gore me this 17th day of
their support: 11. Full name of father. Residence of father Occupation of fa' Birthplace of f' 12. Full maiden ' Residence o' Occupation Birthpla State of Ir County o Subst CON: We, signs State Coun of I Be i	To Whom It May Concern: I, Ching Cook, do h marriage of my son Jack R. Subscribed and sworn to be	February 17, 1966 ereby give ycons to the Cook. FEB 171966 John Jambold Jr. Clini Cook Clini Cook fore me this 17th day of Notary Public N. 1969.
their support: 11. Full name of father. Residence of father Occupation of fa', Birthplace of f. 12. Full maiden , Residence o', Occupation Birthpla State of Ir County o Subscience CON: We, signs CON: We, signs CON: Subscience CON: In	To Whom It May Concern: I, Ching Cook, do h marriage of my son Jack R. Subscribed and sworn to be February 1966.	February 17, 1966 ereby give ycons to the Cook. FEB 171966 John Jambold Jr. Clini Cook Clini Cook fore me this 17th day of Notary Public N. 1969.
their support: 11. Full name of father. Residence of father Occupation of fa' Birthplace of f' 12. Full malden ' Residence o' Occupation Birthpla State of Ir County o Subsc CON: We, signs State Coun of I Be i I, one Stat	To Whom It May Concern: I, Ching Cook, do h marriage of my son Jack R. Subscribed and sworn to be February 1966.	February 17, 1966 ereby give y consect to the Cook. FEB 171966 John Jambold Jn. CREAK HENDRICKS COURT. CLINI Coll. Clini Coll. Gore me this 17th day of
their support: 11. Full name of father. Residence of father Occupation of fa', Birthplace of f. 12. Full maiden , Residence o', Occupation Birthpla State of Ir County o Subsc CON: We, signs CON: We, signs CON: Subsc CON: And One Stat And,	To Whom It May Concern: I, Ching Cook, do h marriage of my son Jack R. Subscribed and sworn to be February 1966.	February 17, 1966 ereby give y consect to the Cook. FEB 171966 John Jambold In. CREATING COURT. SUPPLIOR COURT. SUPPLIOR COURT. And A Tallatte Notary Fublic A. 91969. 19.6.6. Signed Farra A. Rahara Minister. 19.6.6. Signed Farra A. Minister.
In Full name of father. Residence of father Occupation of fa' Birthplace of f: 12. Full maiden ' Residence o' Occupation Birthpla State of Ir County o Substantian State Coun Substantian Substantian State Coun Substantian Substantian State Coun Substantian Substantian State Coun Substantian	To Whom It May Concern: I, Ching Cook, do h marriage of my son Jack R. Subscribed and sworn to be February 1966.	February 17, 1966 ereby give y consect to the Cook. FEB 171966 John Jambold In. CREATING COURT. SUPPLIOR COURT. SUPPLIOR COURT. And A Tallatte Notary Fublic A. 91969. 19.6.6. Signed Farra A. Rahara Minister. 19.6.6. Signed Farra A. Minister.
their support: 11. Full name of father. Residence of father. Occupation of father. Birthplace of f. 12. Full maiden . Residence o'. Occupation. Birthpla. State of Ir. County o. Subsc. CON. We,	To Whom It May Concern: I, Ching Cook, do h marriage of my son Jack R. Subscribed and sworn to be February 1966.	February 17, 1966 ereby give for conset to the Cook. FEB 171966 Solm fambold In. CLIENT HENDROG COURT. Clin Coll. Clin Coll. Glora J. J. J. L. Notary Public Official Designation. Chief Signed. Official Designation. Chief J. J. L. Official Designation. Chief J. J. L. Official Designation. Chief J. J. L. J. J. J. J. L. J. L. J. L. J. J. L. J.

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

4	
Book	28.
2 Tebru	an 1966
	Book R Tebro Date of Applicat

.....Circuit Court

MALE Medical Examination Report Dated 1 Je Laway 1966	FEMALE Medical Examination Report Dated February 1966
Name of Physician Thomas P. Chase, MD	Name of Physician Thomas P. Chase MD.
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False station or pretent 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 Welsh	Name Barbara Stadle 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
13, Bx 189, Danville, Hembricks, Ind.	Maiden Name if Different Danville Hewlinks Ind.
Previous Marital Status: Never Married Mumber 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
Usual Occupation Machinist	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Stemo Clark: PSC1
Other (Specify) 1. Are you now thave you been adjudged, diagnosed or considered as:	Date of birth verified by: Birth Cert. Judicial Decree
An Imbecile? Of Unsound Mind? No Yes Yes	(Specify) brives his ente.
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 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? No Yes Yes 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 No	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	5. Are you now under the influence of intoxicating liquor? No Yes 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
Name Age Address	Residence of father (if deceased so state) Danville, lud.
	Occupation of father & Aller Race of father waste
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother les E. Maircoal
(c) Are you complying with any court order or orders issued for Yes No	Residence of mother (if deceased so state)
11. Full name of father Webb	Occupation of mother Race of mother Race of mother
Occupation of father D.Xi. Kace of father White	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country)	State of Indiana, HENDRICKS I depose and state the information given in this application is true and correct.
12. Full maiden name of mother 1 elen Christine Brown	County of henoricas in this application is true and correct.
Residence of mother (if deceased so state)	Signed Warland Jear
Occupation of mother Seau Transcription Race of mother White	New Address
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me shis 19 day of day of 19 day
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Clerk Circuit Court
Signed James K Work	CONSTRUCTION OF PARTIES AND ADDRESS OF THE PARTI
New Address San California	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me that day of the day o	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	signs, state facts which relider the consent of the other parent unnecessary
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	E Paulinia de la Companya del Companya del Companya de la Companya
signs, state facts which render the consent of the other parent unnecessary	
	State of Tailing
State of Indiana,	State of Indiana, County of
County of HENDRICKS ss:	SignedFather
SignedFather	Signed
Signed	Subscribed and sworn to before me thisday of, 19
Clerk	Clark
COMPLETE IF MAPPIACE LICENSE ISSUED BY ORDER OF COURSE	Of a
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	r. A marriage license having been refused to the above named parties, the art by written order issued
inauthorizes and directs the issuance of	and filed a marriage license to the above named parties
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE
The Di Kemembered, there was filed in my office a marriage licens	se issued by the clerk of the the sure of the Congret Court
of Indiana dated the 23nd day of February	, 19 6, authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my of	ice, to-wit:
1, Rew. Thomas E. Berry h	ereby certify that on the 27th day of February,
one thousand nine hundred and 66 State of Indiana, Groom James R. Webb	t ayan , County of Hendricks
Bank of A	County, State of State
were by me united in marriage as authorized by a marriage license issued for the	hat purpose by the Clerk of the Circuit Court of
Dated this 27th day of February, 19 66	n
J., 19. 6	Signed Rev. Thomas E, Berry
	Official Designation Minister
Filed and recorded in accordance with the laws of the State of Indiana this	any of march , 19 66

... Circuit Court

Chap. 126, Ind. Acts 1905 APPLICATION FOR	MARRIAGE LICENSE
HENDRI	Chs File () X
MALE Medical Examination Report Dated 5 7 6 6	County 19 FA-1- 10
Name of Physician Eddie & Lebry and 1966	FEMALE Date of Application
TOTIE ALE	Medical Examination Report Dated 15 February 18 1
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 First Middle	Name of Physician Foo; & R. April Mo
MALE APPLICANT	tatement—Whoever procures the issuance of a license to marry
Lowin	FEMALE APPLYCANTAL FEMALE APPLYCANTAL FOR THE PROPERTY OF THE
Date of Birth Month Nay Year	Name FEMALE APPLICANT
Place of Birth (State or foreign country)	Date of Birth Month Day Williams
Residence Address Street or B. City County State	Place of Birth (State or foreign country)
Jalem Washinta lud.	Residence Address Street of R. R. City Country
of Frevious Marriages	Maiden Name if Different a Dr., Platintella Head State
Annulment [Previous Marital Status, No.
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages Last Marriage Ended By: Death Cl. Diversity Diversity Death Cl. Diversity Dea
Usual Occupation atudat: Ind State. Usual	Divorce Annulment
Date of birth verified by: Birth Cert. Judicial Decree Other (Specify)	Color or Race White Negro Other (specify)
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?	Usual Occupation Audant: Ind State Unit.
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes No 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 sylum or	1. Are you now or have you been edited at 1
If answer to 3 is "yes" has the cause of such condition been removed?	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes
4. Are you afflicted with a transmissible disease? No W Yes	Of Unsound Mind?
6. Are you now under the influence of intoxicating liquor? No. Yes.	2. Are you under guardianship as a person of unsound mind? No 2 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 and a
10. Do you have minor children from one or more former markets.	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? No Yes
Name Age Address	7. Full name of father. Delbat Lee Williams
	Residence of father (if deceased so state)
	Birthplace of father (State or foreign country) Was law 6., Ind
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother. Martha Ellen Lewis
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state) Residence of mother (if deceased so state)
11. Full name of father Van ten tyca	Occupation of mothe Sex . William Broker of mother white
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country). Was him for the	State of Indiana,
12. Full maiden name of mother Oval Ruth Bostock.	County of HENDRICKS 885: in this application is true and correct.
Residence of mother (if deceased so state) Saleu lud;	Signed Kachlier Williams
Occupation of mother	New Address.
State of Indiana.	Subscribed and sworn to before me this day of HENDRICKS
State of Indiana, County of HENDRICKS as: I depose and state the information given in this application is true and correct.	Circuit Court
Signed Stern 2-Lucas	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
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 ss:
State of Indiana.	County of Father
County of HENDRICKS	Signed
Signed Father Mother	Signed
Signed	Subscribed and sworn to before me this
Clerk	
DV OPDER OF COURT	T. A marriage license having been refused to the above named parties, the and filed urt by written order issued
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COOR	urt by written order issued
inauthorizes and directs the issuance of	f a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE Court
Be it further remembered, the following marriage certificate was filed in my of	fice, to wit: 26 day of tebruary
1, June N. Spinas	Thenles Indiana
one thousand nine hundred and	Washington County, State of An Auna
61 - 62 411	Wendricks County, State of Sendricks
and Prize Antilean Williams	by the Clerk of the Circuit Court of
were by me united in marriage as authorized by a marriage ucense county.	0 00 : 16 06
County. Dated this 23 day of February, 1966	Signed Minister 10
	Official Designation 1967

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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

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No			Sales on	100
File_	Boo	K	2	8
_\	9 Tel	4	ra	196k
	Date of An	nlica	tich	

MALE Medical Examination Report Dated 14 Tebrua 1966	FEMALE Medical Examination Report Dated 19 Felica 1966
Name of Physician Alvin D. Schaafuld	Name of Physician Alvin D. Schaaf 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 Hareld A. Emment	Name First Middle Last Hines
Place of Birth (State or foreign country) North Day Year 194	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
BX44 Samestown, Boone, Ind.	Maiden Name if Different, Lizton, Hendricks Ind
Previous Marital Status: Never Married W 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
Usual Occupation Technology - Alexander	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Student Ball State U.
Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No 1/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 Yes 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? 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? 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 No	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? (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 Donald Andrew Him
Name Age Address	Occupation of father Taxxxx Mechanisms Race of father White
	Birthplace of father (State or foreign country). Spone Co.,
(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
their support? 11. Full name of father.	Occupation of mother (if deceased so state)
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Machine Stew + Race of father white Birthplace of father (State or foreign country) Source S. L.J.	State of Indiana,
12. Full maiden name of mother. Clara Rose, Ha Hand.	County of HENDRICKS ss: In this application is true and correct.
Occupation of mother (if deceased so state)	Signed Mayoue C. Vines
Birthplace of mother (State or foreign country)	Subscribed and sworn to before months 1.19th day of February 1988
State of Indiana, County of HENDRICKS State of Indiana, I depose and state the information given in this application is true and correct.	HENDRICKS Circuit Court
Signed Alexaed 9, Emput	
Subscriber and sworn to pefore me this day of 19 day	CONSENT OF PARENTS, PARENT OR GUARDIAN 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	
signs, state facts which render the consent of the other parent unnecessary	
	State of Indiana
State of Indiana,	State of Indiana, County of HENDRICKS Ss:
County of HENDRICKS Signed	Signed Father
Signed	SignedMother
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	Clerk
CountyCou	art by written order issued
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 Circuit Court
of Indiana dated the	, 19 authorizing the joining together as husband and wife
Cash, & District was filed in my of	
one thousand nine hundred and be a	
State of Indiana, Groom Larged a. Emmert	f Barre County, State of Indiana
and, Bride Mayoue C. Hines of were by me united in marriage as authorized by a marriage lieuwing.	ACRAMILENS)
were by me united in marriage as authorized by a marriage license issued for to County. Dated this day of March	nat purpose by the Clerk of the Circuit Court of Kenskicks
day of, 19 66	Signed Jack E. Van ausdall
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Misister
	Signed Day Jam Land CV.
	Derdricks Circuit Court

Indiana State Board of Health under Authority APPLICATION	INDIAN
Health under Authority Chap. 126, Ind. Acts 1905 APPLICATION FOR M	MADDIA CO
- OIL IV	TARRIAGE LICENSE
HENDRIC	KS FILE TOOK ZO
MALE	County 21 Fe Swan 196h
Medical Examination Report Dated 15 Te bruan 19hb	FEMALE Date of Application
Name of Physician Lond Term M	Medical Examination
ALL AUESTIANS MILET DE L'NOWEREN	Name of Dr
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False stated in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name First Middle	Lleyd 18th MD.
MALE APPLICANT	ement—Whoever procures the issuance of a license to many
Name First Middle	
Date of Birthy Month Day Willows 61	Name AA First
May Year Year	Date of Birth Cont
Place of Birth (butte or foreign country)	Day Year
Residence Address Street or R. R. City Court	Place of Birth (State or foreign country),
74 N. Harah In Sangales Me State	Residence Address (C)
Previous Marital Status: Never Married M Number of Previous Marriages	City County State
Lat Manglage Ended By: Death C. D.	Maiden Name if Different Danville, Howard Ky Ind.
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	The state of the s
34-15 No. 2 1-10	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Negro C Other C ()
	Regro Other (specify)
Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation So B.
An Imbeelle? Of Unsound Mind? No D Yes	Date of birth verified by: Birth Cer Undicial 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 sylum 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? No Yes	An Imbecile?
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 P Yes 6. Are you now under the influence of intoxicating liquor? No P Yes 1	2. Are you under guardianship as a person of unsound mind? No Yes
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? Yes No	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? No Yes	5. Are you now under the influence of intoxicating liquor? No W Yes
(If yes, answer questions a, b, c)	6. Are you now under the influence of a narcotic drug?
(a) List their full names, ages and addresses	7. Full name of father Dassie Dingleton
Name Age Address	Residence of father (if deceased so state)
	Occupation of father KR . Ke thee 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. Many Kathleen Butler
(c) Are you complying with any court order or orders issued for	Residence of mother (if deceased so state)
their support?	Occupation of mother ouseaux Race of mother white
11. Full name of father	Made Ha Katak
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father abover. Kastroad, Race of father While	State of Indiana, I depose and state the information given
Birthplace of father (State or foreign country)	County of HENDRICKS ss: in this application is true and correct.
12. Full maiden name of mother Wilma Ivene Manyel	man of Sighton
Residence of mother (If deceased so state) Indianapolis, indi	Signed Signed State of the Stat
Occupation of mother Housewith Race of mother Walle	New Address.
Birthplace of mother (State or foreign country) () () () () ()	Subscribed and sworn to before me this day of day of 1900
State of Indiana, I depose and state the information given	HENDRICKS Circuit Court
County of HENDRICKS application is true and correct.	
Signed Sheredan Lee Willoughuy	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 115 N. Tenn St. Danville In	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and evern to before methin A1 at day of February 19.60	signs, state facts which render the consent of the other parent unnecessary
Gerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent
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	
Pacuts divorced, Mother	
has leval custody:	State of Indiana, HENDRICKS
9	County of
State of Indiana. County of HENDRICKS	SignedMother
Father	Signed
Signed Welvas June Boggess Mather	Subscribed and sworn to before me this
Subscribed and sworn to before me this 215 day of tear 19 0.	Clerk
Y () (II) Clark	the service the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	RT. A marriage license having been refused to the above named parties, and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF	ourt by written order issued
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	of a marriage license to the above named parties.
in authorizes and directs the	TO THE CERTIFICATE
RETURN OF MARRIAGE LICENS	nse issaed of authorizing the joining together as husband and wife
100 01	
of Indian dated the	and house
Be it further remembered, the following marriage certificate was fied in my	hereby certify that on the 5th day of March, hereby certify that on the 5th country of Sindiana, at Marian County, State of Indiana,
1 Paul Se houses	Dazuelle , County of Andrew
i, Line in the second s	at Marian County, State of Indiana,
State of Indiana, Groom Allerany of the state of Indiana, Groom of Indiana,	by the Clerk of the Circuit Court of Deadelland
and, Bride Mary Sur Singletan of were by me united in marriage as authorized by a marriage license issued for County.	that purpose of the
were by me united in marriage as authorized by a marriage act	6. Signed Paul Schmans
County. Max el, 19.61	Signed

....Clerk

.Circuit Court

.day of

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

Dated this