142

... Circuit Court

HENDRICKS ...

Form Prescribed By	NATION FOR M.	ARRIAGE LICENSE	File
Indiana State Board of Health under Authority Chap. 126, Ind. Acts 1905	HENDRICKS		April 28 1976 Date of Application
/ /	2/4	FEMALE Medical Examination Report	Dated 4/26/76
MALE Medical Examination Report Dated Male	ml	Name of Physician	ic D. Clark Me.
Name of Physician	1995 prescribes "False stater	nent-Whoever procures the issuance of a	license to marry by any false statement, representa-
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts tion or pretense shall be fined in any sum not exceeding five hundred	dollars (\$500.00)".	FEMA	LE APPLICANT
MALE APPLICANT	1 & Last	Name A First	Line and anderson
Name William Middle	Year -	Date of Birth // Month	Day Year
Date of Birth Month Day 24	1956	Place of Birth (State or foreign country	h : 00
Place of Birth (State or foreign country)	Anty State	Residence Address Street or R.	R. City County State
Residence Address Street or R. R. City Co.	state State	Maiden Name if Different	138-6 Modesky In.
Previous Marital Status: Never Married Number of Previous Ma	rriages		
Last Marriage Ended By: Death Divorce Annulment		Previous Marital Status: Never Marrie	
Color or Race White ▶ Negro □ Other □ (specify)		Last Marriage Ended By: Death	h Divorce Annulment
D. A.		Color or Race White Negro	Other (specify)
Usual Occupation Date of birth verified by: Birth Cert. Judicial Decree	123056117	Usual Occupation Pull	realir
Other (Specify)	12 50 50 77	Date of birth verified by : Birth Cer	rt. Judicial Decree
1. Are you now or have you been adjudged, diagnosed or considered as An Imbecile? Of Unsound Mind?	No Yes	Other (Specify)	3 3 1
2. 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 adjust An Imbecile? 	No Z Yes
3. Are you now or have you been within the company home for indigent persons? If answer to 3 is "yes" has the cause of such condition been remove		Of Unsound Mind?	No D Yes □
4. Are you afflicted with a transmissible disease?	No D Yes D	2. Are you under guardianship as a po	
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 transmissil	
7. Are you now under the influence of a narcotic drug? 8. Are you able to support a family?	Yes No	 Are you related to the groom close Are you now under the influence or 	
9. Are you likely to so continue?	Yes No No No Yes	6. Are you now under the influence of	
10. Do you have minor children from one or more former marriages? (If yes, answer questions a, b, c)	NO TO D	7. Full name of father Sam	ul Wesley anderson
(a) List their full names, ages and addresses Name Age Age	idress	Residence of father (if deceased so	sure) JULI Walley Jan
	***************************************	Occupation of father	Race of father Willy
	***************************************	Birthplace of father (State or for	Dign country) Scholar Michigan Soll
(b) Are you supporting or contributing to their support?	Yes No No	8. Full maiden name of mother	1 marketille de
(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 Allthan ly	All to	Occupation of mother	Race of mother of factor
Residence of father (if deceased so state)	f father White	Birthplace of mother (State or for	eign country)
Birthplace of father (State or foreign country)	Later Market	State of Indiana.	ss: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Assist Cliff	lad	County of HENDRICKS	of Landonna
Residence of mother (if deceased so state)	lilased	Signed	acy digne condition
Occupation of mother Race of	mother	New Address K. o	28 /33 (10-1) 21
Birthplace of mother (State or foreign country)	and heart the the state of the	Subscribed and sworn to before me the	
act I depose and sta	te the information given ion is true and correct.	John John James Ja	Clerk HENDRICKS Circuit Court
Signed July Signed	Willy	CONSENT OF PARENTS, PARENT	OR GUARDIAN
New Address	Bull .26		reby give consent for this marriage. If only one parent
Subscribed and sworn to before me this day of ClerkHENDRICK	Circuit Court		onsent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN		***************************************	
We, the parents, of this applicant hereby give consent for this mar		***************************************	**************************************
signs, state facts which render the consent of the other parent unr	ecessary	***************************************	**************************************
		State of Indiana,	
State of Indiana,		County of HENDRICKS	BB:
County of HENDRICKS		Signed	Father
Signed		Signed	Mothet
Subscribed and sworn to before me thisday ofday	, 19	Subscribed and sworn to before me th	
	Clerk	***************************************	Cler
COMPLETE IF MARRIAGE LICENSE ISSUED B	Y ORDER OF COUR	T. A marriage license having be	een refused to the above named parties, the
HENDRICKS County		ourt by written order issued	and file
inauthorizes a			
Be It Remembered, there was filed in m	MARRIAGE LICENS	E AND MARRIAGE CERTIFIC	ATE HENDRICKS Circuit Cour
of Indiana dated the day of day of	77701	19 76 authorizi	ing the joining together as husband and wif
Po it fourth on your all it		and THECK THE	21 11 21 1122
Be it further remembered, the following marriage cert I, Olin D. Kern one thousand nine hundred and 76 State of Indiana, Groom William D. Wile and, Bride Tracy Lynne Anderson were by me united in marriage as authorized by a mar	incate was filed in my	office, to-wit:	Max
one thousand nine hundred and 76		at Plainfield	day of Hendricks
State of Indiana, Groom. William D. Wile	S	of Hendricks	County, State of Indiana
were by me united in manifest	of	Hendricks	County, State of Indiana
			Circuit Court of HENDRICKS
Dated this 29th day of May	7, 197	10	
		Signed	Minister
Filed and recorded in accordance with the laws of the	State of Indiana this	Official Designation	Tuna 76
	,	Signed Hen m	Jarvey Cles
			Circuit Cour

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

County

FEMALE

Medical Examination Report Dated

Name of Physician 16 0 0 444 55 143

MALE Projection Report Dated 4-19-74	FEMALE Date of Application
Medical Examination Report Dated 4-19-76	Medical Examination Report Dated Opril 30, 97%
Name of Physician Dlack	Name of Maria I Constitution of the last o
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False to	Traine of Thysician A ceres 711 Hodley
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	ement—Whoever procures the issuance of a license to marry by any false statement represents
First Middle	FEMALE APPLICANT
Name James Keth La Hast	Name First Middle
Date of Birth Month Day Year	Date of Birth Month Day Willen
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) 13 Year 1954
Residence Address Street or R. R. City County State	400 (1)
6/22 Lakewew Mr. 485 Indplo Marion and	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Boy 44 H. Wanvelle
Last Marriage Ended By: Death Divorce Annulment	Provious Montal State
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
Usual Occupation Jactory	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation (specify)
Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as:	Traine alow
An Imbecile? Of Unsound Mind? No P Yes No P Yes	Date of birth verified by: Birth Cert. □ Judicial Decree □ Other (Specify) □ 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 asylum or home for indigent persons?	An Imbecile? No F 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 Ves	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 Are you now under the influence of a parentic drug?	3. Are you afflicted with a transmissible disease?
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?
9. Are you likely to so continue?	5. Are you now under the influence of intoxicating liquor? No Yes
10. Do you have minor children from one or more former marriages? No Yes (If yes, answer questions a, b, c)	6. Are you now under the influence of a narcotic drug? No Yes
(a) List their full names, ages and addresses	7. Full name of father (if deceased so state) Jame
Name Age Address	66 + 1 4 11 1
	Occupation of father Attended Sugard Race of father
	8. Full maiden name of mother Dell anne Riley
(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). (alifornica)
11. Full name of father Mysse Robert Da Mange	Occupation of mother Thouseunfe Race of mother
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country). The issouri
Occupation of father Muck Musey Race of father W	State of Indiana, I depose and state the information given
Birthplace of father (State or foreign country)	HENDRICKS in this application is true and correct.
12. Full maiden name of mother AND TANGENS	Signed Chonde Arne Allen
Residence of mother (if deceased so state)	
Occupation of mother All Solve fl Race of mother A	New Address.
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me thisday of
County of HENDRICKS I depose and state the information given in this application is true and correct.	Clerk HENDRICKS Circuit Court
Signed X Miles X. La France	DADDING OF CHARDIAN
New Address 6122 hake view Dr. #85	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this 29 day of april 1976	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Sleve M Lawey 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, ss:
	County of HENDRICKS
State of Indiana,	Signed
County of	SignedMother
Signed Father Signed Mother	Subscribed and sworn to before me this
Subscribed and sworn to before me this	Subscribed and sworn to before me discussions and sworn to before me discussions
Clerk	
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 County County	and filed
nauthorizes and directs the issuance o	of a marriage license to the above named parties.
authorizes and directs the issuance	
DETURN OF MARRIAGE LICENS	HENDRICKS CITCUIT COURT
I marana dated the day of	nd I honda uni alle
ames It out he had the series	fice to-wit:
	hereou ceruly of the services
one thousand nine handred and 7/2	at leven a County, State of Indeana
State of Indiana, Groom James Heith La Grange	at liven U. Methodest Cheer County of Indiana, of Serrif County, State of Indiana, that purpose by the Clerk of the Circuit Court of HENDRICKS
ore by me united in marriage as authorized by a marriage license issued for County.	MINIMULATION of the Circuit Court of HENDRICKS
vere by me united in marriage as a subbarized by a marriage license issued for	that purpose by the Clerk of the
County,	Signed John J. Modesett Signed Menester
Dated this 29 day of May, 1974	Official Designation menester June 1976
The state of the s	Official Designation June, 19 76
Filed and recorded in accordance with the laws of the State of Indiana this	7 day of Sarvey Clerk
recorded in accordance with the laws of the Blads	Signed Men Michael Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

File Abril 30 197

Health under Authority Chap. 126, Ind. Acts 1905 HENDRICK	County (Lord 30, 1976) Date of Application
Control of the Contro	FEMALE 4/12/71
MALE Medical Examination Report Dated The state of the s	Medical Examination Report Dated Name of Physician Make F. More Md.
Name of Physician John F. Mary	tement—Whoever 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)".	FEMALE APPLICANT
MALE APPLICANT	Name /First / Middle / Lost
Name First Middle Respondence	Allra Jay Terrell
Date of Birth Month Day Year 956	Troubille 1959
Place of Birth (State or foreign gountry)	Place of Birth (State or foreign country)
Residence, Address Street or, R. K. City, County State	Residence Address Street or R. R. City County State
603 S. Truen Driving	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 Machine Operator - 7 rupe	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Sales
Other (Specify)	Date of birth verified by: Birth Cert. Judicial Decree
1. Are you now or have you been adjudged, diagnosed of constant No Yes \Boxed Yes \Boxed No Yes \Boxed Yes \Bo	Other (Specify) CAN MASSALLY STORY
2. Are you under guardianship as a person of unsound mind? Not Yes \(\)	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No ☑ Yes □
home for indigent persons?	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
5. Are you related to the bride closer than second cousin? No Ves No Ves Yes	3. Are you afflicted with a transmissible disease? No Yes
7. Are you now under the influence of a narcotic drug? No Ves	4. Are you related to the groom closer than second cousin? No Ves
8. Are you able to support a family? 9. Are you likely to so continue? Yes No Yes 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 flyug? No Ves
(a) List their full names, ages and addresses	7. Full name of father
Name Age Address	Occupation of father Add Land Ball Race of father
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother Etalle Laurie Bassila
(b) Are you supporting or contributing to their support? Yes No	Residence of mother (if deceased, so state) Ballung July
their support? Church T. Relmald	Occupation of mother Sales Race of mother White
11. Full name of father	Birthplace of mother (State or foreign country)
Occupation of father Augh Bill Race of father White	
Birthplace of father (State or foreign country). Waldana	State of Indiana, County of
12. Full maiden name of mother Attitude & Walcoff	Dales Last Top M
Residence of mother (if deceased so state)	Signed 1 1 June 14 Sportunds
Occupation of mother Race of mother	New Address
State of Indiana, I depose and state the information given	Subscribed and sworn to before me this day of day of 19
County of HENDRICKS ss: in this application is true and correct.	Clerk HENDRICKS Circuit Cour
Signed Tearing Continued and Signed	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 324 The figurest Speed of the State of the St	We, the parents, of this applicant hereby give consent for this marriage. If only one paren
Subscribed and sworn to before me this day of MANUTERIORIES Circuit Court	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 differences
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 ofHENDRICKS
County of HENDRICKS ss:	
Signed. Father	Signed
Signed Mother	Signed
Subscribed and sworn to before me this	Subscribed and sworn to before me thisday of
Clerk	Cler
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	RT. A marriage license having been refused to the above named parties, the
County Wellin Co	ourt by written order issued 3 April 119116 4 and filed
authorizes and directs the issuance of	of a marriage license to the above named parties.
RETURN OF MARRIAGE LICENS	E AND MARRIAGE CERTIFICATE
there was filed in my office a marriage licer	nse issued by the clerk of the HENDRICKS Circuit Cour
Jerus C Pour	, 19.76, authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was fled in more	and Nelva Tay Jurill
as a magain with white with the Comment of the comm	
State of Indiana, Groom Least C. 8	at 240 Bertola Ct., County of Marion of Hendricks County, State of India
	that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this 30th day of April , 19.7.	purpose by the Clerk of the Circuit Court of
any of April 197	Signed David Q. Enspart
Filed and magnets?	Official Designation Minister
Filed and recorded in accordance with the laws of the State of Indiana this	5 day of Mall 1976

................HENDRICKS...

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

MALE Medical Examination Report Dated 4-28-76	FEMALE Date of Application
Name of Physician M. O. Scamapone M. S.	Medical Examination Report Dated 4-28-76
	3220
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	atement—Whoever procures the issuance of the instance of the i
Name Rivald (100 1000) Last	Name First FEMALE APPLICANT
Date of Birth Month Day Year Year	Date of Birth Man Synny Challe
Place of Birth (State or foreign country)	Day Year Year
Residence Address Street or R. R. City County State	State of Birth (State or foreign country)
Kt. 2 Don 85, Wanvelle In.	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different unusous, wanville, In.
Last Marriage Ended By: Death Divorce Annulment	Previous Marital States No.
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)
Other (Specify)	Usual Occupation
1. Are you now or have you been adjudged, diagnosed or considered as:	Date of birth verified by: Birth Cert. Judicial Decree
Of Unsound Mind? No Ves 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 been removed? No Yes	An Imbecile? No Yes
4. Are you afflicted with a transmissible disease? No Yes	Of Unsound Mind? No Yes Yes
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 Ye
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? 9. Are you likely to so continue? Yes ☑ No ☐	5. Are you now under the influence of intoxicating liquor? No Yes
10. Do you have minor children from one or more former marriages? No Yes (If yes, answer questions a, b, c)	6. Are you now under the influence of a narcotic drug? No P Yes
(if yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father Talle additional Charles A
Name Age Address	Residence of father (if deceased so state). Residence of father (if deceased so state).
	Occupation of father Rece of father Life
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes □ No □	8. Full maiden name of mother farset Alarge Cupica
(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 state). A Millel, Sn.
11. Full name of father South Juliania	Occupation of mother and Mulaco Dice of mother wh
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Race of father Wh	State of Indiana, I denote and state the information given
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Alders	Signe Ramora Lynn Chalant
Residence of mother (if deceased so state)	New Address 2 2 Box 200 C Clove la Oc O D
Occupation of mother (State or foreign country)	1 701 . 11/
State of Indiana	Subscribed and sworn to before me this day of 19.20
County of HENDRICKS Ss: I depose and state the information given in this application is true and correct.	LI len 811. Assuring Clerk HENDRICKS Circuit Court
Signed Some Waysa Culture	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address RR 2 BOX 200 = CLOUZRDALE	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 19/6.	signs, state facts which render the consent of the other parent unnecessary
Sless . Gierk HENDRICKS . Circuit Court	signs, state facts which fender the constant
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:
State of Indiana,	County of HENDRICKS Father
County ofHENDRICKS	Signed
Signed Father	Signed
Signed Mother Subscribed and 19 19	Subscribed and sworn to before me this
Subscribed and sworn to before me thisday of	Clerk
	ligance having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license naving been related and filed and filed
HENDRICKS County	for marriage license to the above named parties.
authorizes and directs the issuance of	
RETURN OF MARRIAGE LICENS	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court nse issued by the clerk of the hendricks circuit court nse issued by the clerk of the joining together as husband and wife 19.74, authorizing the joining together as husband and wife
The Tit 20 marriage were at the marriage were	all the state of t
Indiana dated the day of // all	Lo mons, Synn Child factor
Be it from ald a free Cutton the was filed in my o	ffice, to-wit:
1, Laymond Rispler	at 100 County, State of Space no
one thousand nine handred and Soughty Sign	at County, State of Malana
State of Indiana Grown Romald Wayne Cubank	of County, State of Indiana,
and, Bride Pamera Lynn Chalfant of	that murpose by the Clerk of the Circuit Court of HENDRICKS
County. Dated this Sthomas day of May 1976	Signed C Kaymond Kussler
day of	a m !- I Decorated Title
Pro-	day of
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Slen m Harry Clerk Signed Slen MENDRICKS Circuit Court
	HENDRICKS

...HENDRICKS...

330

Form Prescribed By Indiana State Board of Health under Authority

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No. 146

File 5-5-76

37

Date of Application

Circuit Court

HENDRICKS

Health under Authority Chap. 126, Ind. Acts 1905 HENDRICK	County #37 Date of Application
	FEMALE 5
MALE 5-3-76	Medical Examination Report Dated 3-3-76
Medical Examination Report Dated 5-5-16 Name of Physician Shomas Walker	Name of Physician <u>Thomas walker</u>
Name of Physician Shamas Wante	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 see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False see ALL QUESTIONS MUST BE ANSWERED	tement—Whoever procures the issuance of a license to marry by any false statement, representa-
MALE APPLICANT	Name First Middle Last
Name First Middle Last Cleryth	Date of Birth Month Day Year
Date of Birth Month Day Year 1952	Jonesary 28 1960
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
Od 1 Marth Salem Spinish	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)	
Usual Occupation Farmer	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Steedent
☐ Other (Specify)	Date of birth verified by: Birth Cert. Undicial Decree
An Imbecile? No Yes Yes	Other (Specify) Montgomered to Union to Haspital 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 asylum or No Yes	An Imbecile?
Are you now or have you been with the 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. 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 ramity? 9. Are you likely to so continue? 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
10. Do you have minor children from one or more former marriages? No Yes (If yes, answer questions a, b, c)	7 Full name of father Gallett allern Shelps
(a) List their full names, ages and addresses	Residence of father (if deceased so state) James Lawn, Ind.
Name Age Autress	Occupation of father Barber Race of father 2
	Birthplace of father (State or foreign country)
V-D N-D	8. Full maiden name of mother Mansey Warlene Wenkam
(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) Saashdale, Sud!
their support? 11. Full name of father Harry Glenn Wighth	Occupation of mother Males elseft Race of mother The
Residence of father (if deceased so state) R.#/ North Jalem, In.	Birthplace of mother (State or foreign country)
Occupation of father. Sarmer Race of father. 21	State of Indiana, I depose and state the information given
Birthplace of father (State or foreign country)	County ofHENDRICKS
12. Full maiden name of mother boltmen of mother	Signed & Betty O. Pholos
Residence of mother (if deceased so state) A. M.	New Address & Pal Yorth Salem Iva
Birthplace of mother (State or foreign country). Indiana.	Subscribed and sworn to before me this 5 day of Marf 1976.
State of Indiana, I depose and state the information given	Subscribed and swork to better the this subscribed and swork to be the third subscribed and
County of HENDRICKS ss: in this application is true and correct.	Clerk Italianasas
New Address R. R. Molth Lalem and	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this. S. day of Malf., 1976.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
GerkHENDRICKS 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	mother has custodes.
signs, state facts which render the consent of the other parent unnecessary	
	State of Figure
State of Indiana,	State of Indiana, County ofHENDRICKS
County of HENDRICKS ss:	Signed Father
Signed Father	Solve and Carobaco Mother
Signed	Subscribed and sworn to before me this 5 day of May 19.7k
	Subscribed and sworn to before me this
	fish but the best of the best
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	RT. A marriage license having been refused to the above named parties, the
in Clerk's	Court by written order issued 3 day surainer t age requirement filed
inauthorizes and directs the issuance	
Be It Remembered, there was filed in my office a received	SE AND MARRIAGE CERTIFICATE ense issued by the clerk of the HENDRICKS Circuit Court
of Indiana dated the	ense issued by the clerk of the HENDRICKS Circuit Courts , 19.76, authorizing the joining together as husband and wife
Be it turther remember 1	and Bettie 1 authorizing the joining together as husbana and who
1, Sur Jaumand marriage certificate was filed in my	and Atty J Refers
and the state of t	hand with the state of the stat
State of Indiana, Groom Mark July th	at Auston, County of Amarilla
and, Bride Betty & Shelps	of Sinclacks County, State of Indiana
	or that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this	r that purpose by the Clerk of the Circuit Court ofHENDRICKS
Dated this 5 day of may , 19	56. Signed Per Jaumond L. Rader
	Signed Ass. Alymond of
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Fastar Lat Bastest Ch. Laston
	Signed Illen M Larvelf Clerk
	Market Walder Later Dollage

...Circuit Court

Indiana State Board of Indiana State Board of Health under Authority Chap. 126, Ind. Acts 1905 APPLICATION FOR MARRIAGE LICENSE		
Chap. 126, Ind. Acts 1905	MARRIAGE LICENSE	
HENDRIC	KS County File	
MALE		
Medical Examination Report Dated 7/26/76	FEMALE Date of Application	
Name of Physician Almas Walker Md.	Medical Examination Report Dated 5/3/76	
	Name of Physician Thomas Illall	
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 issuers of the instance of the ins	
MALE APPLICANT	license to marry by any false statement, representa-	
Name Ingris Middle Last	Name First APPLICANT	
Date of Birth Month Day Year	Colorethy S. Middle J. Last	
Place of Birth (State or foreign country) 1954	Date of Birth Month Day Year	
Buch Prove Maries 0	Place of Birth (State or foreign country) 20 1957	
Residence Address Street or R. R. City County State	Residence Address Street or R. R. City Musen	
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different County State	
	Talle II 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 Ry	
Usual Occupation Construction	Annument [
Date of birth verified by:	Color or Race White Negro Other (specify)	
Other (Specify) # C 4361	Usual Occupation Vilireniaries Classifant	
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes Yes	Date of birth verified by: Birth Cert. Uddicial Decree	
No Ves	Other (Specify) # 40/02	
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? 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 Ves	
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a narcotic drug? No Very	3. Are you afflicted with a transmissible disease?	
8. Are you able to support a family? Yes No Yes No No No Yes	4. Are you related to the groom closer than second cousin?	
9. Are you likely to so continue?	5. Are you now under the influence of intoxicating liquor?	
10. Do you have minor children from one or more former marriages? No Yes (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 All Miles Ray Frick	
Name Age Address	Residence of father (if deceased so state)	
	Occupation of father Alleman Race of father Alleman	
	Birthplace of father (State or foreign country)	
(b) Are you supporting or contributing to their support? Yes□ No□	8. Full maiden name of mother Sarral Westam	
(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 Manager Muchael Gulan	Buch hung	
B Additional Contraction of the	Q.	
Residence of father (if deceased so state) Occupation of father MM Nunt Sull Bace of father White	Birthplace of mother (State or foreign country)	
	State of Indiana, I denose and state the information given	
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 Sunua A will	signed CunthravSue Frick	
Residence of mother (if deceased so state)	802 By 44 0 - 100 11	
Occupation of mother MMMMM Race of mother	New Address F & S S S S S S S S S S S S S S S S S S	
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of 19	
State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.	Min M. Clerk HENDRICKS Circuit Court	
Theready M Cooks a Co		
002 B 1111 D-00100 1001	CONSENT OF PARENTS, PARENT OR GUARDIAN	
New Address 7 7 0 007 79 Nonvice Control	We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
Subscribed and sworn to before me this. 2 day of 19.	signs, state facts which render the consent of the other parent unnecessary	
Clerk HENDRICKS Circuit Court	Signey owner and a signey of the signey of t	
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 L.V.	County of HENDRICKS	
State of Indiana, County ofHENDRICKS	Signed Father	
	Signed	
SignedMother		
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me this	
Clerk	CHAIR CONTRACTOR OF THE CONTRA	
	Verse having been refused to the above named parties, the	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	r. A marriage license having been duy warmer and filed	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	irt by written order issued	
WARRIAGE LICENSE	AND MARKIAGE CERTIFICATION HENDRICKS Circuit Court	
Be It Remembered, there was filed in my office a marriage licens	se issued by the clerk of the	
Indiana dated the	1 - All I fill of MICR	
Thenas M. Jordan Ja an	rd	
Be it further remembered, the following marriage certificate was filed in my of	ereby certify that on the 8 the day of Malf	
1, James W. Gainting	County of Senatura	
State of Indiana Grown Thamas M Jardan, The County, State of State of		
and, Bride Genthia Seel Brick of Mindeller of the Circuit Court of HENDRICKS		
and for that purpose by the Ceert of		
County. Dated this 10 th day of May , 19 76. Signed James W. Gaenting Lineted Meth. Church		
Dated this 10 th day of May , 19 76	Signed Twinister United Meth. Church	
	Official Designation Mach 19.16.	
Filed and recorded in accordance with the laws of the State of Indiana this		
recorded in accordance with the laws of the State of Indiana	Signed Lien M. Circuit Court	

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

Chap. 126, Ind. Acts 1905	County Date of Application
	FEMALE
MALE Medical Examination Report Dated 5:3-76	Medical Examination Report Dated 3-3-76
E (L True -	Name of Physician C. J. Dugo
Name of Physician False stat	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 tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	FEMALE APPLICANT
MALE APPLICANT	Name First Middle Last
Name of First Middle Medysky	Date of Birth Month Day Year
Date of Birth Day Year)	February 6 1957
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
8#18 Box 124 M Julps, Nevauces	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 W Negro Other (specify)	Last marriage more by
Usual Occupation 4/ 5 air Jace	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Unemployed
Other (Specify) #/4684 1. Are you now or have you been adjudged, diagnosed or considered as: No Yes	Date of birth verified by: Firth Cert. Judicial Decree
An Impecial ? No D Yes D	Other (Specify) # 113-57-014/17
2. Are you now or have you been within five (5) years an inmate of a county assulum or	 Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes □
3. Are you now or have you been within five (5) years an inflate of No Yes home for indigent persons? 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?	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 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?	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 The Continue of father for the father for t
Name Age Address	Occupation of father (if deceased so state) Race of father D.
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother Many M. Worth
(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) Butwardung And
their support?	Occupation of mother Manager - Ra As Bace of mother To
11. Full name of father A A A A A A A A A A A A A A A A A A A	Birthplace of mother (State or foreign country)
Residence of father (if deseased so state) And Race of father	Birthplace of mother (State of foreign country)
Birthplace of father (State or foreign country)	State of Indiana, State of Indiana, I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Lancon of lan Atapada	County of HENDRICKS
Residence of mother (if deceased so state)	Signed Hould Dungan
Occupation of mother Assessed Race of mother	New Address 23 4 CONT COM - Wy COMMEY
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this. Asy of Many 19/2.
State of Indiana, County of HENDRICKS as: I depose and state the information given in this application is true and correct.	Die In Language Clerk HENDRICKS Circuit Court
Signed Steven madjahi	
New Address 234 EAST CAM-WYO CAMPEN DE	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this. Q day of May 1976	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Lien III Marrier ClerkHENDRICKS 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 ofHENDRICKS.
County of HENDRICKS	Signed
Signed	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 CORD	
HENDRICKS County County	RT. A marriage license having been refused to the above named parties, the
in Clerks office authorizes and directs the issuance	of a marriage liganos is all a land her state of the marriage liganos is all a land her state of the marriage liganos is all a land her state of the marriage liganos is all a land her state of the marriage liganos is all a land her state of the marriage liganos is all a land her state of the marriage liganos is all a land her state of the land her st
Be It Remembered, there was filed in my office a marriage lice	SE AND MARRIAGE CERTIFICATE conse issued by the clerk of the HENDRICKS Circuit Court
day of	17/
Be it further remembered the fill	and Parks and Parks and the sound together as husband and
1, Charles I del marriage certificate was filed in my	and Paula flam Minary office, to-wit:
one thousand nine hundred and 76	hereby certify that on the day of May
State of Indiana, Groom Atturn 9. 10 10 4 10 4	at Digital states, County of Hallacetter,
and, Bride Laula Jean Duncan	of County, State of County
were by me united in marriage as authorized by a marriage licensis	County, State of Sucharana
Dated this day of 27 Aug., 19.74	HENDRICKS
aay of	a Similal R. 11 1 70-00
	The state of the s
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Cottle Parks
	Signed Alex Maskelf Clerk
	HENDRICKS Circuit Court
	ALLAUKILKS

HENDRICKS.

APPLICATION FOR MARRIAGE LICENSE

FOR MARRIAGE LICENSE

HENDRICKS

County

Medical Fraction

No. 149

File 37

Date of Application

	may 6, 1976
MALE Medical Examination Report Dated May 5 1976	FEMALE Date of Application
W/ N I	Medical Examination Report Dated Mout 5 1971
Name of Physician	Name of m Up
ALL QUESTIONS MUST BE ANSWERED, Chapter 126, Indiana Acts 1905 presents.	atement—Whoever procures the issuance of a license to marry by any false statement, representa-
ion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	atement—Whoever procures the issuance of a license to many h
Name First Middle 01 Last ,	Name FEMALE APPLICANT
Date of Birth Mostly Day Year	Same First Middle Middle
anyearch 15 1020	Date of Birth Month Day Wan Horn
Place of Birth (State or foreign country)	- Ille August Town
Residence Address Street or R. R. City County State	Place of Birth (State or foreign country) 1936
Residence Address County State	Residence Address Street or R. R. City Saduna
Previous Marital Status: Never Married Number of Previous Marriages	State
Trevious marriages	Maiden Name it Different Indering poles, Ind.
ast Marriage Ended By : Death Divorce Annulment D	Previous Marital States V
William W. Name C. Ont. of J. Co.	Previous Marital Status: Never Married Number of Previous Marriages
olor or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Ispal Occupation III - Emplayed	Amument
has of birth verified by: Whirth Cert Dudicial Decree And II BD . III D	Color or Race White Negro Other (specify)
A Nearly	Usual Occupation 7/11
Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as:	whem played
An Imberile !	Date of birth verified by: Birth Cert. Judicial Decree Ind. St. Bd. of Heal
Of Unsound Mind : No D Yes	Other (Specify) 113 - 36 - 03 4 9 2 4
Are you now or have you been within five (5) years an inmate of a county are how	1. Are you now or have you been adjudged, diagnosed or considered as:
home for indigent persons.	An Imbecile? No Yes
If answer to J is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind?
4. Are you afflicted with a transmissible disease? No P Yes No P	2. Are you under quantities bit and
f. Are you now under the influence of intoxicating liquer? No Yes	2 Are not official with
Are you now under the influence of a narcotic drug? No Yes	3. Are you afflicted with a transmissible disease?
Are you able to support a family? Yes & No	4. Are you related to the groom closer than second cousin? No Yes
Are you likely to so continue? Yes No	5. Are you now under the influence of intoxicating liquor? No Yes
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
(a) List their full names, ages and addresses	7. Full name of father Glarge Letting
Name Age Address	Residence of father (if deceased so state) Indianapoles Ind
	Occupation of father Detered Race of father I
	0 0 1
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother and with an
(c) Are you complying with any court order or orders issued for	Residence of mother (if deceased so state) Indianageolist, Indianageolist, Indianageolist,
their support?	Il I man
. Full name of father would be seller and 3947 wartman	Occupation of mother Hill Sell Seft Race of mother T
Residence of father (If deceased so state) son elangues, sid.	Birthplace of mother (State or foreign country)
Occupation of father Felered Race of father F.	The same of the sa
Birthplace of father (State or focalgn country) - Indiana	State of Indiana, I depose and state the information given
(2.00 m.01	County of HENDRICKS in this application is true and correct.
3947 Fall maiden name of mother Abylla Malley	1 Show of The Many
Residence of mother (If degenered so state) Incleanapoles Hill	Signed As Add Add Add Add Add Add Add Add Add
Occupation of mother Attitle Race of mother	New Address K K 18 Day 152 Inchasagol
Birthplace of mother (State or foreign country) Indiana	Subscribed and sworn to before me this day of May 1976
ate of Indiana, I depose and state the information given	Illen M Harvell Clerk HENDRICKS Circuit Court
ounty of HENDRICKS as: in this papplication is true and correct.	Clerk Court Court
Signed & Deoige C. Stewart	
00 10 00 151 1 dela	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address N. 10 BOX 13 4 Jacques M.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
bscribed and sworn to before me this b day of May 1976	signs, state facts which render the consent of the other parent unnecessary
Olen M Harvey Clerk HENDRICKS Circuit Court	signs, state racts which remains a sign of the remains a sign of
ONSENT OF PARENTS, PARENT OR GUARDIAN	
t, the parents, of this applicant hereby give consent for this marriage. If only one parent	
ns, state facts which render the consent of the other parent unnecessary	
which render the consent of the other parent unnecessary	
	State of Indiana, ss:
	County of HENDRICKS
ste of Indiana.	Father
unty of HENDRICKS	Signed
Signed Father	Traban Comment of the
Mother	Signed Mother
Signed	Signed
Signed.	
Signed.	Signed
becribed and sworn to before me thisday of19	Signed
Signed	Signed
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	Signed
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	Signed
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County County	Signed
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT MARRIAGE LICENSE authorizes and directs the issuance of the court marriage authorizes and directs the issuance of the court marriage authorizes and directs the issuance of the court marriage authorizes and directs the issuance of the court marriage authorizes and directs the issuance of the court marriage authorizes and directs the issuance of the court marriage authorizes and directs the issuance of the court marriage authorizes and directs the issuance of the court marriage authorizes and directs the issuance of the court marriage authorizes and directs the issuance of the court marriage authorizes and directs the issuance of the court marriage authorizes and directs the issuance of the court marriage authorizes and directs the issuance of the court marriage authorizes and directs the issuance of the court marriage authorizes and directs the issuance of the court marriage authorizes and directs the issuance of the court marriage authorizes and directs the issuance of the court marriage authorizes are considered at the court marriage authorizes and directs the issuance of the court marriage authorizes are considered at the court marriage at the court marriag	Signed
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE	Signed
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE	Signed
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE Be It Remembered, there was filed in my office a marriage licent day of Marriage licent da	Signed Subscribed and sworn to before me this Clerk RT. A marriage license having been refused to the above named parties, the parties by written order issued and filed a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court for the street of the series issued by the clerk of the series issued by
DMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT CHENDRICKS County authorizes and directs the issuance of the second county of the second county authorizes and directs the issuance of the second county of the secon	Signed
DMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY HENDRICKS County authorizes and directs the issuance of the second of t	Signed
DMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY HENDRICKS County authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE Indiana dated the day of Marriage license and directs the issuance of the day of Marriage license and directs the day of Marriage license and dir	Signed Subscribed and sworn to before me this A marriage license having been refused to the above named parties, the pourt by written order issued and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE The se issued by the clerk of the 19.76, authorizing the joining together as husband and wife office, to-wit: 19.76, authorizing the joining together as husband and wife office, to-wit:
DMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Authorizes and directs the issuance of the state of the	Signed Subscribed and sworn to before me this Clerk RT. A marriage license having been refused to the above named parties, the parties but by written order issued and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court are issued by the clerk of the 19.76, authorizing the joining together as husband and wife and Sharam January office, to-wit: hereby certify that on the Aday of May A County of Managera
DMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT AUTHORISES And directs the issuance of authorizes and directs the issuance of lindiana dated the day of Marriage licenses and directs the issuance of it further remembered, the following marriage certificate was filed in my office a marriage licenses and directs the issuance of it further remembered, the following marriage certificate was filed in my office a marriage licenses and directs the issuance of indiana dated the day of marriage certificate was filed in my office a marriage licenses and directs the issuance of indiana dated the day of marriage certificate was filed in my office a marriage licenses and directs the issuance of indiana dated the day of marriage certificate was filed in my office a marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of ma	Signed Subscribed and sworn to before me this Clerk RT. A marriage license having been refused to the above named parties, the purt by written order issued of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court named by the clerk of the see issued by the clerk of the poining together as husband and wife office, to-wit: hereby certify that on the day of may for the poining together as husband and wife office, to-wit: hereby certify that on the day of may for the poining together as husband and wife office, to-wit: hereby certify that on the day of may for the poining together as husband and wife office, to-wit: hereby certify that on the day of may for the poining together as husband and wife of the poini
DMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT AUTHORICKS Be It Remembered, there was filed in my office a marriage licent day of the following marriage certificate was filed in my office a marriage licent day of the following marriage certificate was filed in my office a marriage licent day of the following marriage certificate was filed in my office a marriage licent day of the following marriage certificate was filed in my office a marriage licent day of the following marriage certificate was filed in my office a marriage licent day of the following marriage certificate was filed in my office a marriage licent day of the following marriage certificate was filed in my office a marriage licent day of the following marriage certificate was filed in my office a marriage licent day of the following marriage certificate was filed in my office a marriage licent day of the following marriage certificate was filed in my office a marriage licent day of the following marriage certificate was filed in my office a marriage licent day of the following marriage certificate was filed in my office a marriage licent day of the following marriage certificate was filed in my office a marriage licent day of the following marriage certificate was filed in my office a marriage licent day of the following marriage certificate was filed in my office a marriage licent day of the following marriage certificate was filed in my office a marriage licent day of the following marriage certificate was filed in my office a marriage licent day of the following marriage certificate was filed in my office a marriage licent day of the following marriage certificate was filed in my office a marriage licent day of the following marriage licent day of	Signed Subscribed and sworn to before me this Clerk RT. A marriage license having been refused to the above named parties, the purt by written order issued of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court named by the clerk of the see issued by the clerk of the poining together as husband and wife office, to-wit: hereby certify that on the day of may for the poining together as husband and wife office, to-wit: hereby certify that on the day of may for the poining together as husband and wife office, to-wit: hereby certify that on the day of may for the poining together as husband and wife office, to-wit: hereby certify that on the day of may for the poining together as husband and wife of the poini
DMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT AUTHORISES And directs the issuance of authorizes and directs the issuance of lindiana dated the day of Marriage licenses and directs the issuance of it further remembered, the following marriage certificate was filed in my office a marriage licenses and directs the issuance of it further remembered, the following marriage certificate was filed in my office a marriage licenses and directs the issuance of indiana dated the day of marriage certificate was filed in my office a marriage licenses and directs the issuance of indiana dated the day of marriage certificate was filed in my office a marriage licenses and directs the issuance of indiana dated the day of marriage certificate was filed in my office a marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of ma	Signed Subscribed and sworn to before me this Clerk Clerk Clerk CT. A marriage license having been refused to the above named parties, the and filed of a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court named by the clerk of the head of the poining together as husband and wife and sharam frice, to-wit: hereby certify that on the haram for the haram for the hereby certify that on the haram for the h
DMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT AUTHORICKS BE It Remembered, there was filed in my office a marriage license it further remembered, the following marriage certificate was filed in my office and my office	Subscribed and sworn to before me this day of
DMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT AUTHORICKS BE It Remembered, there was filed in my office a marriage license it further remembered, the following marriage certificate was filed in my office and my office	Subscribed and sworn to before me this day of
DMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT AUTHORICKS BE It Remembered, there was filed in my office a marriage license it further remembered, the following marriage certificate was filed in my office and attended a	Subscribed and sworn to before me this day of
DMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY MENDRICKS County Be It Remembered, there was filed in my office a marriage license it further remembered, the following marriage certificate was filed in my office and my office and my office and my office and my office it further remembered, the following marriage certificate was filed in my office and my o	Subscribed and sworn to before me this day of
DMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT AUTHORISES And directs the issuance of authorizes and directs the issuance of lindiana dated the day of Marriage licenses and directs the issuance of it further remembered, the following marriage certificate was filed in my office a marriage licenses and directs the issuance of it further remembered, the following marriage certificate was filed in my office a marriage licenses and directs the issuance of indiana dated the day of marriage certificate was filed in my office a marriage licenses and directs the issuance of indiana dated the day of marriage certificate was filed in my office a marriage licenses and directs the issuance of indiana dated the day of marriage certificate was filed in my office a marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of marriage licenses and directs the issuance of indiana dated the day of ma	Subscribed and sworn to before me this day of

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

File_	Bk	37
		1

Chap. 126, Ind. Acts 1905	HENDRICKS	County	- May Date	of Application
		FEMALE	- 6	2 /
MALE Medical Examination Report Dated 5-7-76	_	Medical Examination Re	2	16
Name of Physician Manuel Largo espada			0	alspida
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribtion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500)	bes "False statement— 0.00)".	- whoever procures the issuance	MALE ADDITIONS	alse statement, representa-
MALE APPLICANT	Non		MALE APPLICANT Middle	
Name First Middle Bitkes	ner l	Cathy	ann	Badell
Date of Birth Month Day Year		augu	ot 8	Year 1955
Place of Birth (State or foreign gountry)	Plac	ee of Birth (State or foreign cou	ntry)	
Residence Address Street or R. R. City Hendricks	and Pa	dence Address Street of Addres	Petts boro We	County States
Previous Marital Status: Never Married Number of Previous Marriages		V to 1 States Name W	and all Marks at David	
Last Marriage Ended By: Death Divorce Annulment		ious Marital Status: Never Ma		
Color or Race White Negro Other (specify)	Last	Marriage Ended By:	Death Divorce Annulm	ent [
Date of birth verified by: Birth Cert. Judicial Decree			egro Other (specify).	
Other (Specify) / //3 -54 -0.3 770 7		al Occupation Unemp	doyel	
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No	/ Yes □		Cert. Judicial Decree	
Of Unsound Mind? No 2. Are you under guardianship as a person of unsound mind? No No	100	Are you now or have you been a		d as:
3. Are you now or have you been within five (5) years an inmate of a county home for indigent persons?	asylum or Yes [An Imbecile?	The state of the s	No ☐ Yes ☐
If answer to 3 is "yes" has the cause of such condition been removed?		Of Unsound Mind?		No ☑ Yes □
4. Are you afflicted with a transmissible disease? No No No No No No No No	Yes 🗆 2.	Are you under guardianship as		No 🛛 Yes 🗆
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a narcotic drug? No	/ V [Are you afflicted with a transmi		No Ves
8. Are you able to support a family? Yes	No 🗆	Are you related to the groom cl Are you now under the influence		No Ves
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? No	No L	Are you now under the influence		No ☑ Yes ☐
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses		Full name of father Paus	2 1 8 12	lio les [
Name Age Address	1	Residence of father (if deceased	so state) May	Leaner
		Occupation of father Den	list Race	of father W;
		Birthplace of father (State or f	oreign country) Clausely	al Olio
(b) Are you supporting or contributing to their support? Yes □	8. I	Full maiden name of mother	Blown Clau	e Milke
(c) Are you complying with any court order or orders issued for their support?	_ ,	Residence of mother (if decease	ed so state) adplo	, Sal,
11. Full name of father Robert aller attending		Occupation of mother Une	mplayed Race	of mother 7
Residence of father (if deceased so state) Lattabore and		Birthplace of mother (State or f	oreign country) Manage	o Allerais
Occupation of father Wildle A Race of father W	The state of the s	e of Indiana,		AND THE STREET
Birthplace of father (State or foreign country) MASIS INS		ty of HENDRICKS	ss: I depose and s in this applica	tate the information given ation is true and correct.
Residence of mother (if deceased so state)		Simul V	Cathy ann	Badol
Occupation of mother Retire & Race of mother W	7 -	New Address	PI BOU 7	2 B Pittolyn
Birthplace of mother (State or foreign country)	0		2	2011 1096
State of Indiana, County of HENDRICKS 78 ss: I depose and state the information of the samplication of th		cribed and sworn to before me t		
County of HENDRICKS in this application is type and	d correct	Som III follows	Clerk HENDRIC	Circuit Court
New Address DE BOX DE DUSCO	con	SENT OF PARENTS, PAREN	T OR GUARDIAN	
Subscribed and sworn to before me this	97	the parents, of this applicant h		rriage. If only one parent
Slen M Hawley ClerkHENDRICKS Circ	cuit Court signs	, state facts which render the	consent of the other parent un	necessary
CONSENT OF PARENTS, PARENT OR GUARDIAN				
We, the parents, of this applicant hereby give consent for this marriage. If only of	ne parent			
signs, state facts which render the consent of the other parent unnecessary				
	State	of Indiana,		
State of Indiana,		ty of HENDRICKS	} ss:	
County of HENDRICKS Ss:		Signed		Father
Signed.	Father			Maken
Signed	Mother			
		cribed and sworn to before me t	uisday ofday	Clark
	11			UELA
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER (OF COURT. A n	narriage license having b	een refused to the above	e named parties, the
in Clarks Office authorizes and directs the	Court by	written order issued	day wave	and filed
RETURN OF WARRANGE	issuance of a mai	rriage license to the above	named parties.	
Be It Remembered, there was filed in war a	E LICENSE AND	MARRIAGE CERTIFIC	ATE	a: 't Count
of Indiana dated the 7th day of May Be it further remembered, the following	go ticense issu	ed by the clerk of the	HENDRICKS	Circuit Court
Be it further remembered, the following marriage certificate was file larkson	and	Cathy anthorize	ing the joining together of	as husbana and wy
1, Alen & Clarkson one thousand nine hundred and 76	ou in my office, to	-wit:	700	diana di di di mala
State of Indiana Company	nereby	that on the	day of Mac	Il drocks
State of Indiana, Groom of the	at de	www	Country of	WIN CREEKEN
were by me united in marriage as authorized by a marriage license i	ofof	ndrich ,	County, State of	Indiana.
were by me united in marriage as authorized by a marriage license i Dated this	ssued for that pu	rpose by the Clark of the	County, State of	UDBICKS
Dated this	107/	of the Clerk of the	ereuit Court ofHEN	IJAINA
		Signed Slow	a Plank boar	
Filed and recorded in accordance with the laws of the	Official	Signed Slen Designation Castor	Il moth Ch	Gitts boro.
Filed and recorded in accordance with the laws of the State of India	na this	day of	Mall	, 19. 7.6
	9.000	and the later of the land	Harvel	
		HEND	RICKS	Circuit Court

Form Prescribed By Indiana State Board of

STATE OF INDIANA

Health under Authority Chap. 126, Ind. Acts 1905 HENDRICK	MARRIAGE LICENSE S County No. 5
MALE 4/22/	- 17/44 10, 1976
Medical Examination Report Dated	FEMALE Medical Francisco
Name of Physician Care A. Munleysi Ind.	Medical Examination Report Dated 4/22/76
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	Name of Physician Carl L. Meinley M.
MALE APPLICANT	whoever procures the issuance of a license to marry by any false statement, representa-
Name Of First Middle Last	FEMALE APPLICANT
Date of Birth Month Day Year	Totals Middle Cliptast
Place of Birth (State or foreign country)	Date of Birth Month Day
Street or R. R. City Burne In.	Place of Birth (State or foreign country)
1064 Monday Indiplo- Ind	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married Wumber of Previous Marriages	Maiden Name if Different Australslaun Fil
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 Concessioneer	Colon D
Date of birth verified by: Birth Cert, Judicial Decree	regro Other (specify)
Other (Specify) Alltham Dente # 3/35 2/423 1. Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation Hamesmaker
An Imbecile? Of Unsound Mind?	Date of birth verified by: Birth Cert. Judicial Desec
2. Are you now or have you been within five (5) years an inmate of a county and	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? No Yes	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	2. Are you under guardianship as a person of unsound mind? No. Yes 3. Are you afflicted with a transmissible disease? No. Yes Yes Yes No. Yes No
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
9. Are you likely to so continue?	5. Are you now under the influence of intoxicating liquor? No Z 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 family will that fifth
Name Age Address	Residence of father (if/deceased so state)
	Occupation of father State or foreign country)
	8. Full maiden name of mother Durbara Jana Allik
(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? 11. Full name of father Engle Edwing Williams	Occupation of mother All sales sales of mother Allet
Residence of father (if deceased so state) Sellanan Ju	Birthplace of mother (State or foreign country) Dulples Bul
Occupation of father Aller Race of father Allele	
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS Is: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother less Alley for health and the second seco	. Artainia Oran Grillith
Residence of mother (if deceased so state)	Signed 5115 Rosslan Que Indol
Occupation of mother State or foreign country)	New Address Subscribed and sworn to before me this day of 19/6
State of Y. W.	Subscribed and sworn to before the data Clerk HENDRICKS Circuit Court
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	- Merk Merket
Signed Edwar Joseph Williams	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 5/15 Rosslyn S! Andrenyth	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 , 19 C	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, ss:
State of Indiana,	County of HENDRICKS
County ofHENDRICKS.	Signed
Signed Father	Signed
Signed	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me thisday ofday of	Clerk
	T. A marriage license having been refused to the above named parties, the
Co	art by written order issued
in authorizes and directs the issuance of	f a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE
RETURN OF MARKIAGE INCENTION	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court se issued by the clerk of the hendricks circuit court authorizing, the joining together as husband and wife
Indiana dated the	0, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,
// ~	10
Be it further remembered, the following marriage certificate was filed in my of the following marriage	nereby certify that on the day of Dayon
The state of the s	(1) I a a follo
one thousand nine hundred and 76 State of Indiana, Groom Aduxn J. Williams	County, State of Indiana
State of Indiana, Groom Saurn J. Williams of and, Bride Palzicia John Haiffills of	1 As Clark of the Circuit Court of HENDRICKS
of ou me united in marriage weeks to the a marriage weeks	hat purpose by the Clerk of the Control
	Signed 15/ Russell F. Blowers
Dated this 16 the day of 77 ay, 19 16	· · · · · · · · · · · · · · · · · · ·
	Official Designation 19 14 19 19 19 19 19 19 19 19 19 19 19 19 19
Filed and recorded in accordance with the laws of the State of Indiana this	Signed HENDRICKS Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

152

...Circuit Court

HENDRICKS.

Chap. 126, Ind. Acts 1905 HENDRICKS	County Date of Application
	FEMALE 4-19-76
MALE 4-19- 76	Medical Examination Report Dated
Medical Examination Report Dated Name of Physician 20. Scandon 20-2	Name of Physician M. O. Scanadow M. D.
Name of Physician O. J. Canal Company	
Name of Physician ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False states and the state of the state o	ment—Whoever procures the issuance of a license to marry by any faise statement, representa-
tion or pretense shall be lined in any same terms.	FEMALE APPLICANT
MALE APPLICANT Middle Last	Name First Middle 9 Last
Name Order Fergue Diahem.	Date of Birth Month Day Year
Date of Birth Month 195 (Jan. 30 1957
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) Boone Co.
Lebanon kalana County State	Residence Address Street or R. R. City County State
Residence Address Street or R. R. Herbucke 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:	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	
Usual Occupation Marine Corps	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Junicial Decree	Usual Occupation Unemployed
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 State Dd. of Heart 57-600
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. 3. Are you now or have you been within five (5) years an inmate of a county asylum or	An Imbecile? No Yes
Are you now or nave you been within live (b) Jeans and No 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?	3. Are you afflicted with a transmissible disease? No Yes
6. Are you now under the influence of intoxicating liquor? 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 X Yes
8. Are you able to support a family?	5. Are you now under the influence of intoxicating liquor? No X Yes
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? Yes \(\subseteq \text{No} \subseteq \text{Yes} \text{Yes} \text{Yes} \text{Yes} \text{Yes} \text{Yes} \text{Yes} \qu	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 Raymond Clarence Linton
(a) List their full names, ages and addresses Name Age Address	Residence of father (if deceased so state) Jamestown, Ind.
Name Age Address	Occupation of father Bear Cutter Allison W.
	Birthplace of father (State or foreign country)
	Carlo Da Carlos
(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? Yes \(\subseteq \text{No} \subseteq \)	Residence of mother (if deceased so state)
11. Full name of father Hulyust D. Hallam	Occupation of mother numers and Race of mother
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father A Satisfaction Race of father Wh	
Birthplace of father (State or foreign country)	State of Indiana, I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Alamay Mg. Landaud	County of HENDRICKS In this application is true and correct
Residence of mother (if deceased so state)	Signed Donna Marie Linton
Occupation of mother Alexander Race of mother Alexander	New Address Address Address Address
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this // day of Thay 1976
State of Indiana, I depose and state the information given	0. 2 3 31
County of HENDRICKS ss: in this application is true and correct.	Den M. Ataleg., Clerk HENDRICKS Circuit Court
Signed for Many John Many Signed	CONSENT OF PARENTS PARENT OF CHARDIAN
New Address Hpl 3126 RoosyEHTRD Cachesometh	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of Aug., 19.76.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
ClerkHENDRICKS 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, Country of HENDRICKS 88:	County ofHENDRICKS
County ofHENDRICKS	SignedFather
SignedFather	Signed Mother
Signed	Subscribed and sworn to before me thisday of
	day 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
HENDRICKS County Co	urt by written order issued
inauthorizes and directs the issuance o	f a marriage license to the above and anti-
the state of the s	E AND MARRIAGE CERTIFICATE se issued by the clerk of the HENDRICKS Circuit Court
of stockers with the stockers of	n/
David Esegene Graham	se issued by the clerk of the HENDRICKS Circuit Court
Be it further remembered the following	nd bonna Marie & in Jon
1, Allaman Essep	hereby certify that on the 22
one thousand nine hundred and 76	at the same day of the day of
State of Indiana, Groom David Erealne Frankon	ffice, to-wit: hereby certify that on the 22 day of Marieks, at Sittshare County of Hendricks, of Hendricks County, State of Indians
and, Bride Wonna marile Linton	Orone County, State of Indiana,
were by me united in marriage as authorized by a marriage line	County, State of Andlanda,
County and the second tor	that mumana be the all the second
Dated this 22 day of May, 19.7	
	Signed Salaman & Asla
Filed and recorded in accordance with the land	American de la companya de la compan
Filed and recorded in accordance with the laws of the State of Indiana this	25 day of May 19.76.
	Signed Glen M. Glarvele Clerk
	HENDRICKS Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE 153

HENDRICKS County Diay 12, 1971	
MALE Medical Examination Report Dated 5/11/76	Pate of A. 1976
*72 d t t t	FEMALE Medical Examination Report Dated 5/11/76
Name of Physician	71:
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False attention or pretense shall be fined in any sum not exceeding five hundred the prescribes "False attention or pretense shall be fined in any sum not exceeding five hundred the prescribes "False attention or pretense shall be fined in any sum not exceeding five hundred the prescribes "False attention or pretense shall be fined in any sum not exceeding five hundred the prescribes "False attention or pretense shall be fined in any sum not exceeding five hundred the prescribes "False attention or pretense shall be fined in any sum not exceeding five hundred the prescribes "False attention or pretense shall be fined in any sum not exceeding five hundred the prescribes "False attention or pretense shall be fined in any sum not exceeding five hundred the prescribes "False attention or pretense shall be fined in any sum not exceeding five hundred the pretense shall be fined in any sum not exceeding five hundred the pretense shall be fined in any sum not exceeding five hundred the pretense shall be fined in any sum not exceeding five hundred the pretense shall be fined in any sum not exceeding five hundred the pretense shall be fired to be attention of the pretense shall be shall be attention of the pretense shall be attentioned by the pretense shall be attentioned b	tement When when were V. Sapler Ind.
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	Thoever procures the issuance of a license to marry by any false statement, represents
Name First (ASLEA) Middle 1 - Last	FEMALE APPLICANT
Date of Birth Mouth Day Year	Senerge Middle Last
Place of Birth (State or foreign country)	Date of Birth Month Day Year
graphe Smoot on B. B. Marison Lord.	Place of Birth (State or foreign country)
Residence Address 34085 Chry County State 9.1.	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married Number of Previous Marriages.	Maiden Name if Different 80 Newylle State
Last Marriage Ended By: Death Divorce Annulment DMRIAN 1/	Providence W. in a
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages.
	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) # 4122	Usual Occupation
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?	Date of birth verified by: Birth Cert. Judicial Decree
Of Unsound Mind?	Dother (Specify) Sis Palicy # 10 939 000
3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as:
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	An Imbecile? No Yes Of Unsound Mind?
4. Are you afflicted with a transmissible disease? No Yes	2. Are you under quardianship as a parent of the last
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 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 Tes T
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.
	Residence of father (if deceased so state) Occupation of father Race of father
	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 fiel phine fletten
(c) 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 Salve F. Felger	Occupation of mother
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, County of
12. Full maiden name of mother Drudel Spillsifeld	gen and Zapani le
Residence of mother (if deceased so state)	Signed I La De Change Juliah
Occupation of mother Race of mother	New Address 12 hall 10 76
State of Indiana, I depose and state the information given	Subscribed and sworn to before me this day of 19. Subscribed and sworn to before me this day of Clerk HENDRICKS Circuit Court
County of HENDRICKS ss: in this application is true and correct.	Clerk HENDRICKS Circuit Court
Signed July La Fully L	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address / 1 of 1 Will Mile Miles	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 19 (19) (At MIM 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, \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
0.	State of Indiana, County ofHENDRICKS ss:
State of Indiana, County ofHENDRICKS	Signed Father
Signed Father	Signed
Signed Mother	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me thisday of	Subscribed and Subscribed Clerk
Clerk	and position the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	T. A marriage license having been refused to the above named parties, the
authorizes and directs the issumo	
THE WARPIAGE LICENSE	AND MARKIAGE CERTIFICATION HENDRICKS Circuit Court
Be It Remembered there was filed in my office a marriage weeks	the signing the joining together as husband and wife
Indiana dated the day of	nd Sterentelle Japonilles
Be it further was filed in my of	Tice, to-wit:
(1) m - 204	ereog cerus
one thousand the state of the s	Chuta of Indiana
State of Indiana Grown Angent & Fidale	County, State of Indiana,
vere by me united in marriage as authorized by a marriage license issued for the County.	Mareon County, State of Indiana, Lendricks County, State of Indiana, hat purpose by the Clerk of the Circuit Court of HENDRICKS
County me united in marriage as authorized by a marriage ucense too	
Dated 41:	a dohn Callada Do 1
aay oj	Official Designation Judge - Hendricks la Callel
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation may , 19.76. 24 day of Harrey Clerk
ued and recorded in accordance with the laws of the State of Indiana this	Jen M. Norvey

HENDRICKS...

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

No	154	
File_		
	100 11 / 10	

lth under Authority
p. 126, Ind. Acts 1905

HENDRICKS County

Date of Application

V/ 19/2	FEMALE Medical Examination Report Dated 5/12/7 6
MALE Medical Examination Report Dated	Name of Physician Thomas Walker Ind.
Name of Physician Shames Walkle Mar	
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	tement—Whoever procures the issuance of a license to marry by any false statement, representa-
MALE APPLICANT	FEMALE APPLICANT
Name First Middle Last	Wellna G. Sharp
Date of Birth Month Day Year 1957	Date of Birth Month Day Year
Place of Birth (State or foreign country) Manual M	Place of Birth (State or foreign country)
Street or R. R. City County State	Residence Address Street of R. R. City County State
6413 Consulate Ct. Sperway Danion	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 Venne gutt's Wardware	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert Judicial Decree	Usual Occupation Student
Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as:	Date of birth verified by: Birth Cert. Uddicial Decree
An Imbecile? Of Unsound Mind? No Yes	Other (Specify) A SMILE SUMMER HOSP!
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 and flower of Yes \tag{Y}
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? 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 Yes No No	5. Are you now under the influence of intoxicating liquor? No Ves
10. Do you have minor children from one or more former marriages? 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 Dansey
Name Age Address	Residence of father (if deceased so state)
	Occupation of father
	8. Full maiden name of mother. Julia and Bruce
(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) Braunslung In
their support? By a Manual Pall and Silvally	B. B. in Sakral Corp : A 1/4 of
11. Full hame of latter.	Allina:
Residence of father (if deceased so state) Occupation of father Race of father	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country)	State of Indiana, Second State of Indiana, I depose and state the information given in this application is true and correct.
Full maiden name of mother Bonnie Laure Pure	County of HENDRICKS In this application is true and correct.
Residence of mother (if deceased so state) 3 Munchung 4	Signed Dona a Smart
Occupation of mother AMCALA AGENCY Race of mother MALT	New Address 64/3 Consulate Ct
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of 19 19
nty of HENDRICKS ss: I depose and state the information given in this application is true and correct.	The Manual Clerk HENDRICKS Circuit Court
Signed Call Stalle	
New Address 6413 Consulate Of	CONSENT OF PARENTS, PARENT OR GUARDIAN
scribed and sworn to before me this day of 19	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
INSENT OF PARENTS, PARENT OR GUARDIAN e, the parents, of this applicant hereby give consent for this marriage. If only one parent	
ms, state facts which render the consent of the other parent unnecessary	
	State of Indiana,
tate of Indiana, ounty ofHENDRICKS	County ofHENDRICKS
Signed Father	SignedFather
Signed	Signed less a Sharp Mother
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me this day of may 19.74.
Clerk	The Markey Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COMP	RT. A marriage license having been refused to the above named parties, the
HENDRICKS County County County	ourt by written order issued 3 day + age Walder and filed
in authorizes and directs the issuance of	of a marriage license to the above named parties
RETURN OF MARRIAGE LICENS	
the state of the s	and inquist 1 and
ady of mail	7/
Be it further remembered, the following marriage contif	ind before a Sharp
/	
State of Indiana Green 7 6	at Danvelle , County of Therekes,
were by me united in marriage as authorized in the second of	Lendricks County, State of Indiana,
County.	that manners 1 11 at 1
Dated this /3 day of May , 19.7	6.
	Signed Jaku C. Malerer
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Judge, Thendricks Co. Court
The State of Indiana this	Signed of Malf ,19 76.
	Signed Stem II Sprace
	HENDRICKS Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

Health under Authority Chap. 126, Ind. Acts 1905 HENDRICK	County — May 3 /916 Date of Application
	FEMALE 5 /12 /5
MALE 5/12/76	Medical Examination Report Dated
Medical Examination Report Dated	Name of Physician Thomas Walker, Ind.
Name of Physician Thomas (Williams)	toment—Whoever procures the issuance of a license to marry by any false statement, represent
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "Faise 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 Swally	Date of Birth Month Day Year
Date of Birth Month Day Year 957	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	canaga
Residence Address Street or R. R. City County State	Residence Address Street of R. R. City County State BX 292 C Drownsburg Sq.
6413 Consulate 9. Spenium 1.	Maiden Name if Different
Trevola Maria Carlo	Previous Marital Status: Never Married Number of Previous Marriages
Last marriage Ended by.	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	ff 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Auditor
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes	Date of birth verified by: Birth Cert. Judicial Decree
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes \(\) Yes \(\)	1. Are you now or have you been adjudged, diagnosed or considered as . Mark St
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? Yes	An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	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 D
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? 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? No Yes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father fully spring of
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 (c) Are you complying with any court order or orders issued for	8. Full maiden name of mother.
their support? By Many is Pall and Street No	Occupation of mother Bally Salas Race of mother Asset Race of mother Race of moth
Residence of father (if deceased so state)	Occupation of mother Race of mother Race of mother Birthplace of mother (State or foreign country)
Occupation of father Addison Bull Race of father Willett	Birthplace of mother (State of foreign country)
Birthplace of father (State or foreign country)	State of Indiana, County ofHENDRICKS
of mother Donnel Lamal Mull	Mehan a Shan
	Signed Dece a signal ate Ct.
	· · · · · · · · · · · · · · · · · · ·
I, TETER M SHOPP	, 19
	Circuit Court
MY DAUGHTER, DERRA ANIA	ereby give my consent for
	EHARP ce. If only one parent
marry JACK C. SWALLEY	to
June 1	
To An	MA
Subscribed and sworn to before me this 12t	11.0 Mars
to before/me this 12t	h day of May
Commission Expires:	day of May 19 76
July 18, 1976 Martha Sauce	Father
(Martha Louise Hi	(ary Publisher) Mother
Subscribed and sworn to before me	ickstep) 11c
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY OPDER OF COMP	
HENDRICKS County Circuit	RT. A marriage license having been refused to the above named parties, the ourt by written order issued and filed
in Clicks affice authorizes and directs the issuance of	of a marriage license to the
RETURN OF MARRIAGE LICENCE	
of Indiana dated the 13 day of Maly	HENDRICKS Circuit Court
De it juriner remembered, the following manuface and if	and wells a // Shap as
one thousand nine hundred and 76	at Danvelle , County of Thereke
and Bride he has a less swalley	of Marion County of Thendricks, County of Thendricks, County, State of Indiana
were by me united in marriage as well in the second of the	Lendricks County, State of Indiana,
County.	that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this /3 day of May , 19.7	6.
	Signed Jahn C. Maierer
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Judge, Hendricks Co. Court
of Indiana this	day of Male 19 %.
	Clork
	Signed Slew M. Harvey Clerk HENDRICKS Circuit Court

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

No. 155 Book 37

HENDRICKS County File Book 37	
MALE Medical Examination Report Dated 5-9-96	- May 13, 1976
Access to the second	FEMALE Date of Application
Name of Physician Cris D. Clark	Medical Examination Report Dated 5-9-76
ALL QUESTIONS MUST BE ANSWERED. Chapter 126. Indiana Acts 1905 prescribes "Palse station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	Name of Physician Cric D. Clark
male Applicant	tement—Whoever procures the issuance of a license to marry by any fals.
Name (Wall) (Muddle)	FEMALE APPLICANT
Date of Birth Munth Day Gilles sie	Name & First Middle
Place of Birth (State or libring ownstry)	Date of Birth Month Marie Massan
judge and.	Place of Birth (State or foreign country) 24 Year 1956
Besidence historia Street up to the City County Staty	Residence Add .
Previous Marcial Status Nerves Married & Number of Previous Marriages	R 2 Box 498 F Street or R. R. City County State
Last Marriage Ended By . Death Divorce Annulment	mausen Name if Different . Dr.d .
	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Nagro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation for Land Defer	At a
Date of birth vertified by Birth Cart. J Judicial Decree	Usual Occupation White Negro Other (specify)
L. Are you now or have you been adjudged, diagnosed or considered as:	rey punch
Of Unsound Wind?	Date of birth verified by: Thirth Cert. Judicial Decree
2. Are you now or have you been within five (3) years an immate of a county against or	1. Are you now or have you been adjudged, diagnosed or considered as:
home for indigent persons? No P Yes If answer to I is "yes" has the cause of such condition been removed? No P Yes	An Imbecile? No Yes
4. Are you afflicted with a transmissible disease? No B Yes	Of Unsound Mind?
5. Are you related to the bride closer than second counts? 1. Are you now under the influence of intenfeating liquor? No D Yes	2. Are you under guardianship as a person of unsound mind? No Yes No Ye
1. Are you now under the influence of a narrestic drug? No W Yes	4. Are you related to the groom closer they
1. Are you likely to so continue?	Are you now under the influence of intoxicating liquor? No Yes
10. Do you have minor children from one or more former marriages? No Sec Yes	6. Are you now under the influence of a narcotic drug? No Ves
(a) List their full names, ages and addresses	T. Pull name of father Carence R Mayson
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Staff Special Race of father
	Birthplace of father (State or foreign country) Staps. So.
(b) Are you supporting as contributing to their support? (c) Are you complying with any court order or orders issued for	0 //
their support? 11. Pull same of bother Gerald Line Gillingie	Residence of mother (if deceased so state), Same
Residence of father (if ducagned to plate)	And of motion
Occupation of tother the felly a same of tether w	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country) Indials.	State of Indiana. State of Indiana. I depose and state the information given in this application is true and correct.
12. Pull maiden name of mother Margaret a. Meller	County of HENDRICKS In this application is true and correct.
Residence of mother (1) degreesed so stated 2 A A A	Signed X JOLI My Mayboan
Occupation of mother Askertalian Base of mother	New Address 2336 Her Instage Way speedled
Simplians of mother (State or foreign ementry)	Subscribed and sworn to before me this 3 day of May 19 76
County of HINDRICKS In this explication is true and correct.	Oler 711. Haway Clerk HENDRICKS Circuit Court
Signal March States	CONSENT OF PARENTS, PARENT OR GUARDIAN
Now Address 2336 Herinity Way Judin	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworn to before me this. 3 they of Theory 1874	signs, state facts which render the consent of the other parent unnecessary
Clerk HENDRICKS Circuit Court	signs, state facts which reduce the constitution
CONSENT OF PARENTS, PARENT OR GUARDIAN	
We, the parents, of this applicant hereby give consent for this marriage. If only one parent ligns, state facts which render the consent of the other parent unnecessary	The state and the state of the
and the contents of the other barens assessed to	
	State of Indiana, HENDRICKSss:
Rate of Indiana.	Father
MENDRICKS.	Signed Mother
Signad Mother	Signed day of 19 19
ubscribed and sworn to before me this. day of 19	Subscribed and sworn to before me thisday ofClerk
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	C. A marriage license having been refused to the above named parties, the
Left in the same	irt by written order issuedament
authorizes and directs the issuance of	a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage licens	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court is issued by the clerk of the hendricks circuit Court is issued by the clerk of the hendricks circuit Court is issued by the clerk of the hendricks circuit Court is issued by the clerk of the hendricks circuit Court is issued by the clerk of the hendricks circuit Court is issued by the clerk of the hendricks circuit Court is issued by the clerk of the hendricks circuit Court is issued by the clerk of the hendricks circuit Court is is is in the hendricks circuit Court is is in the hendricks circuit Court is is in the hendricks circuit Court is in the hendrick circuit Cour
Indiana dated the day of day of	Gail Marie Maxson
Michael Gene Gillespie an	fice, to-wit: 19th day of June
Rev. Kenneth A. Stephens	ereby certify that on the 19th day of June Clermont Heights , County of Hendricks ,
ne thousand 1 76 aa	t Great of Indiana
tate of Indiana, Groom Michael Gene Gillespie	Hendricks County, State of Indiana Hendricks County, State of Indiana Hendricks County of HENDRICKS
nd, Bride Gail Marie Maxson of	HENDRICKS HENDRICKS
ere by me united in marriage as authorized by a marriage license issued for the	hat purpose of
ated this 19th June 19	Signed Rev. Reillieth A. Ordained Minister
iled and recorded in accordance with the laws of the State of Indiana this	22nd day of June , 19 7.6.
med and recorded in accordance with the laws of the State of Indiana this	22nd day of June Clerk Signed Glen M. Harvey Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

Indiana State Board of Health under Authority Chap. 126, Ind. Acts 1905 HENDR	MARRIAGE LICENSE File May 14, 1976
HENDR	Date of Application
	FEMALE Medical Examination Report Dated 5/12/76
MALE Medical Examination Report Dated 5/12/76	1 -11 /2 /2 /2 /
and scudder ma	Name of Physician U. H. Bulkan, HML.
1005 prescribes "False	statement-Whoever procures the issuance of a license to marry by any false statement, represen
ion or pretense shall be fined in any sum not executing	FEMALE APPLICANT
MALE APPLICANT Middle Last	Name First Lest Middle Was by a Last
Name Roland E. Rondeau J	Date of Birth Month Day Year
Date of Birth Month September 28 1956	Place of Birth (State or foreign country)
Place of Birth (State or foreign-country) When the state of foreign country)	Residence Address Street of R. R. City County State
Residence Address Street or R. R. City County State	under R. #2 Plainfield Island. In.
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
The state of the s	Last Marriage Ended By: Desth Divorce Annulment
Color or Race White Negro Other (specify)	Color or Race White Negro Other (specify)
Usual Occupation (1. S Ulmg	Color of Race
Date of birth verified by: Birth Cert. Judicial Decree	1 370
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? Yes Yes Yes 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	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 dissound mind.
6. Are you now under the influence of intoxicating liquor? No 🛛 Yes	3. Are you afflicted with a transmissible disease? No Ye
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 remove to the grant and the same
9. Are you likely to so continue? 9. Po you have minor children from one or more former marriages? 10. Po you have minor children from one or more former marriages? 11. Ves 12. Ves 13. Ves 14. Ves 15. Ves 16. Ves	
(If yes, answer questions a, b, c)	7. Full name of father Alk H. Wapking
(a) List their full names, ages and addresses Name Age Address	Residence of father (if deceased so state) Ref Panil Kelly, Fla
	Occupation of father Stated - Chattage 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 Allegan With No. 1880
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state) + (Fuffi
11. Full name of father Italank Edward Tondeau	Occupation of mother All Management Race of mother Mall
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Addition Race of father Addition	State of Indiana,
Birthplace of father (State or foreign country)	State of Indiana. County of HENDRICKS 1 depose and state the information ging this application is true and corr
12. Full maiden name of mother Aller John Mark Aller A	Sund (Markins)
Residence of mother (if deceased so state) Occupation of mother MMMMRL, Race of mother MMM	New Address 4 4 A A A A A A A A A A A A A A A A A
Birthplace of mother (State or foreign country) 4 Add Alandal And And Alandal And And Alandal And And And Alandal And	Subscribed and sworn to before me this
State of Indiana, I depose and state the information given	41. his bl.
County of HENDRICKS ss: in this application is true and correct	Circuit Co
New Address. 47HAG. ADMIN. Co. FT. Carfon, Col.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me/this / day of 2004 1976	We, the parents, of this applicant hereby give consent for this marriage. If only one par
Sun M. Maruly ClerkHENDRICKS Circuit Cour	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 ofHENDRICKS
County ofHENDRICKS	Signed
SignedFather	VI B II C VIII C
Signed	Dig Hed
Subscribed and sworn to before me thisday of	
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF CO	URT. A marriage license having been refused to the above named parties,
County County	Court by written ander issued 34 Men 1141141 and fi
n authorizes and directs the issuance	e of a marriage license to the above named parties.
RETURN OF MARRIAGE LICE	JCE AND MADDIAGE
the state of the s	cense issued by the clerk of the HENDRICKS Cinquit Co
Ronald E. Fon De day of	, 19 , authorizing the joining together as husband and u
Be it further remembered, the following marriage certificate was filed in	and wan see Jappen
, savy silly	hand me
one thousand nine hundred and 7	at County of Ald Alle
and Bride (1 M)	of Alacket County of Alacket
vere by me united in marriage and	Alendricks County, State of Indiana
county.	or that purpose by the Clerk of the Cinnit Country
Dated this day of May	6. 0 0
Dated this 3 Th day of May , 19.2	Signed Larry Lilly
Dated this day of May, 19.2	Signed Janey Ally

Form Prescribed By

STATE OF INDIANA

Indiana State Board of Health under Authority Chap. 126, Ind. Acts 1905 APPLICATION FOR MARRIAGE LICENSE	
Health under Authority FOR N Chap. 126, Ind. Acts 1905 HENDRICK	'C THE
MALE Medical Examination Report Dated 5-13-76	FEMALE Date of Application
Name of Physician Slorge R. Smally M. D.	Medical Examination Report Dated 5-13-76 Name of Physician Llouge & Small O con O
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	tement—Whoever preserved in
MALE APPLICANT	
Name First Middle Last	Name FIG.
Date of Birth Month Day Year	Date of Birth Month Last
Place of Birth (State or foreign country)	Day Year
Residence Address Street or R. R. City County State	Conducing Country)
9.0 804206 ano, In.	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 Dutnorn	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment Dhrisan
Usual Occupation Material Planner	01976
Date of birth verified by: Birth Cert. Judicial Decree	A A A A A A A A A A A A A A A A A A A
Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation (fleek Superst
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? Note: 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?	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? 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
7. Are you now under the influence of a narcotic drug? No W 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 No	5. Are you now under the influence of intoxicating liquor? No F Yes
10. Do you have minor children from one or more former marriages? No Yes	6. Are you now under the inAppence of a narcotic drug? No WYes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father Randolph C. Naniel
Name Age Address	Residence of father (if deceased so state) & # 2 Coalesvelle
maria 10 5 Textony	Occupation of father Allita Race of father
	Birthplace of father (State or foreign country) Marion
(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.
their support? Yes, No	Residence of mother (if deceased so state) Wellands
11. Full name of father Welbert The Universal	Occupation of mother
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father (State or famign country) MOLOGON	State of Indiana, Sss: 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 with that a Balay	County of HENDRICKS
Residence of mother (if deceased so state) ##/ Contesvello	Signed January Jacob Land
Occupation of mother Asusewife Race of mother	New Address V. D. Baye 206 Will Star 40105
Birthplace of mother (State or foreign country) Margan Co.	Subscribed and sworn to before me this
State of Indiana, County of	Glen In Harvey Glerk HENDRICKS Circuit Court
Signed Maurice D. Hover and	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address P.O. Box 206 Amo, Ind.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworn to before the this 17 day of May 1976	we, the parents, of this applicant nevers signs, state facts which render the consent of the other parent unnecessary
Alen M. Harvey Clerk HENDRICKS Circuit Court	signs, state facts which remer the control
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,	Father
County ofHENDRICKS.	Signed Mother
Signed Father Mother	Signed
Signed Subscribed and sworn to before me this day of 19	Subscribed and sworn to before me the Clerk
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	RT. A marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	ourt by written order issued
in authorizes and directs the issuance of	of a marriage house
PRIACE LICENS	HENDRICKO HENDRICKO
indiana dated the day of	Toan I Gould
D flod in mu	Office, of
Maurice D. Unversaw Be it further remembered, the following marriage certificate was filed in my of the second se	Amo , County of Hendricks,
I,	of Hendricks County, State of Indiana
one thousand nine hundred and 76 State of Indiana, Groom Maurice Unversaw and, Bride Joan J. Gould were by me united in the state of th	Johnson County, State of HENDRICKS
and, Bride Joan J. Gould 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 County.	76
Dated this 21st May , 19	Signed Christian Minister
	Official Designation
Filed and recorded in accordance with the laws of the State of Indiana this	Hen M. Harvelf Clerk
recorded in accordance with the laws of the Bound of	Signed Circuit Court

Form Prescribed By Indiana State Board of APPLICATION FOR M	INDIANA IARRIAGE LICENSE File
Health under Authority Chap. 126, Ind. Acts 1905 HENDRICK	5-11-1/
MALE Medical Examination Report Dated 5-6-76	Name of Physician Price Clarke M. To.
Name of Physician	ement-Whoever procures the issuance of a license to marry by any false statement, representa-
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1900 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) Residence Address Street of R. K. City County State 23 4	Residence Address Street or B. R. City County State 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 Muchanic	Color or Race White Negro Other (specify)
Date of birth verified by:	Usual Occupation Date of birth verified by: Birth Cert. Judicial Decree Other (Specify)
home for indigent persons? If answer to 3 is "yes" has the cause of such condition been removed? No Yes Yes Yes Yes	Of Unsound Mind?
4. Are you afflicted with a transmissible disease? No ☑ Yes ☐ No ☑ Yes ☐ 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 Yes 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
9. Are you likely to so continue? Yes No \(\subseteq \) 10. Do you have minor children from one or more former marriages? No \(\subseteq \) Yes \(\subseteq \)	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 Malla Timber March
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 (c) Are you complying with any court order or orders is gued for	8. Full maiden name of mother AMALA
their support? 11. Full name of father	Occupation of mother Additional Race of Mother Race of
Residence of father (if deceased so state) Occupation of father (State or foreign country) Race of father (State or foreign country)	Birthplace of mother (State or foreign country) State of Indiana, County of HENDRICKS I depose and state the information given in this application is true and correct.
Residence of mother (if deceased so state) Occupation of mother Bull Race of mother Race of mother Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given	New Address 2346 BRUAND R. Fidols. Subscribed and sworn to before me this. 12 day of May 17, 1926.
County of HENDRICKS sy in this application is true and correct. Signed Kanala E Language	Circuit Court
New Address 2346 Bulling Aug	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of M, 19 ClerkHENDRICKS 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 OF 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	
- Constitution of the content university	
State of Indiana,	State of Indiana, County ofHENDRICKS
County of HENDRICKS ss:	Signed Father
Signed Father	Signed Mother
Signed	Subscribed and sworn to before me this day of , 19
	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County Co	T. A marriage license having been refused to the above named parties, the purt by written order issued
in authorizes and directs the issuance of	of a marriage license to the above named parties
RETURN OF MARRIAGE LICENS	E AND MARRIAGE CERTIFICATION
Be it further remembered, the following marriage certificate was filed in my of the following marriage	nse issued by the clerk of the HENDRICKS Circuit Court 19.7 Gauthorizing the joining together as husband and wife I is a Vonne Tucker office, to-wit: hereby certify that on the 22nd day of May Danyille Hondricks
one thousand nine hundred and	hereby certify that on the 22nd day of May at Danville , County of Hendricks , of Marion County, State of Indiana
State of Indiana, Groom Donald Eugene Farmer III	County of Hendi ICRS
Dated thisday ofday of	
	Signed John P. Roff
Filed and recorded in accordance with the laws of the State of Indiana this	1st day of T
State Chart	Signed Glen M. Harvelf Clerk
	HENDRICKS Circuit Court

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 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-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 Muelin Color or Race Negro Other (specify)... Date of birth verified by Birth Cert. Judicial Decree Usual Occupation Other (Specify) autician Are you now or have you been adjudged, diagnosed or considered as:
 An Imbectle?
 Date of birth verified by: Birth Cert. | Judicial Decree Yes | Yes | Of Unsound Mind? 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: No Yes An Imbecile? No Yes | If answer to I is "yes" has the cause of such condition been removed? Yes 🗌 No 🗆 Of Unsound Mind? No Yes Are you afflicted with a transmissible disease? Yes [No 🛛 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 🗌 you now under the influence of intoxicating liquor? Yes 🗌 3. Are you afflicted with a transmissible disease? No Yes 1. Are you now under the influence of a narcotic drug? Yes 🗌 No D 4. Are you related to the groom closer than second cousin? No Yes 🗆 Are you able to support a family ? Yes 🛛 / No 🗆 9. Are you likely to so continue ? Yes 🛛 No 🗆 No Yes 🗆 10. Do you have minor children from one or more former marriages? No D Yes D No Y Yes (If yes, answer questions a, b, c) (a) List their full names, ages and address Claiston Crail Service Birthplace of father (State or foreign country) 8. Full maiden name of mother. Wartha 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? Residence of mother (if deceased so state). Yes No | Occupation of mother Land Alaman Race of mother will I depose and state the information given in this application is true and correct. County of Birthplace of mother (State or foreign country) Sidinal sa: I depose and state the information given in this application is true and correct. ... Clerk HENDRICKS Signed Richard W Vollran CONSENT OF PARENTS, PARENT OR GUARDIAN New Address 2 John ave New Carlist Ohio 45344 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 May signs, state facts which render the consent of the other parent unnecessary. Sun III. Farmy Clerk 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.... HENDRICKS County of State of Indiana. County of HENDRICKS Father 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. HENDRICKSCounty..... RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court Be It Remembered, there was filed in my office a marriage license issued by the clerk of the.... of Indiana dated the 24 day of Janet Fern Alexander

Be it further remembered, the following souther as husband and wife in my office, to-wit: hereby certify that on the 12th day of June, Be it further remembered, the following marriage certificate was filed in my office, to-wit: at 2:30 P.M. , County of Hendricks , Warren H. Robbins Clark County, State of Ohio one thousand nine hundred and 76 State of Indiana, Groom Richard W. Vollrath Hendricks County, State of Indiana, Signed Warren H. Robbins , 19...76. Christian Minister Dated this 12th Filed and recorded in accordance with the laws of the State of Indiana this 6th day of July ,19 76 Official Designation

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

...Circuit Court

... HENDRICKS.

May 17, 197 Date of Application

, ()	FEMALE 5-12-76
MALE Medical Examination Report Dated 5/10/76	Medical Examination Report Dated
P Shimmed Fageto MX.	Name of Physician R. Behrrell Roger Tr. D.
Name of Physician / Spurally 1997	tement.—Whoever procures the issuance of a license to marry by any false statement, represent-
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "Faise station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	tement—Whoever procures the issuance of a license to marry by any false statement, representa-
MALE APPLICANT	FEMALE APPLICANT
Name First Middle Last	Name Hirst Middle Stanley
Leslie Per Year	Date of Birth Month Day Year
Date of Birth Amonth Day 12 1952	Place of Birth (State-or foreign country)
Place of Birth (State or foreign country)	nethodest Hosp Judgles, Marion Co. In
Residence Address Street or R. R. City County State	Residence Address Street or R. R. County State
601 William wor , Samenare,	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: Never Maritad Status of Freedom Maritages.
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Color or Race White E Regio E	Color or Race White Negro Other (specify)
Usual Occupation Cathynator	6 T A A
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Alutent
Other (Specify)	Date of birth verified by: Birth Cert. Judicial Decree Sept of Tubbic
An Imbedie? Of Unsound Mind? No D Yes Yes Yes Yes	Other (Specify) As III # 12782
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?	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?	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 able to support a family? 8. Are you able to support a family? Yes \(\text{No} \)	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? Now 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 Chale andrew Bladley
Name Age Address	Residence of father (if deceased so state) 83 Eglil 20. Plaint
	Occupation of father Ele Zully Race of father W
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother Deargin Lee mcDuffe
(b) Are you supporting or contributing to their support? Yes No	835 1. 1 05 00
(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 aux Malent Dispersion	Occupation of mother Race of mother Race of mother
Residence of father (if deceased so state) And All States Total And I would be a state of the st	Birthplace of mother (State or foreign country)
Occupation of father Self Race of father Market	
Birthplace of father (State or foreign country)	State of Indiana, Sa: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Dany datasathe Dans	County of HENDRICKS in this application is true and correct.
Residence of mother (if deceased so state)	Signed Marsha U. Stanley
Occupation of mother Manuscaka Race of mother While	New Address 601 arthur Rue. Scottdale
Birthplace of mother (State or foreign country)	12 2 PR
State of Indiana	Subscribed and sworn to before me this day of 19.76
County of HENDRICKS I depose and state the information given in this application is true and correct.	Ellen M. Havey Gerk HENDRICKS Circuit Court
Signed Alle L. Wangell	
New Address	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this. 20 day of 1976	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Alle D HARMY CIERKHENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN	The state of the state of the state party of the state of
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	
parent dinecessary.	
	State of Indiana,
State of Indiana,	County ofHENDRICKS
County of HENDRICKS	
SignedFather	SignedFather
Signed	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	T. A marriage license having been refused to the above named parties, the
County	ourt by written and a invad
authorizes and directs the issuance of	of a marriage license to the above named parties
RETURN OF MARRIAGE LICENS	H AND ALL HAND
there was filed in my office a marriage lices	E AND MARRIAGE CERTIFICATE use issued by the clerk of the HENDRICKS Circuit Court
of Indiana dated the 2/ day of	, 19 , authorizing the joining together as husband and wife
Leslie J. Mangell	, 19. , authorizing the joining together as husband and wife
Be it further remembered, the following marriage contifers	ind Marsha 4. Stanley
1, All Marles Noll	hereby certify that on the 22 day of May
one thousand nine hundred and 76	at Bracens here and an aday of Managen
State of Indiana, Groom Leslie J. mon roll	of The tast of the state of the
and, Bride Marska Unn Stanley	at Brasiensburg, County of Sundricks, of The time land County, State of Andrews, County, State of Andrews,
were by me united in marriage as authorized by a marriage.	Henotricas County, State of Andiana.
Dated this 21 day of May, 19.76	
, 19.2.6	Signed Rev Charles Noll
Filed and recorded in a con-	Official Designation Cathalic Priest
Filed and recorded in accordance with the laws of the State of Indiana this	27 day of many
	Signed Glen m Harry Clerk
	CWTh

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE #161

HENDRICK	S County - May 17,1976
MALE Medical Examination Report Dated 5-10-76	FEMALE Date of Application
61	Medical Examination Report Dated 5-10 - 76
Name of Physician	Name of The confidence of the
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 progress at .
MALE APPLICANT	
Name Figat Act Middle A fast	Name First
Date of Birth Month Day Year	Date of Birth Manth Lene (Wilson)
Place of Birth (State or foreign country)	Day Year
Marlingvelle, and.	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 2 Oof 261, Camby
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: News Marital Status
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
	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) book # 6 page 141	Usual Occupation Block's
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes	Date of birth verified by: Dirth Cert. Dudicial Decree
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes Yes	Other (Specify) 466653
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? Yes
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	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? No Yes	5. Are you now under the influence of intoxicating liquor? 6. Are you now under the influence of a narcotic drug? No P Yes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father Llen Eugene Wilson
Name Age Address	Residence of father (if deceased so state) 2 2 Bel 261 Camby
	Occupation of father Joal & Wil Mg & Rate of father
	Birthplace of father (State or foreign country) Indianapolis In
(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? Yes No	Residence of mother (if deceased so state) The Boy Land
11. Full name of father almodge flowers For	Occupation of mother Coy - Man Admirac of mother.
Residence of father (15 deceased so state) The State School	Birthplace of mother (State or foreign country) Indianapalia)
Occupation of father January Fifth Higher of Fighter of Finter Res	State of Indiana, 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
Residence of mother (if deceased so state) L 4 / Box 288 Camby	Signed A NO Soc POR W COOK
Occupation of mother Housewife Race of mother	New Address 4717 Chantelly N.
Birthplace of mother (State or foreign country) Buch Grove Ind.	Subscribed and sworn to before me this day of 19.
State of Indiana. County of HENDRICKS as: I depose and state the information given in this application is true and correct.	Dlen M. Harvey Clerk HENDRICKS Circuit Court
Signed V albert W. Hay	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 4717 Chantelly PA	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworn to before me this 17 day of May 1976	We, the parents, of this applicant account of the other parent unnecessarysigns, state facts which render the consent of the other parent unnecessary
The The Through Clerk HENDRICKS Circuit Court	signs, state lacts which television
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 lace which render the consent of the other parent	
	State of Indiana, County of
State of Indiana,	Signed Father
County of HENDRICKS	Signed Mother
Signed	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to Clerk
Clark	1 to the shove 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 and filed burt by written order issued
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	ourt by written order issued
in authorizes and directs the issuance of	of a marriage license to the district the district the marriage license to the district the marriage license to the district the marriage license to the district the dist
Be It Remembered, there was filed in my office a marriage licer	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court nse issued by the clerk of the nse issued by the clerk of the nse issued by the clerk of the No. 19.76., authorizing the joining together as husband and wife
ady of	· No Kall Little
Be it further remembered, the following marriage certificate was filed in my of I, One them.	office, to-wit: 21 day of may
one thousand nine hundred and	hereby certify that the Country of Marion,
one thousand nine hundred and 76	at Hendricks County, State of Indiana
State of Indiana, Groom Albert It. Lafe	at Cambel County of Marion, at Cambel County, State of Indiana, of Hendricks County, State of Indiana, that purpose by the Clerk of the Circuit Court of HENDRICKS
and, Bride Destile Gene Julian of were by me united in marriage as authorized by a marriage license issued for County.	that surpose by the Clerk of the Circuit Court of
or me united in marriage as authorized by a marriage accesse	
Dated this	Signed
aay of	Official Designation Clergyman June , 1976.
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation June 1976 7 day of Signed Stlen M Starweif Circuit Court HENDRICKS
recorded in accordance with the laws of the State of	Signed Stless M Samuel Circuit Court HENDRICKS



STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

Form Prescribed By Indiana State Board of APPLICATION FOR	MARRIAGE LICENSE File BR 37
Health under Authority Chap. 126, Ind. Acts 1905 HENDRIC	
	FEMALE Medical Examination Report Dated 5-14-16
MALE Medical Examination Report Dated 5-14-76	Name of Physician James Black
(3/22 P.	
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False s ion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	statement—Whoever procures the issuance of a license to marry by any false statement, represent
MALE 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 of foreign country)
Place of Birth (State or foreign country)	Residence Address Street or R. R. City County State
Residence Address Street or R. R. Brownshing skuducks In	Maiden Name if Different Indels Marion In
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)	The state of the s
Usual Occupation Student - Selesman	Color of Race
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Unemployed - Student
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 Y	1. Are you now or have you been adjudged, diagnosed or considered as:
 Are you under guardianship as a person of dissound limit. Are you now or have you been within five (5) years an inmate of a county asylum or No ✓ Yes □ home for indigent persons? 	An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed?	Of Unsound Mind? No E You 2. Are you under guardianship as a person of unsound mind? No E You
4. Are you afflicted with a transmission 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? 3. Are you afflicted with a transmissible disease? No F
6. 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 amicted with a transmission disease. 4. Are you related to the groom closer than second cousin? No ✓ You
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? 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 Selbert Meade
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Manual Race of father Was
	4 · · · · · · · · · · · · · · · · · · ·
(b) Are you supporting or contributing to their support? Yes □ No □	8. Full maiden name of mounts
(c) Are you complying with any court order or orders issued for their support? Yes No	Occupation of mother Blanthard Race of mother D
11. Full name of father flower	Birthplace of mother (State or foreign country) Kunturky
Residence of father (if deceased so state) All Race of father All All All All Race of father All All All All All All All All All Al	Birthplace of mother (otate of total)
Birthplace of father (State or foreign country) Claw fordsvilly ye	State of Indiana, County ofHENDRICKS
12. Full maiden name of mother how Jane William	County of Man and and and and and and and and and a
Residence of mother (if deceased so state)	Signed, X Dh. Miech Bland and 3
Occupation of mothers of contract of the state of mothers of the state of mothers of the state o	New Address Manual Transfer Tr
Birthplace of mother (State or foreign country) The Asset 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.	
Signed of Signed And Signed Si	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address (1) Tayle Nauto (1) 1976 Subscribed and sworn to before me this day of (1) 1976	We, the parents, of this applicant hereby give consent for this marriage. If only one p
GlerkHENDRICKS Circuit Cour	
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 ofHENDRICKS
County of HENDRICKS Sss:	Signed
Signed Father	C!3
Signed Mother Subscribed and sworn to before me this day of 19	
Cler	k
COMPLETE IF MAPPIACE LICENSE ISSUED BY OPPORT OF THE	
HENDRICKS County	OURT. A marriage license having been refused to the above named partiesCourt by written order issuedand
in authorizes and directs the issuan	court by written order issued.
tellitelle, there was filed in my office a marriage	CNSE AND MARRIAGE CERTIFICATE license issued by the clerk of the HENDRICKS Circuit
of Indiana dated the day of VI) as	to husband and
Be it further remembered, the following marriage certificate was fled in	and Jane a Meade
A) secretaristic constitution of the constitut	· · · · · · · · · · · · · · · · · · ·
one thousand nine hundred and 76,	at Strace W. methodist Phanels Marion
State of Indiana, Groom Jaseph Kent Hedges	at Grace W. Methodist Cherch County of Marion County, State of Indiana
//	
County a marriage license issued	for that purpose by the Clerk of the Cinnit Court of HENDRICKS
Dated this 22 day of Mary, 19.	76
, 19.	Signed a state () Salfton
Filed and recorded in accordance with the laws of the Control	and a second of the second
and the laws of the State of Indiana thi	8. 24 day of May, 19.76.
	Signed Illen M Tyarrell
	HENDRICKS Circuit

...Clerk

...Circuit Court

HENDRICKS.

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

Form Prescribed By Indiana State Board of APPLICATION	INDIANA
Indiana State Board of Health under Authority Chap. 126, Ind. Acts 1995	MARRIAGE LICENSE No. 163
HENDRICK	S County File
MALE 5/11/76	- May 17 1976
Medical Examination Report Dated 5/11/76	FEMALE Medical Examination Report Dated 5/11/76
Name of Physician Mendeum M.	N- 1 0 1 1
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indians Acts 1905 prescribes "Palse state tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	tement Whoever processed in the Milliam Md.
MALE APPLICANT	
Name Part W. Canal	Name / First
Date of Birth Month Day 1 1952	Date of Birth Maddle Green Last
Place of Birthy (State or torvign country) Baorel	Place of Birth (State of foreign country) Day Year 1950
Residence Address Street or R. R. City County State	Residence Address Street or R. R. C. Marien Sal
Previous Marital Status Never Married Number of Previous Marriages	Maiden Name if Different August State
Last Marriage Ended By Death Divorce Annulment	When the property of the party
	Previous Marital Status: Never Married Number of Previous Marriages
(3007 54 201	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by Birth Cegs. Dudicial Decree	Color or Race White Negro Other (specify)
Other (Specity) Schittic Survey # 3037	Usual Occupation Leacher
1. Are you now or have you been adjudged, diagnosed or considered as: An imberile? No 2 Yes	Date of birth verified by: Birth Cert. Undicial Decree
Of Unsound Mind: No Yes 2. Are you under guardianship as a person of unsound mind? No Yes Yes	1. Are you now or have you been edited the State # 3380
1. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? No D Yes No D Yes	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes
If answer to 1 is "yes" has the cause of such condition been removed? No Yes L Are you afflicted with a transmissible disease? No Yes	Of Unsound Mind? No. Yes
5. Are you related to the bride closer than second cousin? No P Yes 6. Are you now under the influence of intexticating liquor? No P Yes	2. Are you under guardianship as a person of unsound mind? No Yes No Yes No Yes Yes No Yes
7. Are you now under the influence of a narcotic drug? No Yes	4. Are you related to the groom closer than second cousin? No Yes
3. Are you likely to so continue! Yes No	5. Are you now under the influence of intoxicating liquor? No.
10. Do you have minor children from one or more former marriages? No Yes	6. Are you now under the influence of a narcotic drug?
(a) List their full names, ages and addresses Name Age Address	7. Full name of father
	Occupation of father Schollen and Marie Race of father Schollen
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother & lovency Muffing M- King
(c) Are you complying with any court order or orders issued for Yes No	Residence of mother (if deceased so state)
11. Pull name of tathet a Market Compared Sale of Compare	Occupation of mother Race of mother
Occupation of father 11 degeneral so states	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country)	State of Indiana. I depose and state the information given in this application is true and correct.
12. Pull maiden name of mother DMM Belly Michethern	County of HENDRICKS
Residence of mother (if deceased so state)	Signed Signed Jenn apt 3
Occupation of mother State or foreign country) All Miles	New Address day of May 19 16
State of Indiana.	Subscribed and sworn to better the Marketty Clerk HENDRICKS Circuit Court
County of HENDRICKS and in this application is true and correct.	- Article - Arti
Now Addrona 2 5 2 5 Tlakes	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
File M. Christia 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	
tribur the consent of the other parent distributions	
	State of Indiana, County of HENDRICKS ss:
State of Indiana. County of	SignedFather
County of MENDRICKS Signed Father	Signed Mother
Signed Mother	Subscribed and sworn to before me thisday ofday
Subscribed and sworn to before me this day of	Clerk
The second secon	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
in County and directs the issuance of	f a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSI	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage licen	se issued by the clerk of the HENDRICKS Circuit Court se issued by the clerk of the joining together as husband and wife
Indiana dated the day of day	(nalla / following
Paris de la company of the state of the stat	fice, to-wit.
1, Prank Burn	hereby certify that on the County of Hendricks,
One thousand	at County State of Sideana
one thousand nine hundred and State of Indiana, Groom Asbert W. E. agers and, Bride and J. Breenlee of were him	Hendricks County, State of HENDRICKS
were by me writed in	that surpose by the Clerk of the Circuit
Country me united in marriage as duthorized by a marriage means	
Dated this I day of May , 19 76. Signed Frank Junn. Official Designation Minister. 19 76.	

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS Cour

LICEINDE	File
nty	5-17-76 Date of Application
E	6-12-76

THEORE	Date of Application
	FEMALE (12 7/
MALE 5-12-76	Medical Examination Report Dated 6-12-76
Medical Examination Report Dated	Name of Physician Ravid M. Tradley
Name of Physician Waved M. Tradley	
1005 proscribes "False sta	tement—Whoever procures the issuance of a license to marry by any false statement, representa-
tion or pretense shall be lined in any sum nos	FEMALE APPLICANT
MALE APPLICANT	Name 1 First . Middle 1 1. Last
Name First 6 Middle	Date of Birth Month Day Year Year
Date of Birth Month Day Year	Date of Birth 7 1957
July 30 1936	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	CR 2 Box 361 Klfd. and
- 5409 1 arxwood Co. Shaff	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	C. C
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Color or Race White W Negro Other (specify)	Color or Race White Negro Other (specify)
Usual Occupation Student	Color or Race White P Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Office
Other (Specify) Culle Union Tropia	Date of birth verified by: Birth Cert. Judicial Decree
1. Are you now or have you been adjudged, diagnosed or considered as: No Yes Yes	Other (Specify) Witham Memorial Hospital
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 asylum 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?	2. Are you under guardianship as a person of unsound mind? No FYes
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 F 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?	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 Ves Ves Ves Ves Ves Ves Ves Ves Ves V	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 Suman J. Phillips
(a) List their full names, ages and addresses Name Age Address	Residence of father (if declased so state) L 2 Bot 361 Pufd.
Name Age Address	Occupation of father Little A Race of father
	A bo
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother of autalita Courter
(c) Are you complying with any court order or orders issued for	Residence of mother (if deceased so state) 2 Bof 36) Tifd
11. Full name of father Mulip Cughys Missen	Occupation of mother Bus Mriver Race of mother
Residence of father (if deceased so state) 60 Stilling hills ker	(1) 1
(A) A during hilling	Birthplace of mother (State or foreign country) 13655711119670
Occupation of father August Rate of father Rate of father	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. Tay fan Sheels	Brania Turas / h. Olion
Residence of mother (if deceased so state)	Signed On O Not 4
Occupation of mother Housewife Race of mother	New Address 577 Fall Europe Of Garage
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of May 19.7%
State of Indiana, County of HENDRICKS Ses: I depose and state the information given in this application is true and correct.	Elen M. Harvey Clerk HENDRICKS Circuit Court
	F. F. D. S. N
	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 5505 Harkwood CT apt 9	
Subscribed and sworn to before me this day of 71/04, 19/0	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Men 11). Harvey ClerkHENDRICKS 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 ofHENDRICKS
County of HENDRICKS	Signed Father
Signed Father	
Signed	Sig ned.
Subscribed and sworn to before me this	Subscribed and sworn to before me thisday of19
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY CORD	
HENDRICKS COUNTY ISSUED BY ORDER OF COUNTY	RT. A marriage license having been refused to the above named parties, the
County	ourt by written order issued
inauthorizes and directs the issuance	of a marriage license to the above named parties.
RETURN OF MARRIAGE LICENS	TE AND WARD
and the distriction of the state of the stat	D /
Re it further remembered the fill gene Melson	and Bonnil Lynn A hellips
I Her. Breeze A Breeze A Breeze as filed in my	office, to-wit:
	hand a like at
State of L. C.	at Danville
State of Indiana, Groom Jersone Gugene Nelson	at Danville , County of Lindricks, 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 22 day of may, 1976	6
	Staned State 16 17 have
Filed and recorded in accordance with the land	
Filed and recorded in accordance with the laws of the State of Indiana this	19 day of July 1976 Church
	Signed Glen m Harvey Clerk
	HENDRICKS Circuit Court

Form Prescribed By

STATE OF INDIANA

Indiana State Authority Health under Authority Chap. 126, Ind. Acts 1905 HEND HEND	OR MARRIAGE LICENSE DRICKS File
	County May 17 1971
MALE Medical Examination Report Dated 5-6-76	FEMALE Date of Application
Name of Physician William Wugan, M. D.	Medical Examination Report Dated 5-6-76 Name of Physician (1) 100 (2)
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "Fa	Name of Physician William Taugam M.R. lse 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, represents.
Name First Middle D Last	Name FEMALE APPLICANT
Date of Birth Month Day Year	First Middle
Place of Birth (State or foreign country)	Date of Birth Month Joan Man Howen
Street or R. R. City	Place of Birth (State or foreign country) 1957
Residence Address Box 103 Claryton, In	Residence Address Street or R. R. City Country
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Claryon, In
Last Marriage Ended By: Death Divorce Annulment	
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
	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
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Of Usesund Mind?	Date of birth verified by: Birth Cert. Judicial Decree
No Wyes	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:
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	2. Are you under guardianship as a person of property of the second of t
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 Yes No No	4. Are you related to the groom closer than and
9. Are you likely to so continue?	
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 And Company of the Advisor
Address	Residence of father (if deceased so state) Indianaple lia State
	Occupation of father Unknown Race of father Who
	8. Full maiden name of mother. Authorise & Baldwin
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for	- Clauter A
their support? Yes No No.	Occupation of mother Race of mother Wh
Residence of father (if deceased so state).	Birthplace of mother (State or foreign country)
Occupation of father Wellt willer Race of father with	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country)	State of Indiana, State of Indiana, I depose and state the information given in this application is true and correct.
2. Full maiden name of mother Carolina Sue Reeves	County of
Residence of mother (if deceased so state)	Signed Constance Joans M. Journ
Occupation of mother ASALLY Race of mother Wh	New Address Claytone One
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this 17 day of 1976.
tate of Indiana, County of	en Slew M. Henvelly Clerk HENDRICKS Circuit Court
Signed allert Lee English	
New Address Clayton	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
Slen / Hawelf Clerk HENDRICKS Circuit Cou	rt signs, state facts which render the consent of the other parent unnecessary
ONSENT OF PARENTS, PARENT OR GUARDIAN	
We, the parents, of this applicant hereby give consent for this marriage. If only one parents	
gns, state facts which render the consent of the other parent unnecessary	
	State of Indiana,
tate of Indiana,	County of HENDRICKS
ounty ofHENDRICKS.	SignedFather
Signed Father	
Signed Mother	Cuberibed and sworn to before me this
abscribed and sworn to before me thisday of	
Cler	having been refused to the above named parties, the
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF CO	OURT. A marriage license having been refused to the above named parties, the
authorizes and directs the issuan	ce of a marriage
RETURN OF MARRIAGE LICE	INSE AND MARRIAGE CERTIFICATE icense issued by the clerk of the
Be It Remembered, there was filed in my office a marriage	, 19
e it further remembered, the following marriage certificate was filed in n	and Constance Joann McGowen y office, to-wit: hereby certify that on the 28th day of May hereby certify that on the Church Morgan
oner F. Henderson	mahar Christian Ullul Chunty of
thousand nine hundred and	Handricks County, State of
Indiana Groom Albeit Lee Hills	County, State of
R. Bride Constance Joann McGowen of	of Hendricks County, State of Indiana, Hendricks Hendricks HENDRICKS for that purpose by the Clerk of the Circuit Court of HENDRICKS
nunty united in marriage as authorized by a marriage license tools	76
ated this day of May , 19.	76 Signed Homer E. Henderson Pastor
and of	Official Designation
iled and many this	2 day of The rough Clerk
recorded in accordance with the laws of the State of Indiana that	Signed Homer E. Henderson Pastor Official Designation June , 19 76 day of June , 19 Clerk Signed Henderson Circuit Court
	MENURUCO

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

File			
Man	18	19	7

....Circuit Court

HENDRICKS.

Chap. 126, Ind. Acts 1905	County Date of Application
P/	FEMALE 5-17-76
MALE Medical Examination Report Dated 5-17-76	Name of Physician Price Clark M. D.
Name of Physician Price Clarke, 711, tt.	
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, M Last
Name First Made allen	Date of Birth Month Day Year
Date of Birth Month Day Year 1956	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	behanon, In.
Residence Address, Street or R. R. City County State	Residence Address Box 43, North Salem In
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Muroso aide
Other (Specify)	Date of birth verified by: Birth 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 asylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No 5 Yes 1
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 🗆	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? No Ves
7. Are you now under the influence of a narcotic drug? 8. Are you able to support a family? Yes No	4. Are you related to the groom closer than second cousin?
9. Are you likely to so continue? Yes No	 Are you now under the influence of intoxicating liquor? No ☐ Yes ☐ 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	6. Are you now under the influence of a narcotic drug? No Yes
Name Age Address	Residence of father (if deceased so state) 1011/ Salem On
	Occupation of father Atol Clark Race of father Wh
, , , , , , , , , , , , , , , , , , , ,	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? Yes No	Residence of mother (if deceased so state)
11. Full name of father The hold of the ho	Occupation of mother for Soldblade Soldblade Book Race of mother Soldblade Soldblade Book Race of mother B
Occupation of father Allasma Race of father Wh	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS as: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Massage Lynghatt	County of
Residence of mother (if deceased so state) A.A.M. Holder Garage	Signed Ra Mold E 2000th
Occupation of mother	New Address 1/95 Lincoln St. aptille Finnille
State of Indiana, laborate of Information given	Subscribed and sworn to before me this day of A Casa, 19 76
County of HENDRICKS in this application is true and correct.	When HENDRICKS Circuit Court
New Address 1/95 Lycoln St. get D. 2 Danville In	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
Alle M. Harvey ClerkHENDRICKS 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	
ogus, state facts which render the consent of the other parent unnecessary.	
	State of Indiana,
State of Indiana, County ofHENDRICKS	County ofHENDRICKS
Signed Father	Signed Father
Father Signed Mother	Signed Mother
Subscribed and sworn to before me this	Subscribed and sworn to before me thisday of19
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	ourt by written order issued and filed
in authorizes and directs the issuance of	f a marriage license to the above named parties.
RETURN OF MARRIAGE LICENS	T AND THE PERSON OF THE PERSON
of Indiana dated the	ase issued by the clerk of the HENDRICKS Circuit Court
Reit further remembered the	nse issued by the clerk of the HENDRICKS Circuit Court 19.76, authorizing the joining together as husband and wife and Ranell Flaine Gossett ffice, to-wit:
I, Earl C. Davis RD FAR.	ffice, to-wit:
one thousand nine hundred and 76	hereby certify that on the 29th day of May
State of Indiana, Groom Kevin Lee Allon	at of the Salem Christian Chucoatty of Hendricks
and, Bride RaNell Elaine Gossett of	of Hendricks County, State of Indiana Hendricks County, State of Indiana
were by me united in marriage as authorized by a marriage license issued for	that murrous by the Claim and County, State of Indiana
day of May	76
, 19	Signed Earl C. Davis, BD FAPC
Filed and recorded in accordance with the terms	Signed Earl C. Davis, BD, FAPC Official Designation Pastor-Counselor day of June, 19 76 Signed Llen M Harvey Clerk
the laws of the State of Indiana this	day of June 19 76
	Signed Slen m Harvey Clerk

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 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, reprint or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". FEMALE APPLICANT Date of Birth Place of Birth (State or foreign country) Place of Birth (State or Previous Marital Status: Never Married Number of Previous Marriager Death Divorce Annulment Last Marriage Ended By : Previous Marital Status: Nevel Married | Number of Previous Marriages White Negro Other (specify). Color or Race Last Marriage Ended By: Death Divorce Annulment Usual Occupation White Negro Other (specify). Date of birth verified by : Birth Cert. Judicial Decree Usual Occupation BOther (Specify) William Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile? Date of birth verified by:

Birth Cert.

Judicial Decree Yes | Yes | Of Unsound Mind? Other (Specify) 2. Are you under guardianship as a person of unsound mind? No D 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 No Yes An Imbecile? for indigent persons No P 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 🗌 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 🗗 Yes 🗌 No 19 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 D Yes 🗌 4. Are you related to the groom closer than second cousin? 8. Are you able to support a family? No 🖯 Yes D No 🗆 9. Are you likely to so continue? 5. Are you now under the influence of intoxicating liquor? Yes 🛛 No 🗆 No Yes | 10. Do you have minor children from one or more former marriages? No B Yes 🗌 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). (b) Are you supporting or contributing to their support? Yes 🗌 No 🗆 (c) Are you complying with any court order or orders issued for their support? Yes 🗌 No 🗆 Residence of father (if deceased so state) Birthplace of mother (State or foreign country). Birthplace of father (State or focaign country) County of care Birthplace of mother (State or foreign country) State of Indiana Clerk HENDRICKS 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. signs, state facts which render the consent of the other parent unnecessary. Clerk 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, Father County of HENDRICKS 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, 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..... ..., 19.76, authorizing the joining together as husband and wife Debra Jean Stephenson of Indiana dated the... 24 Donald Gene McKinney ...and.... Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the 28th day of... Indianapolis , County of Marion Rev. Robert S. Medcalf one thousand nine hundred and..... Hendricks Hendricks State of Indiana, Groom. Donald Gene McKinner .. County, State of ebra Jean Stephenson 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 Rev Robert S. Medcalf Dated this. 28th Ordained Minister Official Designation ... Filed and recorded in accordance with the laws of the State of Indiana this...

Dated this ..

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

140				
File				
	m	,	10	19

Health under Authority Chap. 126, Ind. Acts 1905 HENDRICI	County Date of Application
	FEMALE 2
MALE Medical Examination Report Dated Male Medical Examination Report Dated	Medical Examination Report Dated Name of Physician A Control of Physician
Name of Physician David 6. Dragged	00
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, repr
MALE APPLICANT	FEMALE APPLICANT
Name First, Middle 1 C Last	Name Girst Middle Barron
Date of Birth Month Day Year	Date of Birth Month Day (956
Place of Birth (State or foreign country) V. T h	Place of Birth (State or foreign country)
Residence Address Street or R. (R. City County) State	Residence Address - O Street of H. R. City County Sta
5832 Mooresville Rd. apt 74, Indiampile	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 Computer aparator	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree 12-49-56-387	Usual Occupation Key Purch Operdor
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?	Other (Specify)
2. Are you under guardianship as a person of unsound mind? No Yes 3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No
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	2. Are you under guardianship as a person of unsound mind?
5. Are you related to the bride closer than second cousin? 6. Are you now under the influence of intoxicating liquor? No Yes 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 \(\sigma \) No \(\sigma \) Yes \(\sigma \)	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? 7. Full name of father the later to Bayron
(a) List their full names, ages and addresses Name Age Address	Residence of father (if deceased so state) 70 Price Rd Plan
	Occupation of father 2 Brend FMCRace of father W
	Birthplace of father (State or foreign country) Non Derson Ry
(b) Are you supporting or contributing to their support? Yes ☐ No ☐	8. Full maiden name of mother Wind Lee Janker
(c) Are you complying with any court order or orders issued for their support? Yes \sum No \sum	Residence of mother (if deceased so state), 70 Price Rd
11. Full name of father I fama Berrard Finance	Occupation of mother House wife Race of mother W
Residence of father (if deceased so state) 7555 E 52 15t July	Birthplace of mother (State or foreign country)
Occupation of father Schweitzen Dun Race of father W	State of Indiana,
Birthplace of father (State or foreign country).	County of
Residence of mother (if deceased so state) 7555 8.53 8 51	Signed Cornie Sue Barron
Occupation of mother House sife Race of mother Cu	New Address 5832
Birthplace of mother (State or foreign country) wet Derney	Subscribed and sworn to before me this 18 day of Than
State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.	Glen In Havey Clerk HENDRICKS Circuit
Signed Thomas Finlan	Clerk DENDALGAS CIFCUI
New Address 5832 hourselle Rd	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
ClerkHENDRICKS 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	
one of the other parent unnecessary	
	State of Indiana,
State of Indiana,	County ofHENDRICKS
County of	Signed
Signed	Signed
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of
Clerk	day of
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County Co	T. A marriage license having been refused to the above named parties
in authorizes and directs the issuance of	with her remitted and the second seco
RETURN OF MAPPIACE LICENSE	
Be It Remembered, there was filed in my office a marriage licen	E AND MARRIAGE CERTIFICATE use issued by the clerk of the HENDRICKS Circuit
of Indiana dated the day of may	19 76 authorizing the initial and and
Be it further remembered, the following marriage certificate a	nd Connie Sue Barron
of Indiana dated the day of May Thomas Finlan Be it further remembered, the following marriage certificate was filed in my of thousand nine hundred and	ffice, to-wit:
State of Indiana, GroomThomas Finlan and, BrideConnie Sue Barron	of Hendricks , County of Hendri
and, Bride	Hendricks County, State of Indiana
were by me united in marriage as authorized by a marriage license issued for Dated this 22nd	that purpose by the Clerk of the Circuit Court of

Signed Dr. Louis Lilly
Official Designation Pastor

1st day of June ,19 76
Signed Hendricks Circuit C

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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICEN

Chap, 126, 1160	County File
MALE 5/13/1	Data # 14 1976
Medical Examination Report Dated 5/13/16	FEMALE Medical Examination Report Dated 5/13/76
Name of Physician	N H KI
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
Name Patrick Middle And Last	Name / First
Date of Birth Month Day Year 1051	Date of Blass
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)
P.R.# 18 BEX 339 Pt, Inaple. In.	Residence Address Street br R. R. City County State
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Manual Daywood S
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Manual III
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages. Last Marriage Ended By: Death Divorce Date of Previous Marriages.
1110-11	Death Divorce Annulment
Usual Occupation Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)
Other (Specify) # 2 2 2	Usual Occupation Study +
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No 2 Yes	Date of birth verified by: Birth Cert. Judicial Decree
Of Unsound Mind? No Yes Yes No Yes No Yes Yes Yes Yes Yes Yes Yes Yes	Other (Specify) # 15274
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 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 quardianchin as a sure of the last
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 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?
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 A ' July Office By
Name Age Address	Residence of father (if deceased so state)
	Occupation of father State or foreign country)
	24hino Caroli 4
(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 of his decorated as stated 1081 E. Charles Rd.
their support?	Occupation of mother. Advantage Race of mother
11. Full name of father Day of State of	P
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country)	State of Indiana, Sa: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother MALLA Rosalie Whalles	County of HENDRICKS
Residence of mother (if deceased so state) Barunsburg &	Signed Lynthia & Patroky
Occupation of mother It melmule Race of mother of	New Address That I have the
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of 19
State of Indiana, County of HENDRICKS I depose and state the information given in this application is true and correct.	Alla D. Mursely Clerk HENDRICKS Circuit Court
Katala Mallinger	
New Address Address Theory	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of 1924, 1976	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Men In Marules Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OF 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	County of HENDRICKS
State of Indiana, County ofHENDRICKS	Signed Saul Jan Father
Signed Father	Signed A atherine Jakes Mother
SignedMother	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me thisday of	Clerk
Clerk	fixed to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	r. A marriage license having been refused to the above and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	art by written order issued
and directs the issuance of	
DETURN OF MARRIAGE LICENSE	AND MILES
Be It Remembered, there was filed in my office a marriage licens	se issued by the country authorizing the joining together as husband and wife
Be It Remembered, there was filed in my office a marriage licens of Indiana dated the day of a	Wathin I Pagerely
Be it further mas filed in my of	fice, to-wit!
of Indiana dated the day of arrive was filed in my office a marriage trees. Be it further remembered, the following marriage certificate was filed in my of the day	ereby certify that on the County of Hendricks
It. Serve themsered, the following marriage certificate the following marriage ficense issued for the following marriage certificate the following marriage file following marri	at Brownswary County, State of Indiana
State of Indiana, Groom & Their B. A. Drollinger	The dricks County, State of Indiana,
und, Bride Synthia La Sagles Ref of the country. Ounty. Groom Salte Ref of the country of the	HENDRICKS HENDRICKS
were by me united in marriage as authorized by a marriage license issued for t	hat purpose of all
County. Dated this 24 day of May, 19 74	signed Rev. Charles nally
day of 11 day	1 a V h a l l C
	Official Designation June ,19 76. 14 day of June ,19 76. Clerk
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Slen M. Harvey Circuit Court
	HENDRICKS

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

Date of Application County HENDRICKS FEMALE

MALE Medical Examination Report Dated 5-13-76	Medical Examination Report Dated
2 11 12000 1/12/20	Name of Physician J. Homas Ofersa.
1005 prescribes "False state	ement-Whoever procures the issuance of a license to marry by any false statement, representa-
tion or pretense shall be liked in any	FEBRUARY ALL DECEMBER
MALE APPLICANT Middle Lagt	Name First Middle Last
Name (May / Momas Syuld	Date of Birth Month Day Year
Date of Birth Month Day // 1957	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	Stilesulle, In.
P. D. BOX 34 Stills wille, St.	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)	The state of the s
Usual Occupation and I ummu	Color or Race
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Clark
☐ Other (Specify)	Date of birth verified by: Birth Cert. Judicial Decree
An Imbecile? No Yes No Yes	Other (Specify)
2. Are you under guardianship as a person of unsound mind.	An Imbecile?
No Yes 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?	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 Yes	3. Are you afflicted with a transmissible disease? No P 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 [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 Billing Billing Miss.
Name Age Address	Residence of father (if deceased so state) A Compation of father A Race of father Wh
	Birthplace of father (State or foreign country) Survices
	8. Full maiden name of mother 1 and 1 for him
(b) Are you supporting or contributing to their support? Yes□ No□	Residence of mother (if deceased so state) Attleautile, In
(c) Are you complying with any court order or orders issued for their support?	11
11. Full name of father Authors 1	Occupation of mother
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Allander Race of father Allander	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.
Residence of mother (if deceased so state)	Signed Janua & Penkulan
Occupation of mother 210712 Race of mother with	New Address Stillegille Ind.
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this / 9 day of 77/au 1926
State of Indiana, State of Indiana, State of Indiana, State of Indiana, ss: I depose and state the information given in this application is true and correct.	Then M. Harrey Clerk HENDRICKS Circuit Court
County of And County	
New Address Stiles VIIIE / N	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me/this. / 9 day of Mass, 1976	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Silen M. Handly ClerkHENDRICKS 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 ofHENDRICKS
County of	Signed Father
SignedFather	Signed
SignedMother	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
HENDRICKS County	Court by written order issued and filed
inauthorizes and directs the issuance	of a marriage license to the above named parties.
RETURN OF MARRIAGE LICENS	SE AND MARRIAGE CERTIFICATE
of Indiana dated the	ense issued by the clerk of the HENDRICKS Circuit Court
David Thomas Gould	, 19.76, authorizing the joining together as husband and wife
David Thomas Gould Be it further remembered, the following marriage certificate was filed in my Robert G. Norton	and Janice Suzanne Pinkerton office, to-wit:
I, Robert G. Norton	hereby certify that on the 5 day of June
one thousand nine hundred and	at Hazelwood County of Hendricks
State of Indiana, Groom David I. Gould Janice S Pinkerton	of Hendricks County State of Indiana
were by me united in manifest in of	office, to-wit: hereby certify that on the 5 day of June at Hazelwood , County of Hendricks of Hendricks County, State of Indiana Hendricks County, State of Indiana About County, State of Indiana
Dated this	76 Robert G Norton
	CODETT G Norton

Signed Minister Official Designation...... Filed and recorded in accordance with the laws of the State of Indiana this....

....Circuit Court

STATE OF INDIANA APPLICATION FOR MARRIAGE LIC

	A CONTRACT NAME AND ADDRESS.
File	The same of the sa
	5-20-71
	Date of Application

HENDRICKS County			
MALE tion Percent Detail	Date of A 11		
Medical Examination Report Dated may 17, 1976	FEMALE Medical Examination Report Dated 5-17,976		
Name of Physician 11 . Cana horn	Nome of Division of the Control 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	tement—Whoever procures the issuance of a license to many		
First Middle	FEMALE APPLICANT		
Name Haymand Cagar Wooden	Name First Middle		
Date of Birth (State or foreign country) Place of Birth (State or foreign country)	Date of Birth Month Day Pramble		
Street or R. R. City Com	Place of Birth (State or foreign country)		
grownstung Grownstung	Residence Address Street or R. R. City County State		
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different 299 Brownshung		
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages		
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment		
Date of birth verified by: Derth Cert. Dudicial Decree	Color or Race White Negro Other (specify)		
Other (Specify) Witham monial Haspital	Usual Occupation Students		
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? Yes Yes	1. Are you now or have you been adjudged, diagnosed or considered and Michigan		
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? 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	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	Are you under guardianship as a person of unsound mind? No Yes 3. Are you afflicted with a transmissible disease? No Pyes Yes Yes No Pyes N		
7. Are you now under the influence of a narcotic drug? 8. Are you able to support a family? Yes No	4. Are you related to the groom closer than second cousin? No Ves		
9. Are you likely to so continue?	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 best Louis Brankle		
Name Age Address	Residence of father (if deceased so state)		
	Occupation of father On Inaffic Contro Race of father		
	8. Full maiden name of mother Cansus Marsianna Haysel		
(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 Amous Matrianna Height Residence of mother (if deceased so state)		
their support? 11. Full name of father Layronal By Wooden	Occupation of mother / Louise wife Race of mother		
Residence of father (if deceased so state).	Birthplace of mother (State or foreign country) Mars hall Michigan		
Occupation of father Buch Sayling Race of father	State of Indiana, State of Indiana, BENDRICKS State of Indiana, I depose and state the information given in this application is true and correct.		
Birthplace of father (State or foreign country) Shalanapolls Sh	County of HENDRICKS in this application is true and correct.		
Residence of mother (if deceased so state)	Signed Barbara a Gramble		
Occupation of mother Ausling (Race of mother	New Address I Selected At Anowersburg		
Birthplace of mother (State or foreign country) & Welleungen Xiliman State of Indiana,	Subscribed and sworn to below		
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Gless Graney Clerk HENDRICKS Circuit Court		
Signed Carroll & Clark	CONSENT OF PARENTS, PARENT OR GUARDIAN		
New Address 20 day of May 1976	We, the parents, of this applicant hereby give consent for this marriage. If only one parent		
Dien M. Harvey 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, ss:		
State of T. IV	County of HENDRICKS		
State of Indiana, County ofHENDRICKS	Signed Signed Mother		
Signed Father	Signed Lanking Life of May 1976		
Signed	Subscribed and sworn to before me this. day of day of Clerk		
Clerk	- And Andrews		
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the		
HENDRICKS County County County	ourt by written order issued		
in Clarks and directs the issuance c	T & MANUEL CATE		
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage licen of the control of t	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court use issued by the clerk of the		
Be It Remembered, there was filed in my office a marriage licer of Indiana dated the 2D day of Malf	, 19 76, authorizing the joining together to		
Paris Sallmond Calque A fled in my o	office, to-wit:		
Be it further remembered, the following magriage certificate was filed in my of the following magriage	hereby certify that on the 5 day of June Hendricks at Breelens being County of Hendricks		
State of Late	County, State of		
and, Bride Brandle 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 County.	6 Post O. Gilday		
Dated this 5 day of June, 19	Signed Sould Of tar St. malacher Cherch		
College Control of the Control of th	Official Designation assoc Carlor, She planting 7 day of June, 19.76. Clerk		
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Sless M. Harrief Circuit Court		
	DEIX COLLAND		

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No.__172 File Bk 37 may 20 1976

HENDRICI	Date of Application
	FEMALE
MALE Medical Examination Report Dated 5-19-76	Medical Examination Report Dated
Name of Physician M. O. Scamadorn	Name of Physician
Name of Thysician	tement—Whoever procures the issuance of a license to marry by any false statement, representa
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1995 prescribes and tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	FEMALE APPLICANT
MALE APPLICANT	First Middle
Name First Middle Last Middle Muches	Cleryl D. Redman
Date of Birth Month Day Year	Date of Birth Month Day Year 20 1943
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)
Residence Address Street or R.Q.R. City County State	Residence Address Street or R. R. City County State
RR#1 Box 180 F Danville Hendricks Ind.	Maiden Name if Different Maiden Name if Different
Previous Marital Status: Never Married Number of Previous Marriages.	alexander
Last Marriage Ended By: Death Divorce Annulment 5-19-76	Previous Marital Status: Never Married Number of Previous Marriages.
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment April 30, 1970
Usual Occupation Bell Delephone	Color or Race White Negro Other (specify)
Date of birth verified by: Dirth Cert. Dudicial Decree	Usual Occupation J. W. P. Computer Services
Other (Specify) # 2999	Date of birth verified by: Birth Cert. Judicial Decree
An Imbecile? Of Unsound Mind? No Yes	Other (Specify) # 5047
2. Are you under guardianship as a person of unsound mind? No Yes 3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No E Yes F
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 🗆	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? No Yes Yes	3. Are you afflicted with a transmissible disease? No Ves
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
10. Do you have minor children from one or more former marriages? No Ves	6. Are you now under the influence of a narcotic drug? No Ves
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father John Clanton Defander
Name Age Address	Residence of father (if deceased so state) Puttolitus Indian
	Occupation of father Lands Race of father W.
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Thank of Thanks Africa
(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 ROSCOE Sughes	Occupation of mother Adultable of Race of mother W.
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Race of father C	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)	Energy D. Kldnan
Occupation of mother RCA Race of mother D	P. 1 But 180F Wangth and
Birthplace of mother (State or foreign country) With Illenois	New Address
State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Subscribed and sworn to before me this day of May 19/k.
(1) (1)	Slen In Sawaf Clerk HENDRICKS Circuit Court
New Address R. R. J. Gay 180 F. Dany, 18 J.	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 2 Part 180F Dans, 18, 1976 Subscribed and sworn to before me this 20 day of Mars 1976	
Llen M. Lawreng ClerkHENDRICKS Circuit Court	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,	State of Indiana,
County of HENDRICKS ss:	County ofHENDRICKS
SignedFather	Signed Father
Signed	SignedMother
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY OPDER OF GOVERN	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County	r. A marriage license having been refused to the above named parties, the
authorizes and directs the issuance of	A marriage license having been refused to the above named parties, the art by written order issued
Be It Remembered, there was filed in my office a marriage license	E AND MARRIAGE CERTIFICATE se issued by the clerk of the HENDRICKS Circuit Court
of Indiana dated the 24 day of May Be it further remembered, the following marriage certificate was field in an	te issued by the clerk of the HENDRICKS Circuit Court
Be it further remembered, the following marriage certificate was filed in my of I, John Maurela	and the joining together as husband and wife
1, my of	fice, to-wit:
1,	ereby certify that on the 24 day of Mail,
State of Indiana, Groom of alle T.	Country of Vendelland
one thousand nine hundred and 76 h. State of Indiana, Groom Scheet M. Hughes of and, Bride Chesish D. Sedman of	J. Mengelricks County, State of Indiana
County County	County, State of Indiana,
were by me united in marriage as authorized by a marriage license issued for to Dated this.	nat purpose by the Clerk of the Circuit Court of
19 / 6	
	Signed John M Maserer
Filed and recorded in accordance with the laws of the State of Indiana this	morai Designation Judge, Hendricks Co. Court
, , , , , , , , , , , , , , , , , , ,	day of May 19 Le.
	Harvey Wer
	HENDRICKS Circuit Court

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

B4.37

HENDRICKS County File BA. 37		
MALE 5/17/7/	Pate of V-11	
Medical Examination Report Dated	FEMALE Medical Examination Report Dated 5/17/76	
Name of Physician A Cudder Mil.	N	
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False stated and prescribes that he fined in any sum not exceeding five hundred dollars."	tement When the Sculder, Md.	
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "Palse station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	macrer procures the issuance of a license to marry by any false statement, representa-	
Name Piro Middle Lant	FEMALE APPLICANT	
Date of Birth Month Day Year	A stray Middle D Last	
Place of Birth (State or foreign country)	Month Day Year	
Let a Boone On	Place of Birth (State or foreign country)	
Residence Address Street or B. 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 St. Leton In-	
Last Marriage Ended By: Death Divorce Annulment	Previous Marital State	
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages	
1 t 2 1/8 1	Last Marriage Ended By: Death Divorce Annulment 1912 -	
Date of birth verified by Birth Capt. Judicial Decree	Color or Race White Negro Other (specify) Pulnam	
Other (Specity) (Many Memorial Lebenan	Usual Occupation Practical hum.	
1. Are you now or have you been adjudged, diagnosed or considered as: As imbedia? No Yes	Date of birth verified by: DBirth Cert. DJudicial Decree	
Of Unacund Mind? 2. Are you under guardianahip as a person of unacund mind? No D Yes D	Other (Specify) BK, CH 21 page 70	
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?	
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 D Yes D 5. Are you related to the bride closer than second cousin? No D Yes D	2. Are you under guardianship as a person of unsound mind? No Yes	
6. Are you now under the influence of intextesting liquor? No D Yes	3. Are you afflicted with a transmissible disease? No Yes	
7. Are you now under the influence of a narcotic drug? No Ves S. Are you able to support a family?	4. Are you related to the groom closer than second cousin? No 🗆 Yes 🗆	
3. Are you likely to so continue?	5. Are you now under the influence of intoxicating liquor? 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 (if deceased so state)	
	Occupation of father Add Land Race of tather Addition	
	Birthplace of father (State or foreign country)	
	8. Full maiden name of mother January Ettay aury	
(c) 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. Pull name of tather NICK Edward Tennely	Occupation of mother	
Residence of father (If despressed so state) Althre	Birthplace of mother (State or foreign country)	
Occupation of tather AttANAS Bace of tather Will	The state of the s	
Birthplace of father (State or fuselign sountry)	State of Indiana, County of HENDRICKS I depose and state the information given in this application is true and correct.	
12. Full maiden name of mother All Nettle Alfrech of	Deba Jun Gotten	
Residence of mother (if decensed, so state)	Signed Signed All 1 Soft Main It	
Occupation of mother	New Address 20 day of MM4, 19.76	
State of Indiana,	Subscribed and sworn to before me this day of 19	
County of HENDRICKS as: I depose and state the information given in this application is true and correct.	John Ship Ship Mill Called Greek	
Signed John Owen Sourcedy	CONSENT OF PARENTS, PARENT OR GUARDIAN	
Now Address & 7 Deal Main Light Indiano	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 19/0, 19/0.	signs, state facts which render the consent of the other parent unnecessary	
The state of the s		
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:	
	County of HENDRICKS	
State of Indiana.	SignedFather	
County of HENDRICKS Signed Father	SignedMother	
Signed Mother	Subscribed and sworn to before me thisday of	
Subscribed and sworn to before me this	Clerk	
Clerk	and 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	
HENDRICKS County Curcuit Co	urt by written order issued	
in Classicks County authorizes and directs the issuance of	f a marriage needs to the transfer of the factorial fact	
TOTAL TICENS	HENDRICKS CITCUIT COULT	
Indiana dated the day of		
De la maj office, to were		
Be it further remembered, the following marriage fertificate was filed in my office, to-wit: hereby certify that on the 21 day of Maricks, hereby certify that on the 21 day of Maricks, at 7 DOP. M. Home of Dick Hennedgounty of Lundricks, one thousand nine hundred and The particles County, State of Indiana.		
one thousand nine hundred and State of Indiana, Groom John Owen Renneder of Henclricks County, State of Indiana, and, Bride Debra Janna Ratterson of Henclricks Henclicks And Bride Debra Janna Ratterson of Henclicks		
and, Bride Debra Januar Tatterson of	that purpose by the Clerk of the Circuit Court of	
and, Bride Delina James Grand Gatterson of Sendricks were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of Games Sader		
Dated this 20 day of Mary 19 Signed All Asptist Ch. Sixton, and		
Official Designation 19		
Filed and recorded in the laws of the State of Indiana this 24 day of Marvelf Clerk		
and recorded in accordance with the laws of the State of Indian	Signed Circuit Court	

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

Chap. 126, Ind. Acts 1905	HENDRICKS	County	Date of Application
		FEMALE	6 O THE
MALE Medical Examination Report Dated 5-19-7	6	Medical Examination Report Dated	3-14-76
(land		Name of Physician	Cohen
Name of Thysician	escribes "False staten	nent-Whoever procures the issuance of a license to m	arry by any false statement, represents
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1903 prition or pretense shall be fined in any sum not exceeding five hundred dollars	(\$500.00)".	FEMALE APPL	
MALE APPLICANT			iddle Last
Name First Middle	wehart	Date of Birth Month Pr	Belles
Date of Birth Month Day Year	952	Dro 1	5 19.5-2
Place of Birth (State of foreign country)		Place of Birth (State or foreign country)	In.
Residence Address Street or R. Ru City, County	State	Residence Address Street of R. R.	Oity County State
P P #1 Stilesvelle, Sid		Maiden Name if Different	
Previous Marital Status: Never Married Number of Previous Marriages		Previous Marital Status: Never Married Number	er 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 \ \ \frac{1}{1/2011/11/11		Color or Race White Negro Other	(specify)
Date of birth verified by:		Usual Occupation Sucher	The state of the s
Other (Specify) Book 17 H p 145		Date of birth verified by: Birth Cert. Judicial	Decree
An Impecie:	No Ves Ves	Other (Specify) # 12378	***************************************
2. Are you under guardianship as a person of unsound mind?	No Yes 🗆	1. Are you now or have you been adjudged, diagnose	
3. Are you now or have you been within five (5) years an inmate of a count home for indigent persons?	No E	An Imbecile?	No 🗗 Yes 🗆
II allowed to 0 is yes made the chade of back	No Yes No Yes	Of Unsound Mind? 2. Are you under guardianship as a person of unsou	No Ves O
5. Are you related to the bride closer than second cousin?	No Yes 🗆	 Are you under guardianship as a person of unsou Are you afflicted with a transmissible disease? 	
o. Hie you now under the innuence of incomeding inquir	No Yes \Bar\	Are you afflicted with a transmissible disease: Are you related to the groom closer than second	No → Yes □ cousin? No → Yes □
8. Are you able to support a family?	Yes No 🗆	5. Are you now under the influence of intoxicating	
or and you made to be continued.	No Yes	6. Are you now under the influence of a narcotic d	
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses		7. Full name of father Strals X	endall Belles
Name Age Address		Residence of father (if deceased so state)	Box 190 Clayton
		Occupation of father Cong	Race of father
		Birthplace of father (State or foreign country)	Mansas
(b) Are you supporting or contributing to their support?	Yes No	8. Full maiden name of mother To Ballyn	v, Barbara Devertors
(c) Are you complying with any court order or orders issued for	Yes No	Residence of mother (if deceased so state)	Same
11. Full name of father Now Boyd Wiseha	st n	Occupation of mother Housewife	Race of mother
Residence of father (if deceased so state)	elle In.	Birthplace of mother (State or foreign country)	Okattena
Occupation of father & lectrical Sleet Race of father.		Status of Tallana	
Birthplace of father (State or foreign country)	· +)	State of Indiana, County of HENDRICKS Bas: I	depose and state the information given n this application is true and correct.
12. Full maiden name of mother Bannis, Mas You		There	20 Ballo
Residence of mother (if deceased so state) Samuel Race of mother		Signed Theres	O C
Birthplace of mother (State or foreign country)		New Address 20 N. Jeff	100
State of Indiana, I depose and state the infe	ormation gives	Subscribed and sworn to before me this.	day of They 197k.
County of HENDRICKS ss in this application is tru	e and correct.	Dien III Harvey	Jerk HENDRICKS Circuit Court
New Address 320 N. Taffers Dr. Base	lact	CONSENT OF PARENTS, PARENT OR GUARDIA	N.
Subscribed and sworn to before me this. 34 day of May	Waxberg 2/8		
Ellew In Harvey ClerkHENDRICKS		We, the parents, of this applicant hereby give conser	
CONSENT OF PARENTS, PARENT OR GUARDIAN	Circuit Court	signs, state facts which render the consent of the ot	her parent unnecessary
We, the parents, of this applicant hereby give consent for this marriage. If or	nly one parent		***************************************
signs, state facts which render the consent of the other parent unnecessary			***************************************

State of Indiana	ll l	State of Indiana,	
State of Indiana, County ofHENDRICKS		County of HENDRICKS	
Signed		Signed	Father
Signed	Mother	Signed	Mother
Subscribed and sworn to before me thisday of		Subscribed and sworn to before me this.	day of 19
			Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER			
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDE HENDRICKS County	CK OF COURT.	A marriage license having been refused t	o the above named parties, the
HENDRICKS County authorizes and directs	the i	by written order issued	and filed
and directs	s the issuance of a	marriage license to the above named partie	8.
Be It Remembered, there was filed in my office a of Indiana dated the day of Marking day of Marking	Marriage Hear	AND MARRIAGE CERTIFICATE	
of Indiana dated the 28 day of May	marrage ticense	issued by the clerk of the HENDRICK	S Circuit Court
Be it further remembered it will be hast	1	19 6, authorizing the joining	g together as husband and wife
Rev. Kent Duke	s filed in my offic	e, to-wit:	2
one thousand nine hundred and 76	her	eby certify that on the 29th day	May
I, Rev. Kent Duke one thousand nine hundred and 76 State of Indiana, Groom Verl D. Wisehart	at	Stilesville	County of Hendricks ,
inu, Brue Ineresa J. Belles	,	County.	State of Indiana
and, Bride	of	Hendricks County	State of Indiana,
Dated this 29th	nse issued for tha	t purpose by the Clerk of the Circuit Court of	ofHENDRICKS
Dated this 29th day of May		6	
		Signed Rev. Kent Duke	2 - +10
Filed and recorded in accordance with the laws of the State of I	Off	Signed Rev. Kent Duke icial Designation Paston 2	c, Stilesville Baptist
of the State of P	naiana this	day of June	19 76.

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

MALE	5-24-76 Posts of A-11-76		
Medical Examination Report Dated 5-18-76	FEMALE Date of Application		
Name of Physician a. A. Scudder	Medical Examination Report Dated 5-18-76		
	Name of Physician a. D. Saudden		
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 issuance of a license		
MALE APPLICANT			
Name First Middle 10 Last	Name First		
Date of Birth Month Day Year	Middle 1 Last		
Place of Birth (State or foreign country)	Date of Birth Month Day Year		
Warrel Co. and	Place of Birth (State or foreign country)		
Residence Address Street or R. B. City County State	Residence Address Street or R. R. City and		
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different County State Maiden Name if Different Maiden Name if Different		
	Traine it Dinerent		
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married V Number of Previous Marriages		
Color or Race White Negro Other (specify)			
Usual Occupation	Last Marriage Ended By: Death Divorce Annulment		
Date of birth verified by: Deficit Cert. Judicial Decree	Color or Race White Negro Other (specify)		
□ Other (Specify) # 5.3-008719	Usual Occupation Student		
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) Merry Hospita - Column		
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	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?	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?		
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?		
(a) List their full names, ages and addresses	7. Full name of father Selbert Ty tocoe Sheeck		
Name Age Address	Residence of father (if deceased so state)		
	Occupation of father Clacker Race of father		
	Birthplace of father (State or foreign country) Lighton Co. Ja		
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Josephine Louise Evans		
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state). Same		
11. Full name of father William Harmon Shepard	Occupation of mother Sear hor Race of mother		
Residence of father (if degeased so state)	Birthplace of mother (State or foreign country).		
Occupation of father Salesman Race of father	Dirempiace of mother (coate of foreign coate)		
Birthplace of father (State or ggreign country) Davisge Co.	State of Indiana, State of Indiana, I depose and state the information given in this application is true and correct.		
12. Full maiden name of mother and may Smith	County of HENDRICKS		
	Signed of Tallan Stack		
Residence of mother (if degeased so state) Some Occupation of mother Solls womens, Race of mother	New Address.		
Birthplace of mother (State or foreign country) Marcise Co.	Subscribed and sworn to before me this 24 day of 97 day 19 76		
	Subscribed and sworn to before the this Subscribed and sworn to before the this Clerk HENDRICKS Circuit Court		
State of Indiana, County of HENDRICKS Ses: I depose and state the information given in this application is true and correct.	XILD 41) HAWAY Glerk HEVOLUS CIFERIT COURT		
Signedy Kent E. Shepard	CONSENT OF PARENTS, PARENT OR GUARDIAN		
New Address 4/9 GIBBS ST PLAWFIELD, IND.			
Subscribed and sworn to before me this 24 day of 1976	We, the parents, of this applicant hereby give consent for this marriage. If only one parent		
Sleve m Haney 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 HENDRICKSss:		
State of Indiana,	County ofFather		
County ofHENDRICKS.	SignedMother		
Signed Father	Signed Mother		
Signed	Subscribed and sworn to before me thisday of		
Subscribed and sworn to before me this	Clerk		
Clerk	han 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 and filed		
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County C	urt by written order issued		
RETURN OF MARRIAGE LICENS	se issued by the clerk of the HENDRICKS Circuit Court , 19.76, authorizing the joining together as husband and wife		
RETURN OF MARRIAGE Incention	se issued by the clerk of the together as husband and wife		
We It Remembered, there was filed in my office a most	, 19.76, authorizing the joining together		
Indiana dated the 28 day of			
Rolling of Manual Control was filed in my office, to-wit.			
Be it further remembered, the following marriage certificate was filed in my office, to-wit: 1, boughs a bickly at Brownsburg, County of Indiana, one them.			
I, Douglas a his kly hereby certify that on the country of Indiana, one thousand nine hundred and the Shepard of Marien County, State of Indiana, Groom I ent & Shepard of Ladricks County, State of Indiana,			
State of Indiana, Groom Lent & Shepard	of Maricks County, State of Indiana,		
and, Bride of Indiana, Groom Shell shell 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 County.			
were by me united in a marriage twenty to a marriage twenty			
County. Dated this Signed Dates le Deskey			
000 01			
	Official Designation Menusies , 19 76.		
Filed and day of Jarvelf Clerk			
Filed and recorded in accordance with the laws of the State of Indiana this 23 day of Flasself Clerk Signed HENDRICKS Circuit Court			

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

day of June , 19 7.6

Signed Ilin m Harvey Clerk

Chap. 126, Ind. Acts 1905 HENDRICKS County Date of Application FEMALE Medical Examination Report Dated. Medical Examination Report Dated_ Name of Physician_ Name of Physician A 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 Name Last Date of Birth Date of Birth Place of Birth (State or foreign country) Residence Address Maiden Name if Differen 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: White Negro Other (specify)... Color or Race White Negro Other (specify). Color or Race Usual Occupation Date of birth verified by: Dirth Cert. Undicial Decree Usual Occupation Other (Specify) Insurance Date of birth verified by: Birth Cert. | Judicial Decree 1. Are you now or have you been adjudged, diagnosed or considered as:
An Imbecile? No Yes Other (Specify). Yes 🗌 No D 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 home for indigent persons? An Imbecile? No Yes county asylum or No 🖯 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 🗆 Yes [5. Are you related to the bride closer than second cousin? No 🗗 3. Are you afflicted with a transmissible disease? No 🕒 Yes No 🖸 Yes 🗌 6. Are you now under the influence of intoxicating liquor? Yes 🗌 4. Are you related to the groom closer than second cousin? No 3 Yes [No 🖾 7. Are you now under the influence of a narcotic drug? Yes 🖸 No 🗌 8. Are you able to support a family? 5. Are you now under the influence of intoxicating liquor No 🖽 Yes 🗌 No 🗆 Yes 🛛 9. Are you likely to so continue? 6. Are you now under the influence of a narcotic 10. Do you have minor children from one or more former marriages? No 🗌 Yes 🖸 (If yes, answer questions a, b, c) 7. Full name of father Arena (a) List their full names, ages and addresses Box Address Birthplace of father (State or foreign country). 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? Residence of mother (if deceased so state)... Yes No Occupation of mother 11. Full name of father Birthplace of mother (State or foreign country). Occupation of father..... State of Indiana, depose and state the information given Birthplace of father (State or foreign country) 12. Full maiden name of mother.... Residence of mother (if deceased so state) ... Occupation of mother Africal Miles Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given in this application is true and correct. 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 Subscribed and sworn to before me this... Sarver ClerkHENDRICKS. 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, County of HENDRICKS State of Indiana. County of HENDRICKS Signed ... Signed. ..Father Signed Signed... .. Mother Subscribed and sworn to before me this day of COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the HENDRICKS 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 HENDRICKS Circuit Court of Indiana dated the 28 day of May, 1976, authorizing the joining together as husband and wife Elbert LaRon Redman and Evelyn Joan Capps Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the 28th at Pittsboro , County of Hendricks, State of Indiana, Groom Elbert L. Redman of Hendricks County, State of Indiana and, Bride Evelyn J. Capps of Marion County, State of Indiana...., May Dated this..... Signed Glen A. Clarkson
Official Designation Pastor, Pittsboro U.M.C.

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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS _County Date of Application Medical Examination Report Dated_ FEMALE Medical Examination Report Dated James Blac 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." FEMALE APPLICANT Middle Name Previous Marital Status: Never Married Number of Previous Marriages Last Marriage Ended By: Death Divorce Annulment Previous Marital Status: Never Married

Number of Previous Marriage White Negro Other (specify). Last Marriage Ended By: Death Divorce Annulment Color or Race Date of birth verified by: Birth Cert. Judicial Decree of ex Angelow West White Negro Other (specify). Other (Specify)... 1. Are you now or have you been adjudged, diagnosed or considered as:
An Imbecile? Date of birth verified by: Birth Cert. Daudicial Decree 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 county asylum or home for indigent persons?

No P 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 🗌 4. Are you afflicted with a transmissible disease? No D Yes 🗌 No D 2. Are you under guardianship as a person of unsound mind? No D 5. Are you related to the bride closer than second cousin? Yes 🗌 No D 6. Are you now under the influence of intoxicating liquor? No 🖸 Yes 🗌 3. Are you afflicted with a transmissible disease? 7. Are you now under the influence of a narcotic drug? No D Yes 🗌 4. Are you related to the groom closer than second 8. Are you able to support a family? No D No 🗆 9. Are you likely to so continue? Yes 🗹 No 🗆 10. Do you have minor children from one or more former marriages? No D (If yes, answer questions a, b, c) (a) List their full names, ages and addresses Address Occupation of father Kettined Susanne Welson 7, 81 Bot 140 mc Cordsville In (b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for their support? Yes No 🗆 Yes No 🗆 Residence of father (if deceased so state) .. Birthplace of mother (State or foreign country) .. State of Indiana, Birthplace of father (State or foreign country) Mynn Occupation of mother NAME - Maker Clerk HENDRICKS CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one p Subscribed and sworn to before me this. signs, state facts which render the consent of the other parent unnecessary. Clerk 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... HENDRICKS State of Indiana, County of HENDRICKS Subscribed and sworn to before me this... COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, 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.... Priscilla M. Sorrels hereby certify that on the 20011 Messiah LutnBrownshurg ..., County of County, State of Indiana Hancock one thousand nine hundred and 76 ...County, State of Indiana State of Indiana, Groom... Lawrence M. 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. Signed J. Kincaid Smith , 19. 76. Dated this. Official Designation Filed and recorded in accordance with the laws of the State of Indiana this...

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orm Prescribed By Indiana State Board of Itelath under Authority Ithap. 126, Ind. Acts 1905 STATE O APPLICATION FOR HENDRIC	MARRIAGE LICENSE File May 25, 1976 Date of Application
MALE Medical Examination Report Dated Name of Physician LUC Chapter 126, Indiana Acts 1905 prescribes "False sion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	Name of Physician Cruc Clark, Md. Name of Physician of a license to marry by any false statement, representa-
ion or pretense shall be lines	
Name First Middle Burns Date of Birth Month Day Year Place of Birth (State or foreign country) Month Day Year Place of Birth (State or foreign country) Month Month Day Year Previous Marital Status: Never Married Number of Previous Marriages Previous Marital Status: Never Married Number of Previous Marriages Death Divorce Annulment Color or Race White Negro Other (specify)	Name First Middle Last
Usual Occupation Januah Arune	Color or Race White Negro Other (specify)
Date of birth verified by: Dafirth Cert. Judicial Decree Other (Specify)	1. 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 unsound mind? No Yes Yes Yes Yes Yes Yes Yes Yes
7. Are you now under the influence of a narcotic drug?	4. Are you related to the groom closer than second cousin?

7. Are you now under the induction of a factor of the induction of the ind	5. Are you now under the influence of intoxicating liquor? No Yes C 6. Are you now under the influence of a narcotic drug? 7. Full name of father Residence of father (if deceased so state) Occupation of father
	Birthplace of father (State or foreign country)
i yes No □	8. Full maiden name of mother Dungast Elding Abillury
(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 Addition
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 give in this application is true and correct in this application is true and correct in the application is true and correct in the application is true and correct in the application in the application is true and correct in the application in the application is true and correct in the application in the application is true and correct in the application in the application in the application is true and correct in the application i
Birthplace of father (State or foreign country)	County of HENDRICKS
12. Full maiden name of mother And following the state of	Signed I margle Ex Dd ant
Residence of mother (if deceased so state)	New Address & Rax & Cappling Pare meacon
Occupation of mother Race of mother Race of mother	2+ MALL .71
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of
State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Man M. Classiff Clerk HENDRICKS Circuit Cou
Wallelan P. Jallama	
Signed Factorial Signed	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. ClerkHENDRICKS 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. County of HENDRICKS State of Indiana, County of HENDRICKS Mother Signed...Father Signed.....Mother

COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the HENDRICKS County Court by written order issued and filed authorizes and directs the issuance of a marriage license to the above named parties.

and directs the issuance	e of a marriage needse to the a	nove named parties.
RETURN OF MARRIAGE LICEN	NSE AND MARRIAGE CERT	IFICATE
Be It Remembered, there was filed in my office a marriage li		
of Indiana dated the 29 th day of Mary	19.7.6, auth	norizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in m	y office, to-wit:	
one thousand nine hundred and 76	nereby certify that on the	day of
one thousand nine hundred and	at Greensburg	County of Decatur
State of Indiana, Groom Douglas E. Burns	of Hendricks	County State of Indiana
and, Bride Jennifer E. Hart of	Hendricks	County, State of Indiana
were by me united in marriage as authorized by a marriage license issued f County. Dated thisday ofMay	or that purpose by the Clerk of	the Circuit Court of
Dated this day of 19	/ ()	

Signed William F. McCov Minister

Official Designation..... Signed Gless M. Harvelf Clerk Circuit Court

HENDRICKS...

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 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-FEMALE APPLICANT Middle Date of Birth Place of Birth (State 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 White Negro Other (specify). Birth Cert. Judicial Decree Surce Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile? Date of birth verified by: Birth Cert. | Judicial Decree No Yes Of Unsound Mind? No Yes No Yes Other (Specify). 113-51-028235 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 No Yes 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? No Yes 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 🗌 No 🗇 Yes 🗆 Yes 🗆 6. Are you now under the influence of intoxicating liquor? NoD 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 No No Yes 🗌 9. Are you likely to so continue? Yes 🗆 10. Do you have minor children from one or more former marriages? No Tes 2 No The Yes (If yes, answer questions a, b, c) (a) List their full names, ages and addresses accessed Address Yes No 🗆 (b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issue their support? Yes No 🗆 Gove Birthplace of mother (State or foreign country) ... Residence of father (if deceased so state) Occupation of father Kettered State of Indiana, Birthplace of father (State or foreign country). Occupation of mother Lettired 25 day of Thuy Birthplace of mother (State or foreign country). Clerk HENDRICKS 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 Thruly Circuit Court Clerk 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 HENDRICKS State of Indiana, Signed. County of HENDRICKS Signed.Mother COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the HENDRICKS County 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 license issued by the clerk of the HENDRICKS Circuit Court of Indiana dated the 29 day of May

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

1, Flord Smith Mary Loward hereby certify that on the 29th day of May, one thousand nine hundred and 76

State of Table 2015 State of Indiana, Groom Wayne Loy

and Reside Management Management of Management Manage and, Bride Mary Howard of Hendricks County, State of Indiana, Signed Floy d Smith day of May , 19 76 Official Designation Judge Dated this .. Filed and recorded in accordance with the laws of the State of Indiana this

Dated this

Form Prescribed By Indiana State Board of Health under Authority Chap. 126, Ind. Acts 1905	STATE OF ATION FOR I	MARRIAGE LICENSE File May 15 1971
MALE Medical Examination Report Dated Name of Physician William D. Prop	unie Md.	Medical Examination Report Dated 5/4/16 Name of Physician William W. Province M.
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 19 tion or pretense shall be fined in any sum not exceeding five hundred do	05 prescribes "False sta llars (\$500.00)".	tement—Whoever procures the issuance of a license to marry by any false statement, represe
MALE APPLICANT		
Name First Date of Birth Place of Birth (State or foreign country) Residence Address Street or R. R. City Country Application Country Coun	Year 95 4 ty State	Name First Middle Month Day Year Place of Birth (State or foreign country) Residence Address Street or R. R. Maiden Name if Different Middle Month Month Day Year Middle Middle Middle Month Month Month Day Year Middle Month Mon
Previous Marital Status: Never Married P Number of Previous Marr	iages	
Frevious Marital Scarce.		Previous Marital Status: Never Married Number of Previous Marriages
Last Marriage Ended By: Death Divorce Annument		Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	••••••••••••	Last Marriage Ended By: Death Divorce Annulment
Color of Race White Estate 1		Color or Race White Negro Other (specify)
Usual Occupation Mukent		Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	1 1 9 1 2 2 2 2 2	9 Usual Occupation (All) se as ministration
Other (Specify) Wilficate of Hent.	W. C 2721	Date of birth verified by: Dirth Cert. Judicial Decree
1. Are you now or have you been adjudged, diagnosed or considered as:	No Yes	Date of birth verified by: Dirth 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 🗌	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 No Yes	An Imbecile?
home for indigent persons?	No 🗆 / Yes 🗀	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 TYes	2. Are you under guardianship as a person of unsound mind? No V
4. Are you afflicted with a transmissible disease. 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?	No 🖸 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?	Yes No 🗆	5. Are you now under the influence of intoxicating liquor? No Y
 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 	No Yes	6. Are you now under the in uence of a narcotic drug? 7. Full name of father Lagh affine Smith
Name Age Addr	ess	Residence of father (if deceased so state)
Name		The Princepala
		Occupation of father Additional Race of fath
		Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support?	Yes No	8. Full maiden name of mother and all the bound of the bo
(c) Are you complying with any court order or orders issued for their support?	Yes No	Residence of mother (if deceased so state) Allall
11. Full name of father Benjamia + ong		Occupation of mother
Residence of father (if deceased so state)	ing.	Birthplace of mother (State or foreign country) Pile Co - Ag

	Occupation of father ASSAT Bage of father WALLE	
	Birthplace of father (State or foreign country)	State of Indiana, See I depose and state the information in this application is true and contains the second contains and contains a second contains a seco
	Birthplace of father (state of foreign country)	County of HENDRICKS in this application is true and con
12.	Full maiden name of mother Manual Manual	Man the Dans of
	Residence of mother (if deceased so state)	Signed / Mercell & Mill SI
	Occupation of mother Latter Race of mother	New Address 3/6 E. Elm, Pot 3 Theenland
	Birthplace of mother (State or foreign country)	25 may 16
		Subscribed and sworn to before me this day of 19
Sta	te of Indiana, I depose and state the information given in this application is true and correct.	Then Merry Gerk HENDRICKS Circuit
Cou	nty of HENDRICKS in this application is true and correct.	Clerk HENDRICAS CIrcuit
	Signed Ola di Fring To	- T
	New Address 316 E EIM At. 3 Groencostle Ind	CONSENT OF PARENTS, PARENT OR GUARDIAN
Suh	scribed and sworn to before me this	We, the parents, of this applicant hereby give consent for this marriage. If only one parents, of this applicant hereby give consent for this marriage.
Dub	and sworn to before the this.	

ClerkHENDRICKS 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, State of Indiana, County ofHENDRICKS. County of HENDRICKSFather Signed....Mother Subscribed and sworn to before me this _____day 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 HENDRICKS County Court by written order issued

in......authorizes and directs the issuance of a marriage license to the above named parties.

....Clerk

Be 3t Remembered there are fled in
Countries to the was filled in my office a manning of line
of Indiana dated the 39th day of My , 19 , authorizing the joining together as husband and wif
The first form of the joining together as hisband and the
Be it further remembered the fill is and I any letter III
Be it further remembered, the following marriage certificate was filed in my office, to-wit: I, R. Kent Aller one thousand nine hundred and 76 hereby certify that on the 30th day of May State of Indiana, Groom Leo Li Ping Fong Tendiana
hereby certify that on the 30th
one thousand nine hundred and
State of Indiana, Groom Leo Li Ping Fong at Plainfield , County of Hendricks and, Bride Merrietta Lynn Smith Putnam County, State of Indiana
of Putnam Control Indiana
and, Bride Merrietta Lynn Smith County, State of Lynn Smith
and, Bride Merrietta Lynn Smith of Putnam County, State of Indiana were by me united in marriage as authorized by a marriage is
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
Detail the State of the Circuit Court of the Circuit Court of

Signed R. Kent Allen Official Designation.... Minister

Filed and recorded in accordance with the laws of the State of Indiana this 2 day of June , 19 76

Signed Slew M. HarvelfHENDRICKS.

APPLICATION FOR MARRIAGE

ENSE

- OLU MAR	MAGE LICE
HENDRICKS	C.
	County

No. 181 File Bk 37

	County
MALE Medical Examination Report Dated 5-10-76	FEMALE Date of Application
9	Medical Examination Report Dated 5-18-76
Name of Physician Aura 9 - Placet M.D.	
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False strion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	Name of Physician M. O. Scamaforn
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	stement—Whoever procures the issuance of a license to
First Middle	to marry by any false statement, representa-
Name Mark allen Last	Name First FEMALE APPLICANT
Date of Birth Month Day Year	Middle Land
Place of Birth (State or foreign country)	Date of Birth Month Day Year
Indiana portes, In	Place of Birth (State or foreign country) 3 1958
Residence Address Street or R. R. City County State	Residence Advance India
Previous Marital Status: Never Married Number of Previous Marriages	RE# City County State
	Maiden Name if Different Tuls boco Henducks Sud.
Last Marriage Ended By: Death Divorce Annulment Annulment	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Number of Previous Marriages
A . Y	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)
	(specity)
Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation Unemployed
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 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	Of Unsound Mind?
4. Are you afflicted with a transmissible disease? No 🗹 Yes 🗆	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
7. Are you now under the influence of a narcotic drug? No 🗊 / Yes 🗆	3. Are you related to the group of the state
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
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? 7. Full name of father Asyall Palat Blanton
Name Age Address	0 +-1
	1
	Occupation of father And Talay (1) Talklan Race of father (1)
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Magnetia Addit A
their support? Yes No	Residence of mother (if deceased so state) Putterfort, Smile
11. Full name of father Warren Taylor	Occupation of mother Asussus fe Race of mother De
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country) Park Co. Sus.
Occupation of father Aller Race of father Wh	The second is not being the building to be the beautiful to be the second
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Alresa B. Jolan	
Residence of mother (if deceased so state)	Signed Lu Jun Blanton
Occupation of mother Race of mother Wh	New Address B 13#1 Put/shoro, Ond.
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this 35 day of May 1976.
State of Indiana, I depose and state the information given	Glerk HENDRICKS Circuit Court
County of HENDRICKS as: in this application is true and correct.	- Color Colo
Signed Marro H Jay Du	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address W Willeman	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 41000, 19/6.	signs, state facts which render the consent of the other parent unnecessary
Alla III A 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	
	a
	State of Indiana, County of
State of Indiana,	Father
County of HENDRICKS	Signed Mother
Signed Father	Signed
Signed Mother Subscribed and 19	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me this	Clerk
CIETA	a 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 door and filed
authorizes and directs the issuance of	I a mazzo
RETURN OF MARRIAGE LICENSE	se issued by the clerk of the HENDRICKS Circuit Court , 19, authorizing the joining together as husband and wife
RETURN OF MARKIAGE Licen	se issued by the clerk of the together as husband and wife
of Last	19./ authorizing the joining together as husband and
Indiana dated the	T. Ann Blanton
Thursday of day of	Lu Ann Blanton
Be it further remembered the Taylor day of ark Allen Taylor	nd Lu Ann Blanton ffice, to-wit: 5th day of June
Be it further remembered, the following marriage certificate was filed in my of	nd Lu Ann Blanton ffice, to-wit: hereby certify that on the 5th day of Hendricks
Be it further remembered, the following marriage certificate was filed in my of the state of the	nd Lu Ann Blanton ffice, to-wit: hereby certify that on the 5th day of June hereby certify that on the 5th Hendricks, at Pittsboro , County of Hendricks, Ind
Be it further remembered, the following marriage certificate was filed in my of thousand nine hundred and thousand nine hundred nine hundred and thousand nine hundred nine hu	tu Ann Blanton ffice, to-wit: hereby certify that on the 5th day of June at Pittsboro , County of Hendricks, Hendricks County, State of Hendricks, Ind of June , County of Hendricks, Ind
Be it further remembered, the following marriage certificate was filed in my of the state of Indiana Cross Mark Allen Taylor	tu Ann Blanton ffice, to-wit: hereby certify that on the 5th day of June hereby certify that on the 5th Hendricks at Pittsboro County, State of Hendricks Ind of County, State of Indiana
Be it further remembered, the following marriage certificate was filed in my of the state of Indiana Cross Mark Allen Taylor	thereby certify that on the 5th day of June Thereby certify that on the 5th day of Hendricks The Pittsboro County of Hendricks The Hendricks County, State of Hendricks The Hendricks County, State of Indiana The Hendricks County of HENDRICKS That purpose by the Clerk of the Circuit Court of HENDRICKS
Be it further remembered, the following marriage certificate was filed in my of the state of Indiana, Groom	that purpose by the Clerk of the Circuit Court of HENDRICKS County of HENDRICKS County of Hendricks Ind Hendricks County, State of Indiana Hendricks County State of Hendricks Hendricks County State of Hendricks Cherman Essex
Be it further remembered, the following marriage certificate was filed in my of the state of Indiana, Groom Mark Allen Taylor and, Bride Lu Ann Blanton were by me united in marriage as authorized by a marriage license issued for the state of this 5 day of June 19.	nd Lu Ann Blanton ffice, to-wit: hereby certify that on the 5th day of June hereby certify that on the 5th Hendricks at Pittsboro , County of Hendricks Hendricks County, State of Hendricks Ind Hendricks County, State of Indiana Hendricks Hendricks County State of Indiana Hendricks Hendricks Sharman Essex Signed Sherman Essex
Be it further remembered, the following marriage certificate was filed in my of the state of Indiana, Groom Mark Allen Taylor and, Bride Lu Ann Blanton were by me united in marriage as authorized by a marriage license issued for the state of this 5 day of June 19.	nd Lu Ann Blanton ffice, to-wit: hereby certify that on the 5th day of June hereby certify that on the 5th Hendricks at Pittsboro , County of Hendricks Hendricks County, State of Hendricks Ind Hendricks County, State of Indiana Hendricks Hendricks County State of Indiana Hendricks Hendricks Sharman Essex Signed Sherman Essex
Be it further remembered, the following marriage certificate was filed in my of I, Sherman Essex one thousand nine hundred and 76 State of Indiana, Groom Mark Allen Taylor and, Bride Lu Ann Blanton of were by me united in marriage as authorized by a marriage license issued for to County. Dated this 5 day of June , 19.	nd Lu Ann Blanton ffice, to-wit: hereby certify that on the 5th day of June hereby certify that on the 5th Hendricks at Pittsboro , County of Hendricks Hendricks County, State of Hendricks Ind Hendricks County, State of Indiana Hendricks Hendricks County State of Indiana Hendricks Hendricks Sharman Essex Signed Sherman Essex

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

Date of Application

	TOWALE.
MALE 5/19/76	FEMALE Medical Examination Report Dated 5/19/76
Medical Examination Report Dated	and of the sold
Name of Physician Carl L Minlen Ma	Name of Physician Call A. Author Ma.
ALL OUESTIONS 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 live hundred	FEMALE APPLICANT
MALE APPLICANT	Name / First Middle My Last
Name Richy allen Middle Lavette	Date of Birth Month & Day Year
Date of Birth Month Day Year 1954	April 13 1956
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)
Charles and State	Residence, Address Street or R. R. City County State
Residence Address Street of E. R. City County State	Maiden Name if Different Maiden Name if Different
Previous Marital Status: Never Married Number of Previous Marriages	Maigen Name it Different
	Previous Marital Status: Never Married Number of Previous Marriages
Last Marriage Ended By: Death Divorce Annulment Annulment	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	Last Marriage Ended by .
Usual Occupation Printle	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Acritary
Other (Specify) # 1/3-54-0/6360	Codin Company
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes	1/to P. # 0498
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	An Imbecile?
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	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? 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 Yes	4. Are you related to the groom closer than second cousin? No Yes
8. Are you able to support a family? Yes No	
9. Are you likely to so continue? 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	7. Full name of father Andrews P 2
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Addition Race of father Addition
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Additional for the first the state of th
(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. Jong Navette	Occupation of mother Manual Race of mother 1996
Residence of father (if deceased so state)	O, that
Occupation of father All All Race of father All	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country)	State of Indiana, I depose and state the information given
12. Full maiden name of mother. Barbara Clemen	County of
mill of Marine	ill Emila Merden hall
Occupation of mother	Signed My Orthogramman Signed
	New Address O COMMON Apr D Mood 9
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of day of 19
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Glerk HENDRICKS Circuit Court
Signed Ricks A Dantto	1
New Address 802 Wyck-lokp Dr. Apt. O I NOIANABOOK	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this 35 day of May 176	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Sun D. Marshy ClerkHENDRICKS Circuit Court	
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
State of Indiana,	State of Indiana, County ofHENDRICKS
County of HENDRICKS ss:	
SignedFather	Signed Father
Signed	SignedMother
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of, 19
Clerk	Clark
COMPLETE IN MARRAGE	CHA
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
Co	101 1
inauthorizes and directs the issuance of	f a marriage license to the above named parties
RETURN OF MAPPIACE LICENSES	
The It Remembered, there was filed in my office a marriage licent	E AND MARRIAGE CERTIFICATE
of Indiana dated the day of day of	se issued by the clerk of the HENDRICKS Circuit Court
Reit with a seller Navitto	
- The state of the	nd Hel Conly Merkenhall
1, Jarland	hereby certify that on the day of June
	at New Winchester County of Hendricks.
	of Hendreich County of Hendricks,
and, Bride Jell Emily mendenhall of	of Kendricks County, State of Indiana
County	narion County, State of Indiana,
were by me united in marriage as authorized by a marriage license issued for to Dated this	HENDRICKS
ady of the and	

Official Designation In inester of the Gospel Filed and recorded in accordance with the laws of the State of Indiana this 21 day of Signed Llen M.

......HENDRICKS...

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1906 HENDRICKS County Medical Examination Report Dated FEMALE Name of Physician Mulig 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 O 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 appropriet Usual Occupation Color or Race White Negro Other (specify). Date of birth verified by Birth Cart. | Judicial Decree Usual Occupation Other (Specify) Are you now or have you been adjudged, diagnosed or considered as:
 As imbedie? Date of birth verified by: Birth Cert. Judicial Decree Yes [Of Unsound Mind? □ Other (Specify) # 1/3 - 54 - 2400 No | 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: 1. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? An Imbecile? No Yes If answer to I is "yes" has the cause of such condition been removed? No [] Yes [Of Unsound Mind? L Are you afflicted with a transmissible disease? No | Yes | No D Yes [2. Are you under guardianship as a person of unsound mind? 5. Are you related to the bride closer than second cousin? No D Yes [No | Yes | 6. Are you now under the influence of intexicating liquor? No D Yes [3. Are you afflicted with a transmissible disease? No Yes 1. Are you now under the influence of a narcetic drug? No Yes [4. Are you related to the groom closer than second cousin? 3. Are you shie to support a family ? No Yes No 🗆 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? 6. Are you now under the influence of a narcotic drug? No Yes Carl H. (a) List their full names, ages and address Address Residence of father (if deceased so state) Occupation of father full les sales Race of father... Birthplace of father (State or foreign country) 8. Full maiden name of mother Jellen (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 [Occupation of mother Allandalla Race of mother..... Residence of father (if decouped as state). Birthplace of mother (State or foreign country) Occupation of tather A Sold & Bace of father ... State of Indiana, ss: I depose and state the information given in this application is true and correct. County of HENDRICKS New Address R. R. 2, Box 296, On Spl, IN 46231 Residence of mother (if deceased so state). Occupation of mother JANABAS Birthplace of mother (State or foreign country). 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 render the consent of the other parent unnecessary. All m Markey Clerk HENDRICKS CONSENT OF PARENTS. PARENT OF 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. County of HENDRICKS Father Signed abscribed and sworn to before me this......day of......day Signad 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. HENDRICKS County RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court Be It Remembered, there was filed in my office a marriage license issued by the clerk of the..... day of fund, 1976, authorizing the joining together as husband and wife Be it further remembered, the following marriage certificate was filed in my office, to-wit: I, P. Kent Allen hereby certify that on the 5th day of June hereby certify that on the 5th Hondricks 76 at Plainfield , County of Hendricks , State of Indiana, Groom Glenn Allan Lange of Hendricks County, State of Indiana of Hendricks County, State of Indiana , Signed R. Kent Allen day of June , 19 76 Dated this. Minister Official Designation Elen M. Harrelf Clerk Circuit Court Signed HENDRICKS.....

Form Prescribed By

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

	FEMALE Secret Poted 5-2.26
MALE Medical Examination Report Dated 5-7-76	Medical Examination Report Dated 5-7-76
p A Mark Mil	Name of Physician J. spake & MD
Name of Physician Carlo Chapter 126, Indiana Acts 1905 prescribes "False stated to the 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, represe
on or pretense shall be lined in any	FEMALE APPLICANT
MALE APPLICANT	Name First Middle Last
ame First Middle Hardy	Date of Birth Month Day Year
ate of Birth Month Day 1944	Place of Birth (State or foreign country)
lace of Birth (State or foreign country)	Indianapoles Indiana City County St.
esidence Address Street or R. R. City County State	6421 Consulate & Indole Marion In
Port 300 A R R Discording Xenamans Trevious Marriages	Maiden Name if Different
Annulment [Previous Marital Status: Never Married Number of Previous Marriages
ast Marriage Ended By:	Last Marriage Ended By: Death Divorce Annulment Jan 196
olor or Race White Negro Other (specify)	Color or Race White Negro Other (specify)
Isual Occupation Attorney	4
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Cart I Indicial Decree
1. Are you now or have you been adjudged, diagnosed or considered as:	Date of birth verified by: Birth Cert, Judicial Decree
An Impecile? No Yes No Yes	1. Are you now or have you been adjudged, diagnosed or considered as:
2. Are you now or have you been within five (5) years an inmate of a county asylum or	An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed?	Of Unsound Mind? No
4. Are you related to the bride closer than second cousin?	Are you under guardianship as a person of unsound mind? No
6. Are you now under the influence of intoxicating liquor?	3. Are you afflicted with a transmissible disease: 4. Are you related to the groom closer than second cousin? No [5]
7. Are you now under the influence of a harcotte didg. 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? 11. Yes No	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 Medilate Cathing Laboration
(a) List their full names, ages and addresses Name Age Address	Residence of father (if deceased so state)
	Occupation of father Race of father Race of father And
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes □ No □	8. Full maiden name of mother Andread State of the state
(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 Shapes Haragan	Occupation of mother Race of mother
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Race of father Race of father	State of Indiana, I depose and state the information
Birthplace of father (State or foreign country)	County of
12. Full maiden name of mother Additional State (if deceased so state)	Signed Along & Handson
Occupation of mother Returned Race of mother Language	New Address P. P. 1 Box 3007, Blownshaw
Birthplace of mother (State or foreign country) M. Junes Duo	Subscribed and sworn to before me this 25 day of Muy
The state of the s	Subscribed and sworn to before the difference
State of Indiana, I depose and state the information given	Llen In Lawer Gerk HENDRICKS Circuit
State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Blen 77 Theway Gerk HENDRICKS Circui
State of Indiana, State of Indiana, State of Indiana, I depose and state the information given	Consent of parents, parent or Guardian
State of Indiana, County of HENDRICKS ss: In depose and state the information given in this application is true and correct. Signed Automotive Address. Sold Ret Describing a state the information given 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
State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Consent of parents, parent or Guardian
State of Indiana, County of HENDRICKS ss: In depose and state the information given in this application is true and correct. Signed New Address Port 300A CC Descripting of Subscribed and sworn to before me this 25 day of May 1976.	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one
State of Indiana, County of HENDRICKS Signed Signed Ref Description is true and correct. New Address Day ClerkHENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one
State of Indiana, County of HENDRICKS Signed Sold Colling is true and correct. New Address Subscribed and sworn to before me this 35 day of May ClerkHENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one
State of Indiana, County of HENDRICKS Signed Signed Ref Description is true and correct. New Address Day ClerkHENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one signs, state facts which render the consent of the other parent unnecessary. State of Indiana,
State of Indiana, County of HENDRICKS Signed Signed Ref Description is true and correct. New Address Day ClerkHENDRICKS Circuit Court CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one signs, state facts which render the consent of the other parent unnecessary.
State of Indiana, County of HENDRICKS Signed New Address Subscribed and sworn to before me this Aday of May 1976. ClerkHENDRICKS 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 signs, state facts which render the consent of the other parent unnecessary. State of Indiana,
State of Indiana, County of HENDRICKS Signed New Address Subscribed and sworn to before me this day of ClerkHENDRICKS 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	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of
State of Indiana, County of HENDRICKS Signed New Address STOSOA COTTON Survey ClerkHENDRICKS ClerkHENDRICKS 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	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one signs, state facts which render the consent of the other parent unnecessary State of Indiana, County of HENDRICKS.
State of Indiana, County of HENDRICKS Signed New Address Subscribed and sworn to before me this day of ClerkHENDRICKS 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	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one 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 New Address Subscribed and sworn to before me this 25 day of May 1976. ClerkHENDRICKS 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 Signed Father Signed Mother Subscribed and sworn to before me this. day of May 1976. Clerk	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one 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. day of
State of Indiana, County of HENDRICKS Signed New Address. Subscribed and sworn to before me this. ClerkHENDRICKS 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 Mother Subscribed and sworn to before me this. Aday of 1926 ClerkHENDRICKS 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 Mother Subscribed and sworn to before me this. Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one 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 day of the above named particular to t
State of Indiana, County of HENDRICKS Signed New Address Subsgribed 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. State of Indiana, County of HENDRICKS Signed Signed State of Indiana, County 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. State of Indiana, County of HENDRICKS Signed Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY.	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of
State of Indiana, County of HENDRICKS Signed New Address Subscribed and sworn to before me this day of Mary ClerkHENDRICKS 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 Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY of HENDRICKS in authorizes and directs the issuance of the interval of the issuance of the interval of the issuance of the	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one 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. DRT. A marriage license having been refused to the above named partice of a marriage license to the above named parties.
State of Indiana, County of HENDRICKS Signed New Address Subscribed and sworn to before me this day of Clerktendricks 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 Signed Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY of HENDRICKS in authorizes and directs the issuance RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one 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 day of the above named particular to the above named particular to a marriage license to the above named parties. INTERIOR HENDRICKS CITCHIENTS COUNTY OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one signs, state facts which render the consent of the other parent unnecessary. Signed Signed Subscribed and sworn to before me this. COUNTY OF THE PARENTS IN THE PARENT
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 signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of
Subscribed and sworn to before me this. State of Indiana, County of HENDRICKS Signed New Address. Subscribed and sworn to before me this. ClerkHENDRICKS 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 Subscribed and sworn to before me this. County of HENDRICKS Signed County of Jerry County Mother Subscribed and sworn to before me this. Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY HENDRICKS County In authorizes and directs the issuance RETURN OF MARRIAGE LICEN RETURN OF MARRIAGE LICEN RETURN OF MARRIAGE LICEN RETURN OF MARRIAGE LICEN Of Indiana dated the day of day	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one 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 ORT. A marriage license having been refused to the above named particular to grave a marriage license to the above named parties. SEE AND MARRIAGE CERTIFICATE tense issued by the clerk of the HENDRICKS Circuit described and an authorizing the joining together as husband and an authorizing the joining together as husband and and the consent of the substant and the property of th
State of Indiana, County of HENDRICKS Signed New Address Subscribed and sworn to before me this About ClerkHENDRICKS 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 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 Complete IF Marriage License Issued by Order of County Hendricks In authorizes and directs the issuance Return of Marriage license and the county of Indiana dated the Aday of Marriage license and the following marriage and first the first true and correct. The first and correct the information given to the partiage and street the information given and the first and the firs	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one 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 the above named partic. Court by written order issued of a marriage license to the above named parties. ISE AND MARRIAGE CERTIFICATE tense issued by the clerk of the HENDRICKS and Alexandra Subscribed and
State of Indiana, County of HENDRICKS Signed New Address Subscribed and sworn to before me this. 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. Signed Subscribed and sworn to before me this. 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 of HENDRICKS County in authorizes and directs the issuance RETURN OF MARRIAGE LICENS RETURN OF MARRIAGE LICENS Be it further remembered, the following marriage certificate was filed in my one thousand nine hundred and	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one 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 Ourt by written order issued of a marriage license to the above named parties. ISE AND MARRIAGE CERTIFICATE ense issued by the clerk of the HENDRICKS Circuit and Jaluary And Jaluary And Jaluary And Jaluary And Jaluary And Jaluary And Jaluary And Jaluary And Jaluary And Jaluary And Jaluary
State of Indiana, County of HENDRICKS Signed New Address Subscribed and sworn to before me this. 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. Signed Subscribed and sworn to before me this. 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 of HENDRICKS County in authorizes and directs the issuance RETURN OF MARRIAGE LICENS RETURN OF MARRIAGE LICENS Be it further remembered, the following marriage certificate was filed in my one thousand nine hundred and	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one 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 Ourt by written order issued of a marriage license to the above named parties. ISE AND MARRIAGE CERTIFICATE ense issued by the clerk of the HENDRICKS Circuit and Jaluary And Jaluary And Jaluary And Jaluary And Jaluary And Jaluary And Jaluary And Jaluary And Jaluary And Jaluary And Jaluary
State of Indiana, County of HENDRICKS Signed New Address Subscribed and sworn to before me this. State of Indiana, County of HENDRICKS Signed ClerkHENDRICKS 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. COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY HENDRICKS County In authorizes and directs the issuance RETURN OF MARRIAGE LICENSE Be If Remembered, there was filed in my office a marriage lice of Indiana dated the day of Harriage certificate was filed in my one thousand nine hundred and State of Indiana, Groom Marriage Local Lands Lan	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one 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 day of the above named particular to a marriage license having been refused to the above named particular to a marriage license to the above named particular to a marriage license to the above named particular to a marriage license to the above named particular to a marriage license issued by the clerk of the HENDRICKS Circuit SEE AND MARRIAGE CERTIFICATE There is sued by the clerk of the HENDRICKS Circuit of its and the substantial to office, to wit: Thereby certify that on the day of James at Marguetta and County o
State of Indiana, County of HENDRICKS Signed New Address. Subscribed and sworn to before me this. Signs, state facts which render the consent of the other parent unnecessary. State of Indiana. County of HENDRICKS Signed Signed Signed State facts which render the consent of the other parent unnecessary. State of Indiana. County of HENDRICKS Signed Signed Mother Subscribed and sworn to before me this. Signed Signed Mother COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY. HENDRICKS County authorizes and directs the issuance of Indiana dated the day of Marriage certificate was filed in my office a marriage lice of Indiana dated the day of Marriage certificate was filed in my one thousand nine hundred and State of Indiana, Groom Marriage License Indiana State of Indiana, Groom Marriage License Address State of Indiana, Groom Marriage License License Indiana State of Indiana, Groom Marriage License License Indiana State of Indiana, Groom Marriage License License Indiana State of Indiana, Groom Marriage License	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one signs, state facts which render the consent of the other parent unnecessary. State of Indiana, County of
State of Indiana, County of HENDRICKS Signed New Address. New Address. Subscribed and sworn to before me this. State of Indiana. County of HENDRICKS Signed ClerktENDRICKS 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 Pather Signed Mother Subscribed and sworn to before me this. Signed Pather S	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one 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 day of Ourt by written order issued of a marriage license having been refused to the above named parties. SEE AND MARRIAGE CERTIFICATE There is issued by the clerk of the HENDRICKS Circuit And Sherriff that on the day of HENDRICKS of License issued by the clerk of the day of Hendricks and office, to-wit: hereby certify that on the day of Hendricks and of Hendricks and County, State of Hendricks and County, State of Hendricks are that purpose by the Clerk of the Circuit County of Hendricks are that purpose by the Clerk of the Circuit County of Hendricks are that purpose by the Clerk of the Circuit County of Hendricks are that purpose by the Clerk of the Circuit County of Hendricks are that purpose by the Clerk of the Circuit County of Hendricks are that purpose by the Clerk of the Circuit County of Hendricks.
State of Indiana, County of HENDRICKS Signed New Address. New Address. Subscribed and sworn to before me this. State of Indiana. County of HENDRICKS Signed ClerktENDRICKS 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 Pather Signed Mother Subscribed and sworn to before me this. Signed Pather S	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one 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 day of Ourt by written order issued of a marriage license having been refused to the above named parties. SEE AND MARRIAGE CERTIFICATE There is issued by the clerk of the HENDRICKS Circuit And Sherriff that on the day of HENDRICKS of License issued by the clerk of the day of Hendricks and office, to-wit: hereby certify that on the day of Hendricks and of Hendricks and County, State of Hendricks and County, State of Hendricks are that purpose by the Clerk of the Circuit County of Hendricks are that purpose by the Clerk of the Circuit County of Hendricks are that purpose by the Clerk of the Circuit County of Hendricks are that purpose by the Clerk of the Circuit County of Hendricks are that purpose by the Clerk of the Circuit County of Hendricks are that purpose by the Clerk of the Circuit County of Hendricks.
State of Indiana, County of HENDRICKS Signed New Address New Address Subscribed and sworn to before me this County of HENDRICKS Subscribed and sworn to before me this Clerktiendricks 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 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 of HENDRICKS Signed Subscribed and sworn to before me this. Aday of 19. Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY. In authorizes and directs the issuance RETURN OF MARRIAGE LICENSE ISSUED of Indiana dated the day of the subscribed in my office a marriage license filed in my office a marriage license to following marriage certificate was filed in my in the subscribed for the following marriage certificate was filed in my in the subscribed for th	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one 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 day of URT. A marriage license having been refused to the above named partice. Court by written order issued an arriage license to the above named parties. ISE AND MARRIAGE CERTIFICATE tense issued by the clerk of the HENDRICKS Circuit of gifter, to-wit: hereby certify that on the day of the hereby certify that on the at Displace of Allandian County, State of Andreas of Landian County, State of Andreas of that purpose by the Clerk of the Circuit Court of HENDRICKS Signed Mandal
State of Indiana, County of HENDRICKS Signed New Address. New Address. Subscribed and sworn to before me this. State of Indiana, County of HENDRICKS Signed ClerktENDRICKS 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 Mother Subscribed and sworn to before me this. Subscribed in Mother Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY. RETURN OF MARRIAGE LICEN RETURN OF MARRIAGE LICEN RETURN OF MARRIAGE LICEN Be it further remembered, the following marriage centificate was filed in my one thousand nine hundred and Subscribed in marriage continuation one thousand nine hundred and Subscribed in marriage as authorized by a marriage license issued for County.	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one 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 day of Court by written order issued of a marriage license to the above named parties. SEE AND MARRIAGE CERTIFICATE tense issued by the clerk of the HENDRICKS Circuit of grade for the county of the count

Medical Examination Report Dated 5-15-76

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

FEMALE

No. 185
File Bk 37
May 26 1976 Date of Application

Name of Physician Ired R Brooks m D	Medical Examination Report Dated 5-15-76
	N. A.
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
MALE APPLICANT	Whoever procures the issuance of a license to marry by any false statement, representa
Name First Middle Last	FEMALE ADDITIONS
Date of Birth Month Day Year	Name First Middle Lost
July 29 12:11	Date of Birth Month Day Kensey
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) 4 Year 1947
Residence Address Street or R. R. City County State	Pail Indianapali - Und
Previous Marital Status: Never Married Number of Previous Marriages	RP#1 B 1724 K. H. City County . State
	Maiden Name if Different Pulls for Landucks And
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriago Fried D.
Usual Occupation Manhanest	Death Divorce Annulment
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)
Other (Specify)	Usual Occupation
1. Are you now or have you been adjudged, diagnosed or considered as:	Date of birth verified by: Birth Cert. Judicial Decree
Of Unsound Mind?	Other (Specify) # 113-47-005360
3. Are you now or have you been within five (5) years an inmate of a county	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? No Yes Ves Ves Ves Ves Ves Ves Ves Ves Ves V	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? 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? Yes 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?
Name Age Address	7. Full name of father Kalast Klassif
	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□ (c) Are you complying with any court order or orders issued for	8. Full maiden name of mother Wellie Belle Mungay
their support?	Residence of mother (if deceased so state)
11. Full name of father Roscoe Flanklin Micholson	Occupation of mother that That of mother to
Residence of father (if deceased so state) Taris Allenas	Birthplace of mother (State or foreign country) Cleaton
Occupation of father Farmer Race of father W.	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.
12. Full maiden name of mother Tourse Dettude Deleb	h. H. I
Residence of mother (if deceased so state) Paris Illinois	Signed X Novice Survey Signed
Occupation of mother Race of mother Race of mother	New Address R. R. Rock Wille, android
Birthplace of mother (State or foreign country) // Auskall State of Indiana,	Subscribed and sworn to before me this %6 day of Many 1976.
County of HENDRICKS I depose and state the information given in this application is true and correct.	Elen M Hawey Clerk HENDRICKS Circuit Court
Signed Thomas () . Richelson	
New Address R. Rockville and	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this 24 day of Mary, 1926.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Dlen M Larvy 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 ofHENDRICKS	SignedFather
Signed Father	Signed Mother
Signed Mother	Subscribed and sworn to before me this
Subscribed and sworn to before me this	Clerk
Clerk	A STATE OF THE STA
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	. A marriage license having been refused to the above named parties, the
HENDRICKS County Cou	rt by written order issued and filed
in authorizes and directs the issuance of	a marriage license to the above named parties.
	- COMMING A THE
Be It Remembered there was fled in my office a marriage licens	e issued by the clerk of the
Thursday dated the	19 / authorizing the joining together
D. Thomas (1)	1 Dabbel Sul
Be it further remembered, the following marriage certificate was filed in my off Rev. Charles No.11	ice, to-wit: 19th June June
Rev. Charles Noll one thousand nine hundred and 76 State of Indiana, Groom Thomas A. Nicholson	Proving burg County of Hendricks
State of I	Drownsburg , County of Tilinois
State of Indiana, Groom. Thomas A. Nicholson	Edgar County, State of Indiana
Dride Kobbi a C Tr	Uandricks Country, Deare of
County, and united in marriage as authorized by a marriage license issued for the	nat purpose by the Clerk of the Circuit Court of
Dated this lst day of June , 19 76	Rev Charles Noll
day of June , 19	Rev . Charles Noll Catholic Priest
Pilot	fficial Designation
On the day of the State of Indiana this	22nd day of June Clerk
Some the tays of the Blace of Indiana steements	22nd day of June Clerk Signed Slin M Harveef Circuit Court
	HENDRICKS.

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No.	106	
File_	Ex 37	
	may 27	1971

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

HENDRICKS County

Date of Application

	FEMALE Medical Examination Report Dated 5-17-74
MALE Medical Examination Report Dated 5-17-76	Name of Physician Suc Plank
Name of Physician Enic Clark	Name of 1.1,
Name of This course of the state of the stat	atement—Whoever procures the issuance of a license to marry by any false statement, represents
ion of precents	847.431
MALE APPLICANT Middle Last	Name First A Person
Vame Riest alder Year	Date of Birth Month Bay Year
late of Birth Month Day	Place of Birth (State or fdreign country)
Place of Birth (State or foreign country)	Chick Canto D. P. P. City County State
Lesidence Address Street of R. R. City County State	Residence Address Street of the Clayton Kendeloks Ind
f 4 # 2 Box 148 Roachdale Tullan	Maiden Name if Different
revious Marital Status: Never Married Number of Previous Marriages	Previous Marital Status: Never Married Number of Previous Marriages.
ast Marriage Ended By: Death Divorce Annulment D	
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
olor of race	Color or Race White Negro Other (specify)
Jaul Occupation Men Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Toronthorna
Other (Specify) # 44095 B	Date of birth verified by: Brirth Cert. Judicial Decree
1. Are you now or have you been adjudged, diagnosed or considered as:	Other (Specify) = 48393 f5
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? No Yes 3. Are you now or have you been within five (5) years an inmate of a county asylum or Yes Yes Yes	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? No TYes
4. Are you afflicted with a transmissible disease?	2. Are you under guardianship as a person of unsound mind? No TY Yes
 6. Are you now under the influence of intoxicating liquor? No ☑ Yes □ 	3. Are you afflicted with a transmissible disease? No P Yes
7. Are you now under the influence of a narcotic drug?	4. Are you related to the groom closer than second cousin? No E 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 intexicating liquor? No 2 Yes
0. Do you have minor children from one or more former marriages? No [Yes]	6. Are you now under the influence of a narcotic drug? Ne Yes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father School and the State of the State
Name Age Address	Residence of father (if deceased so state)
	Occupation of father State or foreign country) Indiana State of father State or foreign country)
	June Theren
(b) Are you supporting or contributing to their support? Yes □ No □	8. Pull maiden name of mounty
(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 Ysland Lee Ruen	Occupation of mother and the hardeness and mother any page 1
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Talman Race of father to	State of Indiana,
Birthplace of father (State or foreign country) Martinsually	State of Indiana. County of HENDRICKS. Sas: I depose and state the information gives in this application is true and corre
12. Full maiden name of mother August Market Company	and Power
Residence of mother (if deceased so state)	Signed A
Occupation of mother Assessed Race of mother A	New Address D. K. J. and J. J. M. S. B. B. Mang. S. A.
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of day of
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Alle The Service Clerk HENDRICKS Circuit Co
Signed Kan A July	
New Address RR 2 Roach Sale Jrd	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of Many, 1976.	We, the parents, of this applicant hereby give consent for this marriage. If only one par
ClerkHENDRICKS 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	ATTENDED TO THE PROPERTY OF TH
signs, state facts which render the consent of the other parent unnecessary	No.
	Show of the transfer of the tr
State of Indiana,	State of Indiana, County ofHENDRICKS
County ofHENDRICKS ss:	
Signed Father	Signed
Signed	Signed
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF	
HENDRICKS County County	RT. A marriage license having been refused to the above named parties,
in authorizes and directs the issuance	ourt by written order issued and fi
PETUDN OF MARKET	of a marriage license to the above named parties.
Be It Remembered, there was filed in my office a marriage live	SE AND MARRIAGE CERTIFICATE
of Indiana dated the	this issued by the clerk of the HENDRICKS Circuit Co
Be it further room and a lile	, 19 , authorizing the joining together as husband and 1
Be it further remembered, the following marriage certificate was filed in my 1, Malculm Chilz	and delt to the things the
one thousand nine hundred and	nereby certify that
I, Malcolm Deliler one thousand nine hundred and 76 State of Indiana, Groom Ray Glden Reier and, Bride Augleth	at 6 as tease 11.
and, Bride Judeth Of Glalen neier	of County of Henchrich
	The state of the s
County as authorized by a many	Carrie Clark at Line at
Dated this 571 day of June, 197	purpose by the Clerk of the Circuit Court of HENDRICKS
Jehled, 19.7.	
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Minister of the Gassel
The same this	and day of July 10 76
	Signed Illn M. Jarvey
	HENDRICKS Circuit Co

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS
County

No. 187

FEMALE

No. 187

File Bk 37

Date of Application

MALE Medical Examination Report Dated 5-25-76	FEMALE That 27 1976 Date of Application
Name of Physician Jamas Walker	FEMALE Medical Examination Report Dated 5 - 25 - 76
	Name of Physician Thomas 10000
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name First Middle	tement—Whoever procures the issuance of a li
Name First Middle	The statement of a license to marry by any false statement, representa-
Pete of Birth Month Day Jones San	Name First Middle
Place of Birth (State or foreign country) 13 Year 1954	Date of Birth Month Day Lunguage
Indiana polis and	Place of Birth (State or foreign country)
Residence Address Street or R. B. City County State	Residence Address Street or B. D. D.
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Pkury B' Buy Vendula Void
Last Marriage Ended By: Death Divorce Annulment Annulment	Previous Marital State
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
Usual Occupation Maintenance	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Cert. Judicial Decree Other (Specify) # 1/3 - 54-045773	Color or Race White Negro Other (specify)
1. Are you now or have you been adjudged, diagnosed or considered as	Usual Occupation Themplayed
Of Unsound Mind?	Date of birth verified by: Birth Cert. Judicial Decree
3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as:
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	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
6. Are you now under the influence of intoxicating liquor? No Ves	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 V	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 Delisar's Race of father 10
	Birthplace of father (State or foreign country) Rus Luille, State
(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? Yes No No No	Residence of mother (if deceased so state)
Residence of father (if deceased so state) Elatton , Florida	Occupation of mother Race of mother Race of mother Birthplace of mother (State or foreign country)
Occupation of father Wilder Race of father W	CONTRACTOR OF THE PARTY OF THE
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS I depose and state the information given in this application is true and correct.
Residence of mother (if deceased so state)	Signed Jana L Hunsing
Occupation of mother Palice Mandatana Race of mother LD	New Address Bloga C North Glenarm Rd Intgl 46224
Birthplace of mother (State or foreign country) Apple Jad	Subscribed and sworn to before me this 27 day of May 1976
State of Indiana, County of	Dlen M Haway Clerk HENDRICKS Circuit Court
Signed X Lany Thompson	
New Address 3642 C NORTH GLEN ARM INDIANAPOLIS	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 27 day of May 1976.	we, the parents, of this applicant hereby give consent for this man rage. It can be signs, state facts which render the consent of the other parent unnecessary
Clerk HENDRICKS Circuit Court	signs, state facts which related the control of the
ONSENT OF PARENTS, PARENT OR GUARDIAN Ye, the parents, of this applicant hereby give consent for this marriage. If only one parent	
igns, state facts which render the consent of the other parent unnecessary	
	State of Indiana,
tate of Indiana,	County of HENDRICKS
ounty ofHENDRICKS.	Signed Father
Signed	Signed Mother
Signed	Subscribed and sworn to before me this
Clerk	
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	. A marriage license having been refused to the above named parties, the
Coll	rt hy Written order issued
authorizes and directs the issuance of	a marriage needs
RETURN OF MARRIAGE LICENSE	AND MARRIAGE CERTIFICATION HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage license Indiana dated the day of	authorizing the joining together as husband and wife
	b
the following marriage certificate was first the following marriage was first the following marriage was first the first the following marriage was first the following marriage was first the following	day of pulled
the thousand nine hundred and 76 at	Bracensburg, County of Sendrectes
thousand hine hundred and	County, State of Annual
ate of Indiana, Groom Kenny It Thompson of Indiana, Groom Kenny It Thompson of It was issued for the	Jena by the Clerk of the Circuit Court of HENDRICKS
me united in marriage as authorized by a marriage license issued	at purpose by the certain
nunty. Ated this 4 day of June, 1976	. Signed Jurrey J. Mash
	noral Designation 1976.
iled and recorded in accordance with the laws of the State of Indiana this	9 day of Harvelf Clerk
Successful accordance with the laws of the State of The	igned HENDRICKS Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

may 27, 1976
Date of Application
5/23/1/

Form Prescribed By Indiana State Board of Health under Authority APPLICATION FOR M.	IARRIAGE LICENSE File
Health under Authority Chap. 126, Ind. Acts 1905 HENDRICK	mail +1 1976
	FEMALE 5/23/76
MALE Medical Examination Report Dated 5/23/76	Medical Examination Report Dated (haspel Ind.
Name of Physician /t. P. Palmus	Name of Physician U () ()
Name of Physician ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False statting or preferse 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-
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	FEMALE APPLICANT
Name J. First A. Middle B. 10 M. 2011	Name Delorus F. Clail
Date of Birth Month Day Year	Date of Birth Month Day Year 1958
Place of Birth (State or foreign country)	Place of Birth (State or foreigh 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
Dast Marriage Diluct By.	Last Marriage Ended By: Death Divorce Annulment
Color of Mate	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation //ne mb(rue)
Other (Specify) # 19102 - B	Date of birth verified by: Birth Cert. Indicial Decree
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes No Yes	Other (Specify) # 1036 \$
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
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? No Yes	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 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	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 \(\subseteq \) No \(\subseteq \)	4. Are you related to the groom closer than second cousin? No Yes 5. Are you now under the influence of intoxicating liquor? No Yes
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? Yes No 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 Alexa Suther Gull
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Adams Indiana Sulland
	8. Full maiden name of mother Barbara, Jan Beckley
(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? James Algren Barriott	Occupation of mother South Realty Race of mother White
11. Full name of father	Birthplace of mother (State or foreign country)
Occupation of father Sallsman Race of father Sallsman	State of Indiana,
Birthplace of father (State or foreign country)	State of Indiana, County ofHENDRICKS
Residence of mother (if deceased so state)	Signed De larus Co Ceal
Occupation of mother and the fall work Race of mother White	New Address 2325 S. Harlan St. Indols.
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this 27 day of My , 196
State of Indiana, County of HENDRICKS Ss: I depose and state the information given in this application is true and correct.	All M. Mersey Clerk HENDRICKS Circuit Court
Signed Felth A Magalify	CONSTRUCTION DATES TO THE PARTY OF THE PARTY.
New Address OSOS Hawahn St Indo	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 19.	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 ofHENDRICKS
County of HENDRICKS Father	Signed 1. Cocil Father
Signed	Signed a art ou land Mother
Subscribed and sworn to before me this	Subscribed and sworn to before me this day of 19 19
	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	RT. A marriage license having been refused to the above named parties, the
HENDRICKS County Co	ourt by written order issued and filed
in authorizes and directs the issuance of	
Be It Remembered, there was filed in my office a marriage licer	E AND MARRIAGE CERTIFICATE nse issued by the clerk of the HENDRICKS Circuit Court
of Indiana dated the day of June	, 19.2 , authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my	1 hills the said HI IV c
I, Stephen & Sittle	bereku gentifu that an tha
one thousand nine hundred and	at socklane Christian Ch. Come of the con-
State of Indunta Groom.	-1 // 2 / 1 // 1
01	Nendricks) County State of
County.	that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this 4 day of June, 19 70	Games Standar A P'++0.
	Official Designation astor Slegsant Valley VCB
Filed and recorded in accordance with the laws of the State of Indiana this	7 day of July 10 76
man turner	Signed Glen M Harvely Clerk
	HENDRICKS Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County MALE Medical Examination Report Dated Date of Application FEMALE Medical Examination Report Dated Naved m 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-FEMALE APPLICANT Name arman Date of Birth Middle Place of Birth (State or Previous Marital Status: Never Married Number of Previous Marriag 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 Color or Race White Negro Other (specify)... Birth Cert. Judicial Decree Date of birth verified by : 4 4456 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 Yes 🗆 Of Unsound Mind? 113-55-066509 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 asy home for indigent persons? 1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No P 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 🗌 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 D Yes 🗌 you afflicted with a transmissible disease? 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 🖸 No 🗆 9. Are you likely to so continue? Yes No 🗆 5. Are you now under the influence of intoxicating liquor? No 13 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 Address Age Jactory (b) Are you supporting or contributing to their support? No 🗆 (c) Are you complying with any court order or orders issued for Birthplace of mother (State or foreign country) xuard State of Indiana, Birthplace of father (State or foreign country) Residence of mother (if deceased so state) 1230 Complete Occupation of mother / Housewell Birthplace of mother (State or foreign country) Mew I depose and state the information given in this application is true and correct. Yarveycherk HENDRICKS CONSENT OF PARENTS, PARENT OR GUARDIAN New Address RABOX 91 We, the parents, of this applicant hereby give consent for this marriage. If only one parent 1976 Subscribed and sworn to before me, this ... signs, state facts which render the consent of the other parent unnecessary. Clerk 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. HENDRICKS County of..... State of Indiana. County of HENDRICKS .. Father Mother Signed. Subscribed and sworn to before me this..... ...day of... COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the HENDRICKS 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 HENDRICKS , 176, authorizing the joining together as husband and wife June neense Frances Marie Arnold of Indiana dated the lot day ofand..... Douglas Preston Warman hereby certify that on the 1st day of June. Be it further remembered, the following marriage certificate was filed in my office, to-wit: at Danville , County of Hendricks, I, John C. Mowrer one thousand nine hundred and. and, Bride Frances Marie Arnold 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 County. County. Signed John G. Mowrer Official Designation Judge, Hendricks County Court Dated thisClerk Filed and recorded in accordance with the laws of the State of Indiana thisCircuit Court Signed .. HENDRICKS.....

STATE OF INDIANA

Form Prescribed By Indiana State Board of Health under Authority APPLICATION FOR N	IARRIAGE LICENSE
Chap. 126, Ind. Acts 1905 HENDRICK	SCounty Date of Application
	FEMALE
MALE 5- 28-76	Medical Examination Report Dated 3-28-76
Medical Examination Report Dated	Name of Physician M. D. Scamahorn M. D.
Name of Physician /// Alamahara, white	ement.—Whoever procures the issuance of a license to marry by any false statement, representa-
Name of Physician / /	FEMALE APPLICANT
MALE APPLICANT	Name First Middle L Last
Name First Middle Last	Date of Birth Month Day Year
Date of Birth Month Day Year	Place of Birth (State or tereign country) 4956
Place of Birth (State or foreign country)	alhor / (ichigan
Residence Address Street or R. R. City County State	Residence Address Box 280, Fraton In.
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different
Terious statement C	Previous Marital Status: Never Married Number of Previous Marriages
Last Marriage Ended by: Death Death	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	Color or Race White Negro Other (specify)
Usual Occupation Farts Man	Color or 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:	Other (Specify)
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes \to Yes \	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?	Of Unsound Mind? No Yes 2. Are you under guardianship as a person of unsound mind? No Yes Yes Yes
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 the second of
6. Are you now under the influence of intoxicating liquor? No Yes 7. Are you now under the influence of a narcotic drug? No Yes 7.	4. Are you related to the groom closer than second cousin? No Ves
8. Are you able to support a family?	5. Are you now under the influence of intoxicating liquor? No Ves \(\sigma \)
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 B Yes
(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 (if deceased so state) Residence of father (if deceased so state) Race of father Like
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother Rasimanie 9 mc Call
(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? 11. Full name of father Rubert D. Kelly	Occupation of mother Secretary Race of mother & Mich
Residence of father (if degeased so state) Dudianappells , In.	Birthplace of mother (State or foreign country) Ontania Canada
Occupation of father Sim Statum Attack Race of father W. A.	State of Indiana,
Birthplace of father (State or foreign country)	State of Indiana, County of
12. Full maiden name of mother MAN Sha I MACALLY Residence of mother (if deceased so state) Indianapplian, Inc.	Signed Cynthia S. TMLN
Occupation of mother (A) Addition Race of mother (A)	New Address 925 Winding Drook Paikwo
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this 28 day of May 19.76
State of Indiana, Sas: I depose and state the information given in this application is true and correct.	Hanney Gerk HENDRICKS Circuit Court
County of HENDRICKS In this application is true and correct.	
New Address 925 Winder Brook Farkwa	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this 28 day of May , 19 7/2	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
HILLAND CIERCHENDRICKS 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 ofHENDRICKS
Signed	SignedFather
Signed	Signed Mother
Subscribed and sworn to before me thisday of, 19,	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 C	ourt by written order issued
inauthorizes and directs the issuance	
Be It Remembered, there was filed in my office a magning a live	E AND MARRIAGE CERTIFICATE
of Indiana dated the day of day	nse issued by the clerk of the HENDRICKS Circuit Court 19 76, authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was flad:	and Cynthia Sul Frahn
1, Les harles noll	hereby certify that on the 5 day of June
State of Indiana, Groom John Mark Hell,	at Mounsburg, County of Jundrucks
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 /st day of June, 19 7	Committee Court of the Court of
, 192.	Signed Lev Charles noll
Filed and recorded in accordance with the laws of the State	Official Designation Latholic Priest
Filed and recorded in accordance with the laws of the State of Indiana this	I day of June , 19 76.
	Signed Illen M. Harvey Clerk
	HENDRICKS Circuit Court

APPLICATION FOR MARRY

Chap. 126, Ind. Acts 1900 HENDRIC	MARRIAGE LICENSE File
MALE	County
Medical Examination Report Dated 5-17-76	FEMALE Date of Application
Name of Physician M. D. Scamphon M. &	Medical Examination Report Dated 5-17-76 Name of Physician M. O. January
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	stement When the second was the second when the second was the second when the second was the se
MALE APPLICANT	Whoever procures the issuance of a license to marry by any false statement
Name Ptrst Middle Last	FEMALE APPLICANT
Date of Birth Month Day Year	Name First Middle
Place of Birth (State or foreign country)	Date of Birth Month Day Phillips
Brown Jup. Indiana	Place of Birth (State or topeign country)
Residence Address State 3/1 D. Main Brownshura D.	Residence Address Street or R. R. City Uprk
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Main, Brownshups As
Last Marriage Ended By: Death Divorce Annulment	Needelman.
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
	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 R 1 1
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes	Date of birth verified by: Birth Cert. Dudicial Decree
Of Unsound mind: No Ves 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 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 uncound middle
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 V No	4. Are you related to the groom closer than second cousin? No Ves Yes
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?
(a) List their full names, ages and addresses Name Age Address	7. Full name of father Williams of Medelman
Jordan ayers 17 Carmel In	Residence of father (if deceased so state)
Keith ayers 15	Birthplace of father (State or foreign country)
Melissa Oijean 12	8. Full maiden name of mother fit Matthey W. Parker
(b) Are you supporting of contributing to their support? (c) Are you complying with any court order or orders issued for their support? Yes D. No D.	Residence of mother (if deceased so state)
their support? Yes No 11. Full name of father Assama Assamo	Occupation of mother Race of mother WA
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Race of father Why	Direnplace of mother (State of Toleign County)
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother // aryonic lucitt	The Paris
Residence of mother (if deceased so state)	Signed Muy 2 Muy
Occupation of mother	New Address DI C. Than Su promotion
Birthplace of mother (State or foreign country) Malana.	Subscribed and sworn to before me this day of May 19.16.
County of HENDRICKS I depose and state the information given in this application is true and correct.	Dless 11. Harrily Clerk HENDRICKS Circuit Court
Signed John J. Ches	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 3/V Cast Main St. Brownsburg and	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworn to before me this 28 day of Man, 19.76	signs, state facts which render the consent of the other parent unnecessary
HENDRICKS Circuit Court	signs, state facts which fetter at
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
igns, state facts which render the consent of the other parent unnecessary	
and tender the consent of the other parent directions.	
	State of Indiana,
tate of Indiana,	County of HENDRICKS Signed Father
ounty of HENDRICKS	Signed
Signed Father Signed Mother	Signed
ubscribed and sworn to before me this day of 19	Subscribed and sworn to before me this
Clerk	
	C. A marriage license having been refused to the above named parties, the
anthonizes and directs the issuance of	a marriage
TOTAL STREET	AND WARRIAGE Court
Be It Remembered, there was filed in my office a marriage licens	e issued by the clerk of the
f Indiana dated the day of Just	the issued by the clerk of the HENDRICKS The issued by the issued by the HENDRICKS The issued by the issued by t
e it further repembered, the following marriage certificate was filed in my of	ice, to-wit:
ne thousand nine hundred and 16	t Brownsburg County of Sendrella, t Brownsburg County, State of Indiana, Windricks County, State of Indiana,
I Illuming Comment (1) As Al.	LII (UULIU) DIII
ere by me united in marriage as authorized by a marriage license issued for thounty.	Mendricks County, State of Indiana, County, State of Indiana, County of HENDRICKS
with which we united in marriage as authorized by a marriage license issued for the	
day of	IM A [V/]
iled and recorded in accordance with the laws of the State of Indiana this	14 day of June Clerk Signed Slen M Harveef Circuit Court
and recorded in accordance with the laws of the State of Indiana tris	Signed Stew Circuit Court

Form Prescribed By

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

File_			
	m.	10	10
-	May	J81	17

Health under Authority Chap. 126, Ind. Acts 1905 APPLICATION FOR MATTER HENDRICKS County		
	Date of Application FEMALE	
MALE 5/24/76	Medical Examination Report Dated 3/24/76	
Medical Examination Report Dated	Name of Physician Jakne Ellett, J. Inc.	
Name of Physician ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state of the control of th	tement.—Whoever 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 tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	FEMALE APPLICANT	
MALE APPLICANT	Name O First Middle / 10 Last	
Name Steven Ray Settles	Date of Birth Month Day Year	
Date of Birth Month Day 1955	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	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 1/ S. Survece	Color or Race White Negro Other (specify)	
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Meridian Mutual	
Other (Specify) # 55-253/09 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	Other (Specify)	
3. Are you now or have you been within five (5) years an inmate of a county asylum or	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 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? 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? No Yes	
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father All All All All All All All All All Al	
Name Age Address	Occupation of father Addit Addition Rage of father Addition	
	Birthplace of father (State or foreign country)	
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Alla Agrae Wallace	
(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 Stable Li Settles	Occupation of mother De Calable Sollith Space of mother William	
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, I depose and state the information given	
12. Full maiden name of mother Add Add May 19	County of HENDRICKS in this application is true and correct.	
Residence of mother (if deceased so state)	Signed Jann Ellen alles	
Occupation of mother All Manual Race of mother Black	New Address R F 1 BOX 135 Clayton	
State of Indiana, I depose and state the information given	Subscribed and sworn to before me this day of All 19 G.	
County of HENDRICKS in this application is true and correct.	J. J. J. J. Mark HENDRICKS Circuit Court	
New Address R. R. G. O. V. 195 Clanton	CONSENT OF PARENTS, PARENT OR GUARDIAN	
Subscribed and sworn to before me this day of MM, 19	We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
The MANNEY CIERRICKS 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 ofHENDRICKS	County ofHENDRICKS	
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 of19	
	Clerk	
HENDRICKS COUNTY MARKINGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the	
in Clups Afric authorizes and directs the issuance of	ourt by written order issued 3 day white and filed	
RETURN OF MARRIAGE LICENSE	E AND MARRIAGE CERTIFICATE	
the my office a marriage licen	186 188 upd by the alast of the Designation	
of Indiana dated the 28th day of June STEVEN RAY SETTLES		
Be it further remembered, the following marriage certificate and filed	nd LXNN ELLEN ALLEE	
one thousand nine budget 76	ffice, to-wit: hereby certify that on the 28th day of MAY at CLAYTON , County of HENDRICKS of HENDRICKS County, State of INDIANA HENDRICKS County, State of INCIANA that murrous by the Claim of the county of the c	
State of Indiana, Groom. STEVEN RAY SETTIFS	at CLAYTON , County of HENDRICKS	
and, Bride LYNN ELLEN ALLEE	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 day of MAY , 19 7	6	
	Signed IEWELL REED	
Filed and recorded in accordance with the laws of the	0.001	
Filed and recorded in accordance with the laws of the State of Indiana this	day of June	
	Signed Signed Clerk	
	HENDRICKS Circuit Court	

Porm Press P			
Indiana State Health under Authority Chap. 126, Ind. Acts 1905	APPLICATION FOR	MARRIAGE LIGHTIGHT No. /9	23
Canal	HENDAUG	File_	CONTRACTOR OF THE PARTY OF THE
	HENDRIC	KS County	Control of the last of the las
MALE	8/11	- May 2	8 1976
Medical Examination Report Dated	3/24/76	FEMALE Date of Appl	ication
Name of Physician Mull	E. Beatt	Medical Examination Report Dated 5/3/7	6
	- Ling	0	
tion of pretense shall be fined in any sum not e	pter 126, Indiana Acts 1905 prescribes "False straceeding five hundred dollars (\$500)	Name of Physician Sruce E Bestement Whoever procures the issuance of a license to marry by any false state	alty
MALE APP	LICANT	procures the issuance of a license to marry by any false state	ement represent
Name First	Middle	Name FEMALE APPLICANT	representa-
Month Month	lie femon	Name First Middle	No of the latest and
Date of Darus	Year	Date of Birth	Last
Place of Birth (Stape or toreign county)	merci 5	Table Day	(earl)
Residence Address Stough of R. R.	City tol.	Place of Birth (State or foreign country)	1956
127 button a	We. Seath State On	Residence Address Street or R. R. City County	ennesse
Previous Marital Status Never Married D No	umber of Previous Marriages	Maiden Name If Different	State
		Dimerent Control of the Control of t	and ma.
Last Macriage Entere by	vorce Annulment	Previous Marital Status: Never Married Number of Previous Marriag	The state of the s
Color or Race White Negro Otl	her (specify)	Total Maria Control of the Control o	es
Atom tois	R.	Last Marriage Ended By: Death Divorce Annulment	DESCRIPTION OF THE PARTY OF THE
Usual Occupation Cliff Moderation Date of birth verified by District Cart. Disa	Birial Ducces	Color or Race White Negro Other (specify)	No. of Concession, Name of Street, or other party of the Concession, Name of Street, or other pa
OH - 411.	be 9 -1	Usual Occupation (specify)	······································
Other (Specify) 1. Are you now us have you been adjudged, diago	adoed or considered as:	- Decelery	
An Impecial ! Of Unsound Mind?	No Yes	Date of birth verified by: Birth Cert. Justicial Decree	
2. Are you under guardianship as a person of u		Other (Specify) # 14156-0655	
 Are you now or have you been within five home for indigent persons? 	(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?	
If answer to 3 is "yes" has the eases of such	condition been removed? No Yes	Of Unsound Mind?	No 🗆 Yes 🗀
4. Are you afflicted with a transmissible disease 5. Are you related to the bride closer than seeon	No No Yes	2. Are you under guardianship as a person of unsound mind?	No 🗆 Yes 🗀
4. Are you now under the influence of intention	Sea Cl I zea Cl	2. Are you afflicted with a transmissible disease?	No Yes
7. Are you now under the influence of a narro			No Yes
3. 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
16. Do you have minor children from one or more	Yes 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
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	the second second second	7. Full name of father John alfred (No Yes
Name	Age Address	1 11, 13	000
		Residence of father (if deceased so, state)	Illast.
		Tautel.	
		Birthplace of father (State or foreign country)	Fala
(b) Are you supporting or contributing to the (c) Are you complying with any court order		8. Full maiden name of mother	200 Com
their support?	Yes No	Residence of mother (if deceased so state)	I Into
11. Pull name of father At Sura	flery Jemen	Occupation of mother Manual Manual Race of mother	White
Residence of father (if degreesed so state)	Bloomington Is.	Birthplace of mother (State or foreign country)	1866
Occupation of father Little Alle	wei and of white	and the same of the same of the same of the same of	
Birthplace of father (State or foreign assunds	n Inleani	State of Indiana.	information given
Paul	line mulli	County of HENDRICKS In this application is	Authorities and the second
Residence of mother (if decensed so state)	Bloomeristen In	Signed Tra Kaye Carper	
Occupation of mother 14 74/174	her war at maker II) kelte	New Address 1124 Wester are Speed	devay Jud 46224
Birthplace of mother (State or foreign emants	Indiena	Subscribed and sworn to before me this	11 1976
State of Indiana.	I depose and state the information given	Allex M. Marsey, Clerk HENDRICKS	Circuit Court
County of MENDRICKS	in this application is true and correct.	John Soften Ship William Clerk How	Circuit Court
Signod Kinnell	restu demon,	CONSENT OF PARENTS, PARENT OR GUARDIAN	
Now Addition 1174 Delle	on Secology dry and	We, the parents, of this applicant hereby give consent for this marriage. It	f only one parent
Subscribed and sworn to before me this. 28	day of PM4 1926		
Hun m Harley	Clerk HENDRICKSClrevit Court	signs, state facts which render the consent of the other parent unnecessary	
CONSENT OF PARENTS, PARENT OR GUARI	DIAN		
We, the parents, of this applicant hereby give es			
signs, state facts which render the consent of th			
	Special Indiana	State of Indiana, HENDRICKS	
State of Indiana.	The second secon	County of HENDKILAS	Father
County of HENDRICKS	Company of the State of the Sta	Signed	
Signed	Father	Signed	Mother
Signed	Mother	Subscribed and sworn to before me this	, 19
Subscribed and sworn to before me this.	day of, 19		Clerk
	Clerk	Control of the State of the Sta	d parties the
COMPT DOWN	THE PER OPPER OF COUR	T. A marriage license having been refused to the above name	d parties, the
	E ISSUED BY ORDER OF COOK	T. A marriage license naving been reduced urt by written order issued	and med
HENDRICKS Coun	ty	f a marriage license to the above named parties.	THE RESIDENCE OF THE PARTY OF T
	authorizes and directs the landance	AND MARRIAGE CERTIFICATE	Circuit Count
	RETURN OF MARRIAGE LICENSE	se issued by the clerk of the HENDRICKS 19.76, authorizing the joining together as huse	hand and mife
Be It Remembered, there	was filed in my office a marriage titel	se issued by the clerk of the	sana ana wije
Kennoth Toolie	day of	Tha Kave Cooper	
Renneth Leslie Lemon	and the same filed in my o	mce, to-tott.	5
Joun A. Cooper		County of Della	irick ,
me thousand	76	hereby certify that on the 2001 day of Hence Plainfield Baptist Ch., County of Hence Marion County, State of Indi	iana
State of the state	enneth Leslie Lemon	of Handricks County, State of Inc	diana,
State of Indiana, Groom Kave Co	oper	Marion County, State of Indi Hendricks County, State of Inc. Hendricks County Court of HENDRICK	S.
Bride Lild Naye Co	The state of the s	that purpose by the Clerk of the Circuit Court of	SERVED OF STREET
county.	rized by a marriage license issued 70.	John A. Cooper	THE RESERVE
Dated av. 26th	June , 19	Signed Pontiet Ministe	
day of.		a will Designation	/0
	Charles and the second second	Official Designation Of darried Super 19	Clerk
filed and recorded in accordance with th	he laws of the State of Indiana this	28th day of June , 19 Signed Slen M Garrey HENDRICKS	Cimouit Court
accordance mans an		HENDRICKS	Oli Catt Sou.

Form Prescribed By Indiana State Board of

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

No	-144	
File		
	0	

Health under Authority Chap. 126, Ind. Acts 1905 HENDRICK	S County Date of Application
	FEMALE FEMALE
MALE Medical Examination Report Dated 5-28-76	Medical Examination Report Dated 3-20-19
Carlo C. Kirlin	Name of Physician
1005 prescribes "False stat	tement—Whoever procures the issuance of a license to marry by any false statement, representa-
tion or pretense shall be mice in the	FEMALE AFFLICANT
Name First (Middle Last	Name First Stiddle Cordler
Dete 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
R+12 Boy 53 Coatesvelle St.	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)
Usual Occupation (raig J. V.	
Date of birth verified by: Delirth Cert. Judicial Decree Other (Specify) Book Ch. 12 page 31	Date of birth verified by: Brirth Cert. Dudicial Decree
1. Are you now or have you been adjudged, diagnosed or considered as:	Other (Specify) # 44 6 800 H-16 p 40
Of Unsound Mind? Are you under guardianship as a person of unsound mind? No W Yes	1. Are you now or have you been adjudged, diagnosed or considered as: No Yes No Yes
3. Are you now or have you been within five (5) years an inmate of a county asylum or No Yes home for indigent persons?	An Imbecile? Of Unsound Mind? No (2) 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? No Yes 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 -
9. Are you likely to so continue?	5. Are you now under the influence of intoxicating liquor? No Yes No Yes No Yes
10. Do you have minor children from one or more former marriages? No Yes (If yes, answer questions a, b, c)	7. Full name of father Clarence fray Cordle
(a) List their full names, ages and addresses Name Age Address	Residence of father (if decembed so state) (ucta) In
	Occupation of father Kitista g Race of father
	Birthplace of father (State or foreign country) was Melick
(b) Are you supporting or contributing to their support? Yes ☐ No ☐	8. Full maiden name of mother / 1000 face face face face face face face face
(c) Are you complying with any court order or orders issued for their support?	Occupation of mother Anal Suspected Race of mother
11. Full name of father Manuel Wayne & Steph Plfd. Residence of father (if deceased so state) 262 Hanckek Hd. Plfd.	Birthplace of mother (State or foreign country) Indianapolis
Occupation of father Assaulty ontroperace of father	
Birthplace of father (State or foreign country) Kentucky	State of Indiana. County ofHENDRICKS as: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother A Coly Control	Signed Sandra L. Cordle
Residence of mother (if deepased so state) A Day 25 Countries of mother Datal Liles. Race of mother A	New Address 5013 Caroline St. Inapes
Birthplace of mother (State or foreign country) Indianapolis) In	Subscribed and sworn to before me this
State of Indiana, ss: I depose and state the information given	Glen M. Harvey Olerk HENDRICKS Circuit Court
County of HENDRICKS In this application is true and correct.	
New Address 50/3 Caroling 3+ lasple	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 signs, state facts which render the consent of the other parent unnecessary.
ClerkHENDRICKS Circuit Court	signs, state facts which render the consent of the other parent universely.
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 ofHENDRICKS
County ofHENDRICKS	Signed Father
Signed Father Signed Mother	Signed Mother
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of19
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
HENDRICKS County Craul Co	urt by written order issued 3 day wave and filed
in Clerk's Office authorizes and directs the issuance o	
RETURN OF MARRIAGE LICENSI Be It Remembered, there was filed in my office a marriage licen	E AND MARRIAGE CERTIFICATE use issued by the clerk of the HENDRICKS Circuit Court
of Indiana dated the day of day	4. 1976 authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my o	
1, Ger. map Fatman	hereby certify that on the 4
one thousand nine hundred and 76	at Indianapolis Country of The Mitoria
State of Indiana, Groom Waved Allan Estes	at Indianagalis , County of Hamilton. of Hendresks County, State of Sendiana
and, brue of of	Hamelton County State of help and
County	that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this 4 day of June, 1976	Signed Mas Forman
	Official Designation Minister
Filed and recorded in accordance with the laws of the State of Indiana this	7 day of June , 19 76.
	Signed Den M. Harrey Clerk
	HENDRICKS Circuit Court

STATE OF INDIANA

APPLICATION FOR MAR

Chap, 126, Ind. Acts 1997 HENDRIC	KS County File 195
MALE Socientian Penent Patel 5 20	-6-1-76 Pote 64 11
Medical Examination Report Dated 5-28-76 Name of Physician Daniel Gentry	FEMALE Medical Examination Report Dated 5-28-71
	10
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	tement—Whoever procures the issuance of a license to many
	DIMAN - was any false statement, representa-
Daniel S. Shall	Name First
Date of Birth December 18 Year	Date of Birth Month
Place of Birth (State or foreign country)	Place of Birth (State or foreign 19 1958
Residence Address Street or R. R. City County State	he die die die die die die die die die di
25 d. Cross Nanville, Ind.	Residence Address Street or R. R. City Indiana 252 Charles State
Previous Marital Status: Never Married Number of Previous Marriages Last Marriage Ended By: Death Divorce Annulment	Maiden Name if Different Wanvelle Ind.
	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White P Negro Other (specify)	Last Marriage Ended By: Death □ Divorce □ Annulment □
Usual Occupation Security Guard	Color or Page
Date of birth verified by: Birth Cert Judicial Decree	Hamilton Megro Other (specify)
Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation Unemplayed
An Impecile : No Yes Yes	Date of birth verified by: Birth Cert. Judicial Decree Bureau of Vital
2. Are you under guardianship as a person of unsound mind?	1 Are you now on how and the statesties to 6.7
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? No 4 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 affected 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 Z 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 innuence 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 No	5. Are you now under the influence of intoxicating liquor? No P 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 Cofford Earl Dawson
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Bridgepart Braineace of father 21
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Edurina Mal Sachlein
(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 Infalled of the Grench	Occupation of mother Mauselvill Race of mother I
Residence of father (if deceased so state) Arthurfully Sad	Birthplace of mother (State or foreign country)
Occupation of father Aryslek Carpe Race of father	State of Indiana, I denote and state the information given
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS I depose and state the information given in this application is true and correct.
12. Full maiden name of mother better the steel Mental Mentalle	signed Rolanna Pauson
Residence of mother (if deceased so state)	Signed
Occupation of mother Saleslevell Race of mother	New Address 76 /2 S. Jefferson, Camulle, On.
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this At day of June 19.74
State of Indiana, County of HENDRICKS Ss: I depose and state the information given in this application is true and correct.	Glen M. Farusef Clerk HENDRICKS Circuit Court
Signed & Daniel & French	
New Address 76 1/2 5. Jefferson Dowille Lad.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of, 19.76.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Blen M. Harvey 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	
	Tallong
	State of Indiana, County of HENDRICKS
State of Indiana,	Father
County ofHENDRICKS	Signed
Signed Father Mother	Signedday of
Signed	Subscribed and sworn to before me thisday of
Clerk	
	The appring a license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR'	r. A marriage necess and filed and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR' County Cou	f a marriage license to the above named parties.
authorizes and directs the issuance of	
THE PRINCE LICENSE	HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage license of Indiana dated the day of and are described in my office a marriage license of Indiana dated the day of an are described in my office a marriage certificate was filed in my of the following marriage certificate was filed in my office a marriage license of the following marriage certificate was filed in my office a marriage license of the following marriage certificate was filed in my office a marriage license of the following marriage certificate was filed in my office a marriage license of the following marriage certificate was filed in my office a marriage license of the following marriage certificate was filed in my office a marriage license of the following marriage certificate was filed in my office a marriage license of the following marriage certificate was filed in my office a marriage license of the following marriage certificate was filed in my office a marriage license of the following marriage certificate was filed in my office a marriage license of the following marriage certificate was filed in my office a marriage license of the following marriage certificate was filed in my office a marriage license of the following marriage certificate was filed in my office a marriage license of the following marriage certificate was filed in my office a marriage license of the following marriage license of	19.76, authorizing the joining together as husband and wife
Indiana dated the day of day	nd Johanna Mallison
Be it further remembered to the Mench was filed in my of	fice, to-wit:
Be it further remembered, the following marriage certificate was filed in my of Rev. Jerry G. VanLue	ereby certify that on the Church county of Hendricks,
Rev. Jerry G. VanLue The thousand nine hundred and the state of the s	Hendricks County State of Indiana
State of Indiana G. Daniel J. French	that purpose by the Clerk of the Circuit Court of Hendricks ChurchCounty, State of Indiana County, State of Indiana County, State of Indiana HENDRICKS HENDRICKS
State of Indiana, Groom. Daniel J. French and Bride. Roxanna Dawson of House by me united in marriage as authorized by a marriage license issued for to County.	enditicks description descript
vere by me united in the state of the state	hat purpose by the Clerk of the Circuit Court
County, the united in marriage as authorized by a marriage	76 - James C VanLue
Dated this 19th June , 19	Signed Minister
	Official Designation
2	2nd day of Clerk
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Glen M. Harveef Circuit Court

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

File_	P	19/2		
1 110	-	10		
	Quen	01	19	76

HENDRICKS Circuit Court

HENDRICKS	Date of Application
MALE 5/24/76	FEMALE Medical Examination Report Dated 5-24-76
Medical Examination Report Dated	Name of Physician A. M. Scudder
Name of Physician 4.11. Accuration	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 Faise state ion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	FEMALE APPLICANT
MALE APPLICANT	Name First Middle Last
Name Ralynt a. Middle Drigory	Date of Birth Month Day Year
Date of Birth Month Day 1956	Place of Birth (State or foreign country)
Place of Birth (State or foreign country) Marien And	Sprangert Delisianna
Residence Address Street or R. R. City County State	3/e Suntheridal, Brundung, In.
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different
A and mont	Previous Marital Status: Never Married Number of Previous Marriages
bast marriage blided by .	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	Color or Bace White Negro Other (specify)
Usual Occupation 1. S. Mary	Color or Race White W Negro U Other U (specify)
Date of birth verified by: Birth Cert. Judicial Decree Other (Specify) Juli Tuli Sum 7 3/2662/05	Usual Occupation Sulfit Cont Undicial Decree
1. Are you now or have you been adjudged, diagnosed or considered as: An Impecial 7 No Yes	Date of birth verified by: Birth Cert. Judicial Decree
Of Unsound Mind? Of Unsound Mind? No Yes 2. Are you under guardianship as a person of unsound mind? No Yes Yes	1. Are you now or have you been adjudged, diagnosed or considered as:
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons?	An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	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 No Yes
6. Are you now under the influence of intoxicating liquor? 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? Yes No	4. Are you related to the groom closer than second cousin. 5. Are you now under the influence of intoxicating liquor? No Yes
9. Are you likely to so continue?	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 AMAR Daupman
(a) List their full names, ages and addresses Name Age Address	Residence of father (if deceased so state)
rane	Occupation of father Machaning, Manual Race of father Mills
	Birthplace of father (State or foreign country)
V. C. N. C.	8. Full maiden name of mother Rosanna Mar Hilterson
(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? 11. Full name of father Salvet pure Support	Occupation of mother Mattatician Race of mother Mila
Residence of father (if deceased so state) Sumusbury Sulf	Birthplace of mother (State or foreign country)
Occupation of father Much Mully Bace of father Mull	
Birthplace of father (State or foreign country) Lek Grand, Jean.	State of Indiana, County ofHENDRICKS
12. Full maiden name of mother 2000 May flat	A and Am Mari man
Residence of mother (if deceased so state) Salvasture	Signed
Occupation of mother All Manuel Race of mother All	New Address
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this
State of Indiana, County of HENDRICKS SS: I depose and state the information given in this application is true and correct.	Alex M Harrief Clerk HENDRICKS Circuit Court
Signed Kabert a. Dougary	CONSUME OF PARISHES PARISH OF CHARDIAN
New Address Alat Calles, Allesians	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this. day of 19/4.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
THE MENDERICKS 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	
signs, scale races which related the consens of the control parent disconstruction	
	State of Indiana,
State of Indiana,	County ofHENDRICKS
County of HENDRICKS	Signed Father
Signed Father	Signed
Signed	Subscribed and sworn to before me this
Clerk	Clerk
	RT. A marriage license having been refused to the above named parties, the
	Court by written order issued and filed
inauthorizes and directs the issuance	
RETURN OF MARRIAGE LICENS	SE AND MARRIAGE CERTIFICATE
of Indiana dated the day of day of	ense issued by the clerk of the HENDRICKS Circuit Cour
Kolurt a. Dregory	and Mann Line Manager Manager
Be it further remembered, the following marriage certificate was filed in my	and A yann Lynn maryman
4,	nereni certatu that on the
one thousand nine hundred and	. Day and 1
State of Indiana, Groom	of Hendrikes Games Garage Tudiana
and, Bride Dyann Lynn Maryman 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
Dated this 12th day of June , 19	76
	Signed J. Kincaid Smith
Filed and recorded in accordance with the large of the State of T	Official Designation Pastor, Messiah Luth, Chu
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Man To Man 19 1.6
	Signed Glen M Harself Clerk

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS MALE Medical Examination Report Dated Date of Application 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 state 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 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 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 No Yes Yes 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 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 🗌 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 🗌 No D 6. Are you now under the influence of intoxicating liquor? No D Yes 🗌 3. Are you afflicted with a transmissible disease? 7. Are you now under the influence of a narcotic drug? Yes 🗆 No Ø re you related to the groom closer than second cousin? 8. Are you able to support a family? Yes 🗸 No E No 🗆 9. Are you likely to so continue? you now under the influence of intoxicating liquor? Yes 🗹 No 🗆 10. Do you have minor children from one or more former marriages? No Yes No D (If yes, answer questions a, b, c) (a) List their full names, ages and addresses Name Address (b) Are you supporting or contributing to their support? Yes 🗌 No 🗆 (c) Are you complying with any court order or orders issued their support? 11. Full name of father Birthplace of father (State or foreign country). 12. Full maiden name of mother... Residence of mother (if deceased so state) Occupation of mother Il achieve Birthplace of mother (State or foreign country) State of Indiana, Clerk HENDRICKS CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one paren signs, state facts which render the consent of the other parent unnecessary Clerk 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, 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. 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. 19 76, authorizing the joining together as husband and wif of Indiana dated the. Jan Kennedy Be it further remembered, the following marriage certificate was filed in my office, to-wit: ... hereby certify that on the Elven Bresant one thousand nine hundred and. State of Indiana, Groom Ask 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. County. June , 19 76. Dated this. Official Designation. Filed and recorded in accordance with the laws of the State of Indiana this... Signed D Circuit Cour

HENDRICKS.

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Form Prescribed By Indiana State Board of

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

Health under Authority Chap. 126, Ind. Acts 1905 HENDRICK	County June 2 1976 Date of Application
	FEMALE
MALE Medical Examination Report Dated 6-2-76	Medical Examination Report Dated 6-2-76
Elme of Kach M.D.	Name of Physician Colmer & Sock MD
Name of Physician & Arte 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
MALE APPLICANT Name First Middle (Last	Name First Middle Last
Ronald & Smith	Date of Birth Month Day Year
Date of Birth Month Day 1956	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	Maiden Name if Different
Previous Marital Status: Never Married Number of Previous Marriages	Stanton
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 May 36, 19
Usual Occupation . Apr to 1 16) or key	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Hausewell
1 Are you part or have you been adjudged diagnosed or considered as:	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 asylum 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?
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? Yes No	4. Are you related to the groom closer than second count. 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 Osnalda & Stanton 1+ 064
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 Mary Elizabeth awens
(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 deceased so state) blanvalle and
their support? Yes No	Occupation of mother Dan Issue Locks Race of mother W
Residence of father (if deceased so state) Admidle Admid	Birthplace of mother (State or foreign country) Intelle Sugare
Occupation of father Astrony Walkey Race of father The	State of Indiana,
Birthplace of father (State or foreign country) And polonical Management (State or foreign country)	County of
12. Full maiden name of mother (if deceased so state) Daniel San	Signed X herry E. Kleiber
Occupation of mother Lange wife A Race of mother W	New Address 1528 Smary De Induple
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this 2 nd day of July 19.76.
State of Indiana, County of HENDRICKS Ss: I depose and state the information given in this application is true and correct.	Dlea M Lawrey Gerk HENDRICKS Circuit Court
Signed Convolate Smith	
New Address 1528 MALY Ch. Sudges Just	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of find 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 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 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 ofHENDRICKS
County of HENDRICKS ss:	SignedFather
Signed	Signed
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
County	ourt by written order issued
inauthorizes and directs the issuance of	of a marriage license to the above named parties.
RETURN OF MARRIAGE LICENS	E AND MARRIAGE CORPUSATION
there was fred in my office a marriage licer	ase issued by the alast at the HENDRICKE
Ronald & Smith	, 19.26., authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my of	ind Series &
one thousand nine hundred and 76	hereby certify that on the 7th day of Juge
State of Indiana, Groom Annald & Sonith	at Wanvelle, County of Jendricks
and, Bride Sherry E. Fleiber of	Hendricks County, State of Indiana,
Country 107	that purpose by the Clouds of the C' 't C'
Dated this 7th day of June, 1976	
	Signed for the fit to fit while the side of the state of the side
Filed and recorded in accordance with the laws of the State of L.	Official Designation Minister
Filed and recorded in accordance with the laws of the State of Indiana this	day of une 19 76.
	Signed Glen M. Harriey Clerk
	HENDRICKS Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS County

MALE Medical Examination Report Dated 5-14-76	FEMALE Date of Application
Name of Physician Carl L. Heinlein	Medical Examination Report Dated 5-14-71
	Nome of Division of A 9 and A
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state on 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
Name First Middle The Knight	Name First Middle
Date of Birth Day Year 18	Date of Birth Month D. Wildman
Place of Birth (State or toreign country)	Place of Birth (State or foreign country) Day Year 1958
Residence Address Street or R. R. City County State	Boildon Marete
Previous Marital Status: Never Married Number of Previous Marriages	G. G. I. Bak 91 County State
	Maiden Name if Different Statenfield Ind.
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 Judals Radio tar Franks	THE RESERVE AND ADDRESS OF THE PARTY OF THE
Date of birth verified by: Birth Cert. Judicial Decree # 4594	Color or Race White P Negro Other (specify)
Other (Specify)	Usual Occupation Indiana Insurance
1. Are you now of hard as: An Imbecile? Of Unsound Mind? No Yes Yes	Date of birth verified by: Birth Cert. Judicial Decree Board of Health
Are you under guardianship as a person of unsound mind?	Other (Specify) AR. CH-46, pag. 179 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? 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	Of Unsound Mind?
5. Are you related to the bride closer than second cousin? No PYes	2. Are you under guardianship as a person of unsound mind? No PYes
6. 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?	4. Are you related to the groom closer than second cousin? No 2 Yes 5. Are you now under the influence of interjecting lights?
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? 11. Ves Yes Yes 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
(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 Ollisons Race of father 9
	Birthplace of father (State or foreign country) Indiana
	8. Full maiden name of mother Frances June Coleman
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for	R! Bot 9! Residence of mother (if deceased so state) Clainfield Ind
their support? Howard Museum Ma Y might.	Occupation of mother Hallselvill Race of mother I
Residence of father (if deceased so state) Residence of father (if deceased so state)	Birthplace of mother (State or foreign country) Indiana
Occupation of father Harlaueselman Race of father H	Dirthplace of mother (State of Total State
Birthplace of father (State or foreign country)	State of Indiana, State of Indiana, I depose and state the information given in this application is true and correct.
12. Full maiden pame of mother Mary Roselle Gussell	County of HENDRICKS
Residence of mother (if deceased so state) Plainfield Ind	Signed X TOMM W WOMAN
Occupation of mother Marsh Race of mother 91	New Address Po. Box 266 Clayton
Birthplace of mother (State or foreign country) Indiana	Subscribed and sworn to before me this. 3 day of June 19.76
State of Indiana, I depose and state the information given	Hen m Harvey Clerk HENDRICKS Circuit Court
County of HENDRICKS ss: in this application is true and correct.	
Signed & John Mary	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address Jay of June 1976.	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 June 1926. Slen M Sarvey 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	
The control of the same party	
	State of Indiana, County of HENDRICKS ss:
State of Indiana,	Father
County ofHENDRICKS	Signed
Signed Father Mother	Signed day of 19
Signed Mother Subscribed 19	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me thisday of	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	A marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	RT. A marriage needed and filed and filed
HENDRICKS County County	ourt by written order
outhorizes and uncon	
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage licent	SE AND MARRIAGE CERTIFICATE the description of the services as higher as higher and wife the services as higher as
Be It Remembered, there was filed in my office a marriage licer	nse issued of 197.6, authorizing the joining together as husband and wife
Thuring dated the	TT ah ONI
Be It Remembered, there was filed in my office a marriage licer of Indiana dated the day of See it further remembered, the following marriage certificate was filed in my of I, Marc Sonny Hays one thousand nine hundred and State of Indiana Governments.	office, to-wit: 12 day of June
Marc Sonny Have	hereby certify that on the
	at Planting of Undiana
one thousand nine hundred and	of Hendricks County, State of Indiana
State of Indiana, Groom. John W. McKnight and, Bride. Karen D. Wildman were by me united in marriage as authorized by a marriage license issued for County.	HENDRICKS HENDRICKS
were by me with him D. WII aman	that purpose by the cities of
a me united in marriage as authorized by a marriage	Commy Hove
Data 1 Is.	Signed Rantist rastor
	Official Designation Terms
Filed and recorded in accordance with the laws of the State of Indiana this	15th day of June Clerk Signed Llen M Harvelf Circuit Court
The same recorded in accordance with the laws of the State of	Signed Blen M. Harvelf Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

DRICKS County	Date of Appli
	//

....Circuit Court

HENDRICKS...

Chap. 126, Ind. Acts 1905 HENDRICKS County Date of Application		
	FEMALE	
MALE Medical Examination Report Dated	Medical Examination Report Dated	
Name of Physician Mr. George Ostherner	Name of Physician M. Maryle Ushluma	
The 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 live hundred domina (***)	FEMALE APPLICANT	
Name // First Middle Last	Name First Middle P 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 B. R. Gity County State	Residence Address Street or R. R. City County State	
360 W. County Line Rd. Truncesulle, In-	Maiden Name if Different 234 Mouth south	
Previous Marital Status: Never Married Number of Previous Marriages	Jucker	
Last Marriage Ended By: Death Divorce Annulment 1995	Previous Marital Status: Never Married Number of Previous Marriages.	
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment 1975	
Usual Occupation assistant Subn Perus & Leihte	Color or Race White Negro Other (specify)	
Date of birth verified by: Birth Cart Judicial Ficree	Usual Occupation Legal Secretary	
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 Test Yes	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 asylum 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? 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? 8. Are you able to support a family? Yes No	4. Are you related to the groom closer than second cousin? No Are Yes	
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 Addition Sucher	
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 \(\subseteq \text{No} \)	8. Full maiden name of mother Myssella Muslate	
(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 Mot C. Carper	Occupation of mother Race 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 gountry) All MARIA G	State of Indiana, County of HENDRICKS as: I depose and state the information given in this application is true and correct.	
12. Full maiden name of mother. Markettu Altshiy	County of HENDRICKS in this application is true and correct.	
Residence of mother (if deceased, so state)	Signed Mary Jarda Hussell	
Occupation of mother Race of mother Birthplace of mother (State or foreign country)	New Address 360 Wanty Line Ja Moorequille	
State of Indiana,	Subscribed and sworn to before me this day of the 1976	
County of HENDRICKS in this application is true and correct.	Clerk HENDRICKS Circuit Court	
New Address & 60 W. County Fige	CONSENT OF PARENTS, PARENT OR GUARDIAN	
Subscribed and sworn to before me this 3 Moskfully, sind, 19	We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
LILL Da MANULY CIERHENDRICKS 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		
which relider the consent of the other parent unnecessary.		
	State of Indiana,	
State of Indiana, County ofHENDRICKS.	County ofHENDRICKS	
Signed Father	Signed Father	
Signed	Signed	
Subscribed and sworn to before me thisday of, 19,	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	
Co	urt by written order issued	
authorizes and directs the issuance o	f a marriage license to the above named parties.	
RETURN OF MARRIAGE VICTORIA		
be to further remembered, the following marriage continents.	nd Mary Joeds Justill	
one thousand nine hundred and	nereby certify that on the 3/21 day of gully	
State of Indiana, Groom Dong ld &	it stooresselle, County of Morgan,	
and, Bride Mary Juda ()	County, State of Andiana	
County, State of		
Dated this 31 st day of 19.76.		
, 19/6	Signed Donald & Carker	
Filed and recorded in accordance with the laws	Official Designation Sastor	
Filed and recorded in accordance with the laws of the State of Indiana this	day of Quest, 19 7/2.	
	Signed Hen M. Annuel Clerk	

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS County MALE Medical Examination Report Dated Date of Application FEMALE Medical Examination Report Dated_ Name of Physician Haggard 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 orden Previous Marital Status : Never Married & Number of Previous Marriage Death Divorce Annulment Last Marriage Ended By Previous Marital Status: Never Married Number of Previous Marriages. White Negro Other (specify)_ Color or Race Last Marriage Ended By: Death Divorce Annulment Color or Race White Negro Other (specify). Date of birth verified by Birth Cert. | Judicial Decree Usual Occupation I. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Date of birth verified by: Birth Cert. Judicial Decree Yes | Yes | Yes | 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: 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 🗌 I. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? No P Yes [Yes 🗆 6. Are you now under the influence of intoxicating liquor? No D Yes 🗌 3. Are you afflicted with a transmissible disease? No D Yes 1. 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 D' 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 Kichard a. Age Address Residence of father (if deceased so state) avon, An Occupation of father Blan Contra Race of father Wh Birthplace of father (State or foreign country) Muchican 8. Full maiden name of mother ... ancy a. (b) Are you supporting or contributing to their support? No 🗆 Residence of mother (if deceased so state). Livon, In . (c) Are you complying with any court order or orders issued for Occupation of mother Vlone Race of mother. Wh 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. County of HENDRICKS Kuth Signed Thim E. Worden New Address 1993 W. Broadway, Dan. IN Occupation of mother / AML Birthplace of mother (State or foreign country) Harry Clerk HENDRICKS CONSENT OF PARENTS, PARENT OR GUARDIAN Now Address 1992 W. Broadung 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. DUN 11. Harvey Clark 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..... HENDRICKS County of State of Indiana. County of HENDRICKS Fatherday of..... Mother COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the HENDRICKS 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 HENDRICKS Circuit Court of Indiana dated the 8th day of and Simulation of States and Simulation and wife and Simulation of States and Be It Remembered, there was filed in my office a marriage license issued by the clerk of the...... at Avon Christian Ch. , County of Jendricks , State of Indiana, Groom Douglas Neil Hampton of Hendricks County, State of Indiana and, Bride Kim Ellen Worden of Hendricks County, State of Indian Hendricks Signed Teal O. Younce , 19.76 County. Official Designation Minister June June Dated this. Signed Alen M. Harstlef Clerk Filed and recorded in accordance with the laws of the State of Indiana this

HENDRICKS

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

File___ June # 1976

HENDRICK	Date of Application
	FEMALE 6-4-76
MALE Medical Examination Report Dated 6-4-76	Medical Examination Report Dated 6-4-76
m Q shamakons	Name of Physician M. D. Acamahom, M. To.
Name of Physician /// XIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	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)".	tement—Whoever procures the issuance of a license to marry by any false statement, representa-
MALE APPLICANT	FEMALE APPLICANT
Name First Migdle Last	Name First Ray Last
Jeffrey Jane Wagner	Date of Birth Month Day Sear
Date of Birth Month 24 1954	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	Indianapolio, In.
Residence Address Street of R. R. City County State	Residence Address Street or R. R. Janselle, State
Rt. 6 Box 61, Wanvelle, In	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
Color of flace	Color or Race White Negro Other (specify)
Usual Occupation Adv. / LCh.	
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Sentrally
Other (Specify)	Date of birth verified by: Birth Cert. Dudicial Decree
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: An Imbecile? 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	Of Unsound Mind?
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	2. Are you under guardianship as a person of the second se
6. Are you now under the influence of intoxicating liquor? No Yes	4. Are you related to the groom closer than second cousin? No Ves
7. Are you now under the influence of a narcotic drug? 8. Are you able to support a family? Yes No	4. Are you related to the groom closer than second cousts. 5. Are you now under the influence of intoxicating liquor? 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? No Yes (If yes, answer questions a, b, c)	Annie I. Lattan
(a) List their full names, ages and addresses	7. Full name of father (if deceased so state) Allante Ja
Name Age Address	Le Manager de la
	Occupation of father and father a
	Later of Charles
(b) Are you supporting or contributing to their support? Yes □ No □	8. Full maiden name of mother Distribution of Manager 1980 1980 1980 1980 1980 1980 1980 1980
(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 Sugar R. Wagner	Occupation of mother Little Race of mother William
Residence of father (if deceased so state) Allosed	Birthplace of mother (State or foreign country) Askansas
Occupation of father Race of father	
Birthplace of father (State or foreign country)	State of Indiana, I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Bounds Course	County of HENDRICKS in this application is true and correct.
Residence of mother (if deceased so state) Danville, In.	Signed Super Bay Dofton
Occupation of mother Cost Race of mother With	New Address B # 6, Boy &/ Danville
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this 4 day of June 1926
0	41 m H
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Slex // Flanus Gerk HENDRICKS Circuit Court
Signed Jeffrey Lane of agree	CONCENT OF PARTIES BARRIES OF CHARRIES
New Address RR & Box & Dannelly Ind	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of day of 19/6.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Selen III. Followif ClerkHENDRICKS 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 ofHENDRICKS
State of Indiana, County ofHENDRICKS	
Signed Father	SignedFather
Signed Father Signed Mother	SignedMother
Subscribed and sworn to before me this day of , 19	Subscribed and sworn to before me thisday of
	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	RT. A marriage license having been refused to the above named parties, the
HENDRICKS County (Court by written order issued and filed
inauthorizes and directs the issuance	of a marriage license to the above named parties.
RETURN OF MARRIAGE LICEN	SE AND MARRIAGE CERTIFICATE
we It Remembered, there was filed in my office a marriage lice	ense issued by the clerk of the HENDRICKS Circuit Court
of Indiana dated the day of Unit	10 7 C and onite
Be it further remembered, the following magnet	and Lena Kay Lafton
1. Morman L. Wenner was filed in my	office, to-wit:
	hereby certify that on the 2 day of June
State of Indiana Groom De Manuel Lange	at Danvelle , County of Hendrecks
State of Indiana, Groom Juffrey Land Wagner	of Nendrecks County, State of Indiana
of defending of	New Objects
County.	r that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this /2 day of June 197	1/2
, 19,	Signed Norman & Nearth
Filed and recorded in	Official Designation Missister
Filed and recorded in accordance with the laws of the State of Indiana this	16 day of June 19 76.
	Signed Glen m. Tharney Clerk
	HENDRICKS Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE 203 Chap. 126, Ind. Acts 1905 HENDRICKS County 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, representation or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT 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 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 #4352 Usual Occupation Other (Specify)..... Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile? Yes 🗌 Of Unsound Mind? # 563431 / Yes 🗌 2. Are you under guardianship as a person of unsound mind? No D 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: No Yes An Imbecile? No Yes 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? No D 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? Yes 🗌 6. Are you now under the influence of intoxicating liquor? No Yes No Yes 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 No 🗆 5. Are you now under the influence of intoxicating liquor? No Yes 9. Are you likely to so continue? Yes No 10. Do you have minor children from one or more former marriages? No Yes (If yes, answer questions a, b, c) 7. Full name of father Y Wilberr Earl Visito (a) List their full names, ages and addresses Address Insulance agenset of father Yes 🗌 (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 🗆 Occupation of mother Housewife ... Race of mother 11. Full name of father Klenneth Coverett Birthplace of mother (State or foreign country) Indianapoles) Occupation of father Brick Layer Race of father Birthplace of father (State or foreign country) Indiana) Signed & Butto ann Undito Birthplace of mother (State or foreign country) Indianapoles) Clerk HENDRICKS 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 New Address. signs, state facts which render the consent of the other parent unnecessary. Subscribed and sworn to before me this ... 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 State of Indiana, State of Indiana, Mother County of HENDRICKS Father ...day of..... 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 Clerk County Superior Court by written order issued County Co RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court Be It Remembered, there was filed in my office a marriage license issued by the clerk of the..... ..., 19.76, authorizing the joining together as husband and wife Beth Onn Vidito June Be it further remembered, the following marriage certificate was filed in my office, to-wit: of Indiana dated the I, Rev. R. B. Acheson hereby certify that on the South of Marior at Indianapolis , County of Marion , State of Indiana, Groom Timothy Charles Dayis of Hendricks County, State of Indiana

and, Bride Of The County of Hendricks County of Hendricks County of Hendricks County of Indiana and, Bride Beth Ann Vidito of Hendricks County, State of Indiana
were by Signed R. B. Acheson Ordained Minister, 19...... Dated this .. Official Designation..... .day of ... Filed and recorded in accordance with the laws of the State of Indiana this. Signed Signed SignedClerkCircuit Court

Dated this day of June, 1976.

STATE OF INDIANA

Indiana State Board of Health under Authority Chap. 126, Ind. Acts 1905 HENDRIC	MARRIAGE LICENSE KSCounty
HENDRIC	Date of Application
MALE	FEMALE
Medical Examination Report Dated May 18, 1976	Medical Examination Report Dated
Name of Physician Pran 3. Smith	Name of Physician
- Add 1905 prescribes "False sti	atement—Whoever procures the issuance of a license to marry by any false statement, represent
tion or pretense shall be fined in any sum not exceeding live fluidica domes (FEMALE APPLICANT
Name First LAST Middle 100 Logst FIRST	Name First Middle Last
Muncer Gandall Sail	Date of Birth Month Day Year
Date of Birth Month Day Year	march 23 1954
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) Indianapoles Ind.
Residence Address Street or R. R. City County State	Residence Address Street or R. R. City County State
F. O. Bat 4906 U.S. A. F. Wadenie Calvison	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 71.5.A F	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree Ind. St. Bd. of	Usual Occupation Santane
Other (Specify) 53/00905 Health	Date of birth verified by: Birth Cert. Judicial Decree # 02680
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	1. Are you now or have you been adjudged, diagnosed or considered as:
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? Yes	An Imbecile?
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? 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? No Ves
7. Are you now under the influence of a narcotic drug? No Yes No 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
 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? 7. Full name of father a Scallage Larr
(a) List their full names, ages and addresses Name Age Address	1626 albert Olai life
Name Age Address	Occupation of father alexander Sugar Race of father & Sugar Race of
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother Lais V. Settlerrew
(b) Are you supporting or contributing to their support? Yes ☐ No ☐ (c) Are you complying with any court order or orders issued for	1626 albert 00 0:10 10
their support? Yes No No	Residence of mother (if deceased so state) Alla Millian Sala.
11. Full name of father Slavge Musical	Occupation of mother Sall all Race of mother A
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, I depose and state the information give
12. Full maiden name of mother Harl Mink	County of HENDRICKS ss: in this application is true and correct
Residence of mother (if deceased so state) Aldinfield Ind	Signed X. Jicki Lynn Care
Occupation of mother Cashier Race of mother Th	New Address Several Delivery Cance AFB O
Birthplace of mother (State or foreign country) Kentuckey	Subscribed and sworn to before me this 7 day of Sense 19.7
State of Indiana, I depose and state the information given sin this application is true and correct	off so off
the dall de l'an	Clerk HENDRICKS Circuit Cou
New Address Annal Jelevey Vance ARD OK	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this. 7 day of Stable 19.76	We, the parents, of this applicant hereby give consent for this marriage. If only one paret
Glen M Harrief ClerkHENDRICKS Circuit Court	
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,
State of Indiana,	County of HENDRICKS ss:
Signed	SignedFathe
Signed	SignedMoths
Subscribed and sworn to before me thisday of, 19,	Subscribed and sworn to before me thisday of19
Clerk	uay U
COMPLETE IF MARRIAGE LICENSE ISSUED	llCiet
HENDRICKS COUNTY	CT. A marriage license having been refused to the above named parties, the
authorizes and directs the issuance of	of a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSE	H AND WAR
be it further remembered, the following marriage contifut.	ind CRU & Carr
one thousand nine hundred and 76	at Agenfield County of Hendricks
state of Indiana, Groom Sandall Gail Muncy and, Bride Dicke & Carr	of Hendricks County of Flendricks Nenchricks County, State of Ind.
pere by me united in mani-	Sendricks County, State of Ind.
county.	that purpose by the Clerk of the Circuit Court of HENDRICKS
ated this	own of

Official Designation Roman Catholic Freist

Signed Glen m Har

HENDRICKS...

STATE OF INDIANA

APPLICATION FOR MARR

Indiana State Board of Health under Authority Chap. 126, Ind. Acts 1905	IARRIACE LIGHNON No. 205
Chap. 126, Ind. Acta	File 37
	- County - June 7, 1976
MALE Medical Examination Report Dated June 1, 1976	FEMALE Date of Application
Name of Physician Wm. Beetler	Medical Examination Report Dated 5-26-76
	Name of Physician prints Black MA.
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 issuance of a license to marry by any false statement
First / Middle	FEMALE APPLICANT
Name Yenneth I Gooder a	First Middle
Date of Birth	Date of Birth Month Day Farmer
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. D.
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Street of R. R. City County State Maiden Name if Different Street of R. R. B. City County State
Last Marriage Ended By: Death Divorce Annulment	Maiden name without
	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 Marine Carp. Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Budden Decree Pother (Specify) Registration Card. 5941285	Usual Occupation Beautiful
1. Are you now or have you been adjudged, diagnosed or considered as:	Date of birth verified by: Birth Cert. Judicial Decree
Of Unsound Mind?	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?
home for indigent persons? No Yes If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind?
4. Are you afflicted with a transmissible disease? No Yes 5. Are you related to the bride closer than second cousin? No Yes	2. Are you under guardianship as a person of unsound mind? No Xes
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 2 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? No Ves
(If yes, answer questions a, b, c)	6. Are you now under the influence of a narcotic drug? 7. Full name of father 7. Full name of father
(a) List their full names, ages and addresses Name Age Address	Residence of father (if deceased so state) Braunshurg, And
	Occupation of father Muchanic Race of father Wh
	Birthplace of father (State or foreign country) Indiana
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Wary Tangent Card
(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 Grl L. Laadeers	Occupation of mother
Residence of father (if deceased so state) Mollomapally Juli.	Birthplace of mother (State or foreign country)
Occupation of father Thursday Market Race 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 HENDRICKS
12. Full maiden name of mother (if deceased so state) Indianapoles, Ind.	Signed Susan Jeanne Tama
Occupation of mother Accessed to state of mother of moth	New Address Cleans he fluing 1/ Carolina
Birthplace of mother (State or foreign country) Incleans	Subscribed and sworn to before me thisday of
State of Indiana, Sas: I depose and state the information given in this application is true and correct.	Glen M. Harwy Clerk HENDRICKS Circuit Court
County of HENDRICKS In this application is the	DARRIAN OR CHARDIAN
New Address Camp Lejeune N.C.	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 thisday of	We, the parents, of this applicant never state of the other parent unnecessary
Clerk_HENDRICKS Circuit Court	signs, state facts which render the content 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	
	State of Indiana, State of HENDRICKSss:
State of Indiana,	County of HENDRICKS Father
County ofHENDRICKS	Mother
Signed Father Signed Mother	Signed
Subscribed and sworn to before me this	Subscribed and sworn to belove the Clerk
Clark	the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUL	RT. A marriage license having been refused to the above hamed partial and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COULD	ourt by written order issued
in authorizes and directs the issuance	of a marriage license to the above harm
DETURN OF MARRIAGE LICENS	SE AND MARRIAGE CERTIFICATE the distribution of the state of the stat
RETURN OF MARRIAGE LICENTEES AND ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED ASSESSED	nse issued by the course, authorizing the joining together as husband and wife
Be It Remembered, there was filed in my office a marriage of Indiana dated the 15th day of June Kenneth J. Goodwin Be it further remembered, the following marriage certificate was filed in my I, David J. Markey one thousand nine hundred and	office, to-wit: June,
Be it further remembered, the following marriage certificate was filed in my I, David J. Markey one thousand nine hundred and State of Indiana G. Konnoth J. Goodwin	Indianapolis , County of Marion
and the hundred and	of Clarks of Laboratoria
one thousand nine hundred and State of Indiana, Groom Kenneth J. Goodwin	Hendricks County, State of HENDRICKS
one thousand nine hundred and	that purpose by the Clerk of the Circuit Court of
State of Indiana, GroomKenneth J. Goodwin and, Bride Susan Jeane Farmer of	6 David J. Markey Signed Pastor, Northview Ch. of the Greth Official Designation June ,19 76
County. 15th June 19	Signed Pastor, Northview Ch. of the Breth
	Official Designation Pastor, Northview Ch. of the Official Designation June ,19 76 22nd day of Clerk Signed Llen M HENDRICKS Circuit Court
Filed and recorded in accordance with the laws of the State of Indiana this	
and recorded in accordance with the laws of the State	Signed HENDRICKS CHEEK

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

6-7-76
Date of Application

1905	HENDRICKSCo	unty
10.01	FEMAI	LE

THE	FEMALE Medical Examination Report Dated 5-28-76
MALE Medical Examination Report Dated 5-28-76	0 1 3 4 10
David M. Hadley	Name of Physician Bavia M. Hadley
1005 proggribes "False stal	ment-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	FEMALE APPLICANT
MALE APPLICANT	Name First Middle Last
Name First Middle Mels	Date of Birth Month Day Year
Date of Birth Month Day Year 1953	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
1901 Union Lafagette, Indiana	Maiden Name if Different
Previous Marital Status: Never Married Number of Previous Marriages	Previous Marital Status: Never Married V Number of Previous Marriages
Last Marriage Ended By: Death Divorce Annulment	The state of the s
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
William C 1 71 Itall	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Dudicial Decret Clay Co. Bd of	Usual Occupation Standard
Other (Specify) Thealth Bk 10, pp. 2	Date of birth verified by: Birth Cert. Judicial Decree Valer Asg. 8689
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?	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?
6. Are you now under the influence of intoxicating liquor? No P 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 No Yes No N	4. Are you related to the groom closer than second cousin? No Yes No We Ves
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 □
10. Do you have minor children from one or more former marriages? No Yes (If yes, answer questions a, b, c)	av. lall 41 face of also
(a) List their full names, ages and addresses	7. Full name of father (If deceased so state) Danville Jud
Name Age Address	Occupation of father Glacher Race of father Gr
	Birthplace of father (State or foreign country) Indiana
	8. Full maiden name of mother Lauise & Libbs
(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) Danville Jud
their support? Yes \(\text{No} \)	Occupation of mother Assistance Race of mother 91
11. Fully name of father Watald Tyrman Mels Residence of father (if deceased so state) Saland, Ind	
Occupation of father Self - Employee Race of father St	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country)	State of Indiana, Sa: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Belling Swells Sitts	County of
Residence of mother, (if deceased so state) Saland, Ind.	Signed X Victo L Soudder
Occupation of mother	New Address 1901 Union At Lafayette An
Birthplace of mother (State or foreign country) Indeana	Subscribed and sworn to before me this 7 day of June 1976
State of Indiana, State of Indi	Gerk HENDRICKS Circuit Court
x farmell) Y/cla	Oler & Albandaria
New Address 1904 June St apt 336 Lyayette Ly	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this. 7 day of June 1970	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Alen M. Harry ClerkHENDRICKS 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 ofHENDRICKS	County ofHENDRICKS
	SignedFather
Signed	SignedMother
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of
Clerk	Cleri
COMPLETE IE MARRIAGE LIGHNOR IGGVIER DE	
HENDRICKS COUNTY	RT. A marriage license having been refused to the above named parties, the
in outhorize and discount C	ourt by written order issued and file
inauthorizes and directs the issuance	of a marriage license to the above named parties.
Be It Remembered, there was filed in my office a manning a live	SE AND MARRIAGE CERTIFICATE
	nse issued by the clerk of the HENDRICKS Circuit Cour
Larry Jr. nees gune	and Vicke Level of the solution of the control of t
Be it further remembered, the following marriage certificate was filed in my	office, to-wit:
I, Norman L. Weaver	hereby certify that on the 10th
one thousand nine hundred and /6	at Danville , County of Hendricks
and Paids Violate T Coult	of Tippicanoe County, State of Indiana
County.	that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this 19th day of June , 19	76
, 19	Signed Norman L. Weaver Official Designation Minister
Filed and recorded in accordance	Official Designation Minister
Filed and recorded in accordance with the laws of the State of Indiana this	22nd day of June 19 76

HENDRICKS....

Form Prescribed By Indiana State Board of

STATE OF INDIANA

Health under Authority Chap. 126, Ind. Acts 1905 HENDRICK	MARRIAGE LICENSE S County
MALE 5-32 TO	6-1-16
Medical Examination Report Dated 5-27-76	FEMALE Date of Application
Name of Physician Walter Ma Mannis	Medical Examination Report Dated 5-27-76
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 Walter Mc Mannis
MALE APPLICANT	whoever procures the issuance of a license to marry by any false statement, represents.
Name Widdle V Last	FEMALE APPLICANT
Date of Birth Month Day tear	First Middle Last
Place of Birth (State or foreign country)	Date of Birth Month Day Search
Street or R. R. City Comb	Place of Birth (State or foreign country)
K1 2 Don 129, Indianapolis, In	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Washington, Indianapolis,
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 Ry
Usual Occupation Machinist	Annulment 9-73
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 unimployed
An Imbecile? No Yes Of Unsound Mind?	Date of birth verified by: Birth Cert. Dudical Decree
2. Are you now or have you been within five (5) years an inmate of a county solution	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 🖸 Yes 🗆	Of Unsound Mind? No Yes 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? 6. Are you now under the influence of intoxicating liquor? No Yes	3. Are you afflicted with a transmissible disease? No Yes Yes Yes Yes Yes Yes Yes Yes
7. Are you now under the influence of a narcotic drug? No Yes No No No 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? 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	7. Full name of father (if deceased so state) Balanapplia, In
	Occupation of father R. C. A. Race of father M.M.
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes ☐ No ☐	8. Full maiden name of mother to wathy A. Rissinger
(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 Jary W. Michaels	Occupation of mother Jactory worker Race of mother wh
Residence of father (if deceased so state) Indiana polis, In	Birthplace of mother (State or foreign country)
Occupation of father Turnsyman Race of father Wh	State of Indiana, State of Indiana, I depose and state the information given in this application is true and correct.
Birthplace of father (State or foreign country) Manual 12. Full maiden name of mother Manual A + Maruel	County of HENDRICKS in this application is true and correct.
12. Full maiden name of mother (If deceased so state) Indianapplia, In.	Signed Marcia d. Bancraft
Occupation of mother Race of mother Wh	New Address 7777 W washington
Birthplace of mother (State or foreign country) Sudiana	Subscribed and sworn to before me this day of 19 10
State of Indiana, County of HENDRICKS Bas: I depose and state the information given this application is true and correct.	Glen 71. Parauf Clerk HENDRICKS Circuit Court
Signed Michael & Suchael	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address >>> (W. Washington)	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworn to before me this Z day of June 1976.	signs, state facts which render the consent of the other parent unnecessary
Alla III Hamuy Clerk HENDRICKS Circuit Court	signs, state Acco
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 lender the consent of the state parties)
	State of Indiana, County of HENDRICKS ss:
State of Indiana, County of MENDAGERS as:	SignedFather
County of HENDRICKS Signed Father	Signed
Signed Mother	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me thisday of	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	line license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having and filed and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County Light the issuance of	for marriage license to the above named parties.
inauthorizes and directs the issuance of	AND MARRIAGE CERTIFICATE
RETURN OF MARRIAGE LICENS. Be It Remembered, there was filed in my office a marriage licen of Indiana dated the day of Michael Ray Nichols Be it further remembered, the following marriage certificate was filed in my of I, Rev . C. W. Fiscus	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court is issued by the clerk of the poining together as husband and wife 19 16, authorizing the joining together as husband and wife Crace Bancroft
initiana dated the day of	Marcia Glack
Be it further remembered, the following marriage certificate was filed in my o	hereby certify that on the 12th day of Marion,
Rev . C. W. Fiscus one thousand nine hundred and 76 State of Indiana, Groom Michael Ray Nichols and, Bride Marcia Grace Bancroft were by me writed in the following marriage certificate was filed in my I. Rev . C. W. Fiscus one thousand nine hundred and 76 State of Indiana, Groom Michael Ray Nichols and, Bride Marcia Grace Bancroft were by me writed in the state of the state o	hereby certify that on the 12th day of June at Indianapolis County, State of Indiana Leadricks County, State of Indiana
stousand nine hundred and	of Hendricks Indiana,
and, Bride Marcia Grace Bancroftof	NAI LOII The Clerk of the Circuit Court of HENDRICKS
a me united in marriage as authorized by a marriage	
Dated 41: 12-1	Signed Rev C W Fiscus Minister
Dated this 12th day of June , 19 76	Official Designation Lune ,19
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation June , 19 6 15th day of June , 19 Clerk Signed Len M. Circuit Court
"'led and recorded in accordance with the laws of the State of Indiana this	Signed Ilen Museum Circuit Court

STATE OF INDIANA

Form Prescribed By Indiana State Board of APPLICATION FOR	MARRIAGE LICENSE File 37
Health under Authority Chap. 126, Ind. Acts 1905 HENDRIC	KS County 6 7 76
HENDRIC	Date of Application
	FEMALE 6-4-76
MALE Medical Examination Report Dated 6-4-76	Medical Examination Report Dated 6-7-76
e o . L H	Name of Physician 6 lmes, d. Lock
Name of Privstcian Control of the Co	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 False station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	
MALE APPLICANT	FEMALE APPLICANT Middle
Name First Middle Last	Name First Middle Last
Date of Birth Month Day Year	Date of Birth Month Day /Year
Aules 21 1956	Place of Birth (State of 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 or R. R. City County State
B.D. Box 269 Claylon Ind.	Maiden Name if Different
Previous Marital Status: Never Married Number of Previous Marriages	Previous Marital Status: Never Married Marriage Number of Previous Marriages
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status; Never married of Frevious Marriages.
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Color of Race	Color or Race White P Negro Other (specify)
Usual Occupation Hendricky (s. Highway	Color or Race Walter 2 1-210
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Jacese Cleaner
Other (Specify)	Date of birth verified by: Birth Cert. Judicial Decree
An Imbecile? 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?	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 Yes	2. Are you under guardianship as a person of unsound mind? No 2 Yes
6. Are you now under the influence of intoxicating liquor? No W Yes	3. Are you afflicted with a transmissible disease? No Ves
7. Are you now under the influence of a narcotic drug? 8. Are you able to support a family? Yes No	4. Are you related to the groom closer than second cousin? No 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 P 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 Scholl Carl Hughn
Name Age Address	Residence of father (if deceased so state) hambille, Jane
	Occupation of father Allisans Race of father 21
	Birthplace of father (State or foreign country) Indiana
	8. Full maiden name of mother Mildred Jean Burton
(b) Are you supporting or contributing to their support? Yes No (c) Are you complying with any court order or orders issued for	630 Hawley Dalwill and
their support?	Residence of mother (if deceased so state)
11. Full name of father Sterl 6. Sieskion	Occupation of mother Just Mall Bank Race of mother H
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Race of father 9	State of Indiana,
Birthplace of father (State or foreign country)	County ofHENDRICKS ss: I depose and state the information give in this application is true and correct
12. Full maiden name of mother satrusts Junist splints	
Residence of mother (if deceased so state) Clafford and	Signed & Jases Hlynn
Occupation of mother Assesses Race of mother The	New Address P. Dr. Dox 269 Clayton, and
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this 7 day of June 1976
State of Indiana, ss: I depose and state the information given	all 20 4/
County of HENDRICKS in this application is true and correct.	Clerk HENDRICKS Circuit Cou
Signed & James Vover Kushlon	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address PO BOX 267 Clayton Sad	
Subscribed and sworn to before me this. To day of June, 1976.	We, the parents, of this applicant hereby give consent for this marriage. If only one paret
JUN M. Harvelf ClerkHENDRICKS 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 ofHENDRICKS
	SignedFathe
Signed Father	Signed
Signed	
	Subscribed and sworn to before me this day of , 19
Clerk	Cler
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COLU	RT. A marriage license having been refused to the above named parties, the
Country	laward 1
in authorizes and directs the issuance	of a marriage license to the state of the st
RETURN OF MARRIAGE	a marriage license to the above named parties.
Be It Remembered, there was filed in my office a married	SE AND MARRIAGE CERTIFICATE
of Indiana dated the	nse issued by the clerk of the HENDRICKS Circuit Cou
James Salert Suchta June	and Haven Enny Slynn
Be it further remembered, the following marriage certificate was filed in many	and Jaren ann Flynn
one thousand nine hundred and 76	hereby certify that on the 12th day of June
and, Bride Karen Ann Flynn	of Hendricks County of Hendricks Hendricks County, State of Indiana County, State of Indiana
were by me united in marriage as authorized by a marriage as	County, State of Indiana

June 76

Dated this

Signed Dr. Joseph D. Stump Official Designation Minister

Filed and recorded in accordance with the laws of the State of Indiana this 15th day of June 76

Signed Hendricks Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No. 209 File_ 37

HENDRIC	KS County File 37
MALE Medical Examination Report Dated 6-7-76	6-8-76
Name of Physician A. M. Scudder	Medical Examination Report Desail
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1965 prescribes "False station or pretenze shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT First Middle	tement—Whoever procures the issuance of the
MALE APPLICANT Middle	stance of a license to marry by any false statement, representa-
Name Dinners Q. y last	Name First FEMALE APPLICANT
renevat. 25	Date of Birth Bonnie Suiddle Suiddle Suiddle
Place of Birta (State of Country Vicinia)	Place of Birth (State or foreign country). Day Vear 1958
Residence Address Street up B. R. J. City Coughty State	Residence Address Strate & Prodice
Previous Marital Status - Never Married & Number of Previous Marriages	Maiden Name If Different Brownsburg State
Last Marriage Ended By Duath Divorce Annulment	
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
Unal Occupation Jerves Station Ott. 1. +	Last Marriage Ended By: Death Divorce Annulment
Date of birth restitud by Birth Cart, Judicial Decree Verginia Egel. 4	Color or Race White Negro Other (specify)
Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation Unemployed
An imberile? Of Unsound Mind? No F Yes	Date of birth verified by: Birth Cert. Judicial Decree
1. Are you now or have you been within five (5) years an inmate of a	Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as:
home for indigent persons: No 2 Yes []	No Yes
Are you afflicted with a transmissible disease? No 27 Yes [Of Unsound Mind? No Yes 🗆
1. Are you related to the bride sloses than second county? 1. Are you now under the influence of intensecting liquor? No P Yes Yes	2. Are you under guardianship as a person of unsound mind? No Yes 3. Are you afflicted with a transmissible disease?
1. Are you now under the influence of a narcetic drug? No D Yes S No D Yes No D	4. Are you related to the groom closer than second cousin? No Z Yes
3. Are you likely to so continue? Yes No [5. Are you now under the influence of intoxicating liquor? No 🗗 Yes 🗆
Of 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 Brisch Edgar Snuder
Name Age Address	Residence of father (if deceased so state). Dibusing burg
	Occupation of father Salesman Race of father 9
	Birthplace of father (State or foreign country). Clannsift and
(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 Cleava magalene highner
their support?	Residence of mother (if deceased so state) All Milling and
11. Fill name of tather of Soundard so states Alegerna here Ised	Occupation of mother Midtal Race of mother W
Occupation of tather Margalla Race of father It	Birthplace of mother (State or foreign country) Almay (Wanta)
Birthplace of father (State or funcion country) Deligities	State of Indiana. County of HENDRICKS I depose and state the information given in this application is true and correct.
12. Fill maiden name at mother Janlene Faceson	Signed X Bonnie & Snuder
Decupation of mother (It deceased to state) AND WILLIAM Save of mother of	New Address /20 Williams Dr. aft M Brownsburg
Birtholace of mother (State or foreign country) Villettet	Subscribed and sworn to before me this 8 day of June , 19.7/6
State of Indiana. I depose and state the information given	Hen m. Warvey Clerk HENDRICKS Circuit Court
County of MENDRICKS in this application is true and correct.	
Now Address 120 Williamsh, Apt M Brown Drag	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this & day of Girl 1976.	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
Elist II Narvelf Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the cons
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	Signed Si
Signed Father	Signed X Leaves My Duydles Mother
Signed. Mother Subscribed and sworn to before me this day of 19.	Subscribed and sworn to before me thisday of
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	T. A marriage license having been refused to the above named parties, the
HENORICKS County Cou	r. A marriage license having seeman and filed art by written order issued
authorizes and directs the issuance of	f a marriage license to the above named parties.
THE WARRIAGE LICENSE	AND MARRIAGE CERTIFICATION HENDRICKS Circuit Court
All the bar of the second of t	
I miliand dated the day of	Bennyl S. Snipher
I Indiana dated the day of australia and a self if further remembered, the following marriage certificate was filed in my of	ereby certify that on the 19 day of June County of Hendricks County of Hendricks
ne thousand a state of a	ereby certify that on the day of County of Hendricks
tate of the	County State of Indiana
nd, Bride Bonnie & Sarphers of	HENDRICKS HENDRICKS
nd, Bride Bonnie Snight of the Cere by me united in marriage as authorized by a marriage license issued for the county.	hat purpose by the China
day of	Official Designation Menester County Chestiche
iled and recorded in accordance with the laws of the State of Indiana this	25 day of Sulf Alarveet Clerk
recorded in accordance with the laws of the State of	Signed Circuit Court HENDRICKS Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

				-
File_				
	1	8-	71	
	6	0	16	

Health under Authority Chap. 126, Ind. Acts 1905 HENDRICK	1 - 8 - 71
	FEMALE (5 5)
MALE MALE Depart Dated 6-5-76	Medical Examination Report Dated 6-5-76
Medical Examination Report Dated 6-5-76	Name of Physician J. I homas Vieira
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state of the content of the co	ement—Whoever procures the issuance of a license to marry by any false statement, represents.
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes 1 and tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	FEMALE APPLICANT
MALE APPLICANT	Name First / Middle , Last
Name Royald William Chasteen	Date of Birth Month Day Year
Date of Birth Month Day Year 1954	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	Indiana palis, In.
Residence Address Street or R. R. City County State	Rt. 2 Bix 94, tranvelle, In.
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different
Last Marriage Ended By: Death Divorce Annulment 3-12-76	Previous Marital Status: Never Married Number of Previous Marriages
	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	
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	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 Yes	Of Unsound Mind? No Yes 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	2. Are you under guardianship as a person of unsound limit. 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 Ves [
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 jaffuence of a narcotic drug? No ☐ Yes ☐
(a) List their full names, ages and addresses	7. Full name of father (if decorded so state) Danvelle
Patrick Koich & Danville	Occupation of father The Race of father Race of father Race of father
Christina Shawne 2 ''	Birthplace of father (State or foreign country). January
(b) Are you supporting or contributing to their support? Yes ⋈ No □	8. Full maiden name of mother Patricia ann Shake
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state) Manuelle Pra
11. Full name of father to maid a Chastelan	Occupation of mother A Dal Race of mother Wh
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Race of father Race of father	State of Indiana, I depose and state the information given
Birthplace of father (State or foreign country) Sugliaguage 12. Full maiden name of mother Sugliana Shalara	County of HENDRICKS in this application is true and correct.
Residence of mother (if deceased so state) Dannell, Jan	Signed Schorch R. Stak
Occupation of mother Race of mother All	New Address Coassells of M
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this 8 day of June 1924
State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Alex M. HANNIA Gerk HENDRICKS Circuit Court
Signed Honold D. Chasteen	- H
New Address Coastanulle Janes	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of 1976	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,	State of Indiana, County ofHENDRICKS.
County ofHENDRICKS.	Signed. Father
Signed Father	
Signed	Signed
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County C	C. A marriage license having been refused to the above named parties, the art by written order issuedand filed
in authorizes and directs the issuance of	a marriage license to the above named parties
RETURN OF MARRIAGE LICENSE	AND MADE AND
to a fill the fill the the marriage lacene	of increased 1. 11 2 2 4 4 4
Be it further remembered the following martiel an	nd Deborah authorizing the joining together as husband and wife
1, Stelle Miller Mc Parland	
one thousand nine hundred and 76 State of Indiana, Groom April Dean Chastern	t New Hinchester day of June
State of Indiana, Groom Sonald Dean Chasteen of and, Bride Debarah a al York	1. Hendrieks County State of Indiana
and, Bride Blassafe and Joseph of were by me united in marriage as authorized by a marriage license issued for the	Hendricks County, State of Indiana,
Dated this 12 day of June, 19.76	
	the first of the f
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Minister of the Laspel
the state of the s	Signed Glen M. Harvey Clerk
	HENDRICKS Circuit Court

APPLICATION FOR MARRIAGE LICENSI

HENDRICKS County File		
MALE Medical Examination Report Dated 6/4/76 Name of Physician Glexen W. Baker md.	FEMALE Medical Examination Report Dated Date of Application	
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 of Physician Alexan CO. Balla Ind.	
Name Pirst Middle Mast Last	Name // First	
Date of Birth Month Day Year	Dete of Physics Middle Wat Last	
Place of Birth (State or foreign country)	Filmer Ave Day Year	
Residence Address Street or R. R. City County State,	Place of Birth (State or foreign country) 1958	
40 11. Arlen Prawishing In	Residence Address Street or R. R. City County State	
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Music Maybrichurg and	
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	
Usual Occupation U.S. Wri Free	Divote Annument	
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)	
Other (Specify) Handrek Con Intermed They	Usual Occupation Seles Clerk - Blacker	
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes	Date of birth verified by:	
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes Yes	Other (Specify) ## C++-33 Page 14	
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? No. Yes	
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 No Yes	
6. Are you now under the influence of intoxicating liquor? 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 Yes 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? (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 And Market Sollate Bace of father Addition	
	Birthplace of father (State or foreign country)	
	8. Full maiden name of mother Shillifly Asy Classifith	
(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 degeased so state) Bastistalling Sel.	
their support?	Occupation of mother Alales Night Stateace of mother White	
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)	
Occupation of father Alf Lyndol Mills Race of father Mills		
Birthplace of father (State or foreign country)	State of Indiana, Sa: I depose and state the information given in this application is true and correct.	
12. Full maiden name of mother Miller Bauck Pause	County of HENDRICKS	
Residence of mother (if deceased so state)	Signed New Massac of Bergerale	
Occupation of mother 20 al glant Race of mother William	New Address.	
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this	
State of Indiana, County of HENDRICKS See I depose and state the information given in this application is true and correct.	Glerk HENORICKS Circuit Court	
Signed John J. Martani	DADRIM OR CHARDIAN	
New Address 40 M GREEN Brogues bury	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 Almi, 186	We, the parents, of this applicant neredy give consent of the other parent unnecessary	
HEA MANNY Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the outer	
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:	
State of Indiana,	County of HENDRICKS Father	
County of	Signed Mother	
Signed Father	Signed	
SignedMother	Subscribed and sworn to before me this	
Subscribed and sworn to before me thisday of, 19	Clerk	
CIEL	Various having been refused to the above named parties, the	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	Tr. A marriage license having been and filed purt by written order issued	
HENDRICKS County Co	ourt by written order issued above named parties.	
in authorizes and directs the issuance of	MARRIAGE CERTIFICATE	
RETURN OF MARRIAGE LICENS	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court use issued by the clerk of the , 19 76, authorizing the joining together as husband and wife HODKIDS	
Be It Remembered, there was filed in my office a marriage licen	, 19. 76, authorizing the joining together as husband and wife	
of Indiana dated the 14 day of flish	see issued by the clerk of the HENDRICKS see issued by the clerk of the HENDRICKS and Deborah S. Hopkins office, to-wit: hereby certify that on the 19th day of Hendricks Brownsburg County of Hendricks at Marion County, State of Indiana of Hendricks County, State of Indiana Hendricks of the Circuit Court of HENDRICKS	
Be it further remembered the fill in my of the control of the cont	ffice, to-wit: June 19th day of June	
I, Clifford L. Carmichael	Brownsburg County of Hendricks , County of Indiana	
one thousand nine hundred and 76	at Marion County, State of	
one thousand nine hundred and John Joseph Montani State of Indiana, Groom. and, Bride	Hendricks County, State of Indiana,	
State of Indiana, Groom		
were by me united in marriage as authorized by a marriage license issued for	Carmichael	
County. Dated this 14th day of June , 19	76 Clifford L. Carmichael Signed Mothodist Minister	
this	76 Signed United Methodist Minister Official Designation United Methodist Minister	
The state of the s	28 day of June Clerk	
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Circuit Court HENDRICKS	

STATE OF INDIANA D MADDIAGE LICENSE

APPLICATION FOR M Health under Authority Chap. 126, Ind. Acts 1905 APPLICATION FOR M HENDRICKS	fame , !
HENDRICKS	Date of Application
MALE 5/27/96	FEMALE Medical Examination Report Dated 1
Medical Examination Report Dated Name of Physician W. Ashur Md-	Name of Physician Wayner folks etetement, represents
Name of Physician	ment—Whoever procures the issuance of a license to marry by any faise statement, representa-
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes at the street of the stree	FEMALE APPLICANT
MALE APPLICANT	Name Direct Middle Wissan
Name Pirat Middle Mulletn	Day Year
Date of Birth Month Day Year 1954	June 24 1936
macca 3	Place of Birth (State or foreign country) Place of Birth (State or foreign country) Maron Maron
Place of Birth (State or 101 gil country) Leemboon State of County State of	Residence Address Street or R. R. City County State
Residence Address Street or R. R. City County	Maiden Name if Different
Previous Marital Status: Never Married Number of Previous Marriages	
Annulment	Previous Marital Status: Never Married Number of Previous Marriages
Last Marriage Ended By: Death Death	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	Color or Bace White Negro Other (specify)
Usual Occupation (Ambutton Programmer)	Color or Race White P Negro Color of Race
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Alala My Openacor
Other (Specify) Danies Menual Standard	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? No Types I Yes I	1. Are you now or have you been adjudged, diagnosed or considered as: No Yes
3. Are you now or have you been within five (5) years an inmate of a county as Yes \(\subseteq \) No \(\subseteq \) Yes \(\subseteq \)	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?	2. Are you under guardianship as a person of unsound mind
5. 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 country
8. Are you able to support a family? 9. Are you likely to so continue? Yes No No Yes Yes No Yes Yes Yes	5. Are you now under the influence of intoxicating indust.
10. Do you have minor children from one or more former marriages?	6. Are you now under the influence of a narcotte diag.
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father Market South Small states South
Name Age Address	Residence of father (if deceased so state)
	Occupation of annual
	Birthplace of father (State or foreign country)
Yes No	8. Full maiden name of mother Brasing Selection
(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 support? The W andream	Occupation of mother ARRIVER Race of mother William
11. Full name of father (if deceased so state) was last to	Birthplace of mother (State or foreign country)
Occupation of father III Mening Race of father Matter	State of Indiana, I depose and state the information given
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Calgardia The Additional Control of the Calgardian Calgardian Control of the Calgardian Ca	Patricia Mas 7/mas)
Residence of mother (if deceased so state)	Signed WWW BA
Occupation of mother	New Address 2392 Dulland United
Birthplace of mother (State or foreign country)acana () aca,	Subscribed and sworn to before me thisday of
State of Indiana.	Mea M. MAYALA Clerk HENDRICKS Circuit Court
County of HENDRICKS ss: in this application is true and correct.	
Signed Land Mary Spatial A	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 344 Bulland And	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 19.	signs, state facts which render the consent of the other parent unnecessary
Gless M. Marthy ClerkHENDRICKS 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	
signs, state facts which femder the consent of the	
	State of Indiana,
State of Indiana,	County ofHENDRICKS
County ofHENDRICKS	SignedFather
SignedFather	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 COU	RT. A marriage license having been refused to the above named parties, the
HENDRICKS County C	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
Be It Remembered, there was filed in my office a marriage lice	ense issued by the clerk of the HENDRICKS Circuit Court
of Indiana dated the 17 day of June	, 19.24, authorizing the joining together as husband and wife
Richard Ray anderson	and Patricia Mae Vinson
Be it further remembered, the following marriage certificate was filed in my	office, to-wit:
1, Marc Donny Hays	hereby certify that on the 19 day of Jung.
one thousand nine hundred and	at Mengelka , County of Newarelland,
one thousand nine hundred and 76 at slainfield County of Lendricke, State of Indiana, Groom Lichard Gay anderson of Marian County, State of Indiana and, Bride Satricia Mal Vinson of Hendricks County, State of Indiana,	
and, Bride Salrusia Mal Jinson of	County, State of Snalland,
	or that purpose by the Clerk of the Circuit Court of
County. Dated this day of Jene	76.
Dated this day of June, 19	Signed Marc Sanny Halp
	Official Designation Baptest Ministly
Filed and recorded in accordance with the laws of the State of Indiana this	24 day of June , 19 76.
	Signed Illn M. Harvelf Clerk
Parkit (appli)	HENDRICKS Circuit Court

HENDRICKS

STATE OF INDIANA

HENDRICK	County
MALE Medical Examination Report Dated 6-9-76	FEMALE Date of Application
Name of Physician & rue Clark	Medical Examination Report Dated 6-9-76
Name of Physician	
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 journal
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	the losuance of a license to marry by any false statement, representa-
Name Middle Stast	Name First
Date of Birth Month Day Year 7 1958	Date of Birth Month Day Thompson
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) Day Year 1958
Residence Address Street or R. R. City County State	Residence Add
Previous Marital Status: Never Married Number of Previous Marriages	RRI Box 664 Planfuld Hadrub State
Last Marriage Ended By: Death Divorce Annulment	
	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race	Last Marriage Ended By: Death Divorce Annulment
Date of birth verified by: Birth Cert. Dudicial Decree	Color or Race White Negro Other (specify)
Other (Specify) # 58 - 022005	Usual Occupation Secretary
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 sylum 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 1	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 afflicted with a transmit No 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 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 Name Age Address	7. Full name of father Kobert Wale Stompson
	Occupation of father. Lann. Equipment. Race of father.
	Birthplace of father (State or foreign country) West, Usegimie
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Lucille Delouis Barr
(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 Bassy Th Stotts	Occupation of mother Thusewell Race of mother 1
Occupation of father Acad - Ball File Race of father W	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Mysica & Strong	County of
Residence of mother (if deceased so state) Clearmont	Signed Kanon & Dampoon
Occupation of mother Alexaldraf Race of mother D.	2 76
Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given	Subscribed and sworn to before me this day of day of 19/
County of HENDRICKS as: in this application is true and correct.	
New Address R 3 apt 9 Dainfield	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 3007 Subscribed and sworn to before one this 2 day of 1976	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Sles M Lawy 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 HENDRICKSss:
State of Indiana.	County of Father Signed Father
County of HENDRICKS Signed Father	Signed
Signed Mother	Subscribed and sworn to before me thisday ofday
Subscribed and sworn to before me thisday of, 19	Clerk
Clerk	having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	ourt by written order issued
in Clerk's Office authorizes and directs the issuance of	
The Alt Remembered there was filed in my office a marriage were	the joining together as husband
Be It Remembered, there was filed in my office a marriage licer of Indiana dated the day of Michael I Shotts	, 19. 10., authorizing the journal
Be it to it	fice to-wit:
I, Rev. Robert W. Thompson	hereby certify that on the 11th day of Hendricks at Center State of Indiana
I, Rev. Robert W. Thompson one thousand nine hundred and 76 State of Indiana Communications Michael Larry Shotts	at Center Indiana County, State of Indiana Indiana
State of Indiana, Groom Michael Larry Shotts	at Center , County of Indiana of Hendricks County, State of Indiana , County State of Hendricks County, State of HENDRICKS
that memore by the Clerk of the Circuit Court	
Committed in marriage as authorized by a marriage mense	
Dated this 11th June 19	Signed Rev. S. the Cospel
	Official Designation 1110 June , 19 Clerk
Filed and recorded in accordance with the laws of the State of Indiana this	Signed HENDRICKS Circuit Court
	UENDRICKS

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS _County MALE Date of Application Medical Examination Report Dated____ FEMALE Medical Examination Report Dated_ Name of Physician Eni Clark Name of Physician & rich 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 Name Place of Birth (State or foreign country) £# 3 Previous Marital Status: Never Married Number of Previous Marriage Death Divorce Annulment Last Marriage Ended By : Previous Marital Status: Never Married Y Number of Previous Marriages White Negro Other (specify)... Color or Race Last Marriage Ended By: Death ☐ Divorce ☐ Annulment ☐ Usual Occupation Jam Color or Race Negro | Other | (specify). Date of birth verified by : Birth Cert. Judicial Decree # 58-022005 Usual Occupation Other (Specify)..... Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile? Date of birth verified by: Birth Cert. | Judicial Decree Yes 🗆 Of Unsound Mind? 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 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? /Yes 🗆 No 🗆 Of Unsound Mind? 4. Are you afflicted with a transmissible disease? Yes 🗌 No 🗹 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? No D , 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? No Yes No No 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? 9. Are you likely to so continue? Yes 🗸 / No 🗆 Yes 🗆 10. Do you have minor children from one or more former marriages? No Ø Yes 🗆 Yes 🗌 (If yes, answer questions a, b, c) 7. Full name of father Robert Wade Thompson (a) List their full names, ages and addresses Residence of father (if deceased so state). Place Address Occupation of father Jam Cquip mand. Race of father Birthplace of father (State or foreign country). Thest 8. Full maiden name of mother. Aucable (b) Are you supporting or contributing to their support? Yes 🗌 No 🗆 Are you complying with any court order or orders issued for their support? Residence of mother (if deceased so state). Plant Yes 🗌 No 🗆 Occupation of mother Housewest 11. Full name of father ... Anns Birthplace of mother (State or foreign country) West Duginia Occupation of father Alack State of Indiana, Birthplace of father (State or foreign country). 12. Full maiden name of mother My Townson Residence of mother (if deceased so state)...Cleans Occupation of mother Alcallana Birthplace of mother (State or foreign country) ... State of Indiana. County of HEN Thereby give my consent for Subscribed and sworn Dles / CONSENT OF PAR We, the parents, of signs, state facts wh Subscribed and sworn to before me this que day of State of Indiana, County of HEN Subscribed and swor COMPLETE IF MARRIAGE LICENSE ISSUED BY UNDER OF County Superior 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...., 19.76, authorizing the joining together as husband and wife of Indiana dated the 10 day of. hereby certify that on the 11th day of..... Be it further remembered, the following marriage certificate was filed in my office, to-wit: Hendricks, County of ... at Center Rev. Robert W. Thompson Indiana ... County, State of ... one thousand nine hundred and 76 IndianaCounty, State of ... State of Indiana, Groom Michael Larry Shotts Hendricks Rev. R. W. Thompson Official Designation Minister of the Gospel Dated this llth Filed and recorded in accordance with the laws of the State of Indiana this Circuit Court HENDRICKS.

Form Prescribed By Indiana State Board of Worlds Application FOR M	TARRIAGE LICENSE File
Indiana State Board of Health under Authority Chap. 126, Ind. Acts 1905 HENDRICK	County
HENDINGS	Date of Application
MALE Medical Examination Report Dated June 4 1976	Name of Physician
Name of Physician M. O. Acamakon	
Name of Physician ————————————————————————————————————	ement—Whoever procures the issuance of a license to marry by any raise statement, representa-
MALE APPLICANT	Name First Middle () Last
Name Wirst Middle Last -	Stephanie Hay Lee
Date of Birth Month Day Year	Date of Birth Month Place of Birth (State of foreign country) Place of Birth (State of foreign country)
Place of Birth (State or foreign country)	Letanon and
Residence Address Street or R. R. City County State	Residence Add & P #1 Boy 44A. North Salen
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different
	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)
Usual Occupation Date of birth verified by: Barth Cert. Judicial Decree	Usual Occupation V Ray Jech
Other (Specify) Rush Memorial Hospital	Date of birth verified by: Birth Cert. Undicial Decree
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes No Yes	Other (Specify) Witham Memorial Hosp.
2. Are you under guardianship as a person of unsound mind?	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? 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	An Imbecile? Of Unsound Mind? No Ves No Ves
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 ☐ 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 Wes
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? 7. Full name of father 7. Full name of father
(a) List their full names, ages and addresses Name Age Address	Residence of father (if deceased so state) James
	Occupation of father Brick MassyrRace 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 Almaa Low Marlooth
(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 (are type Naves)	Occupation of mother Museum Race of mother Race of mother
Residence of father (if deceased so state) Seme Occupation of father Minister Race of father	Birthplace of mother (State or foreign country)
Occupation of father Race of father Birthplace of father (State or, foreign country) Race of father	State of Indiana, Sa: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Matha Telen Knetzer	County of HENDRICKS in this application is true and correct.
Residence of mother (if deceased so state)	Signed Dephanie K. All
Occupation of mother Race of mother	New Address 201
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of MRL 19.79
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Oler M. Jarvey Clerk HENDRICKS Circuit Court
New Address 23-2 (a Herm tool Ct. and 824	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 200 (a Almittan Ct. Upt. 024 Subscribed and sworn to before me this day of June 1976	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Dlen M. Harvey ClerkHENDRICKS 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 ofHENDRICKS
County of HENDRICKS	SignedFather
Signed	SignedMother
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of, 19
	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
HENDRICKS County Co	ourt by written order issued and filed
authorizes and directs the issuance of	of a marriage license to the above named parties.
Be It Remembered, there was filed in my office a marrian I	E AND MARRIAGE CERTIFICATE
of Indiana dated the day of	use issued by the clerk of the HENDRICKS Circuit Court 19,7 authorizing the joining together as husband and wife
1. Garl (haves)	nuce, to-att.
one thousand nine hundred and 76	hereby certify that on the 18 day of June
State of Indiana, Groom Helbert Ray Davis	at North Salem , County of Hendricks of Hendricks County, State of Indiana
County.	that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this /8 day of June, 19 7	6
, 192	Signed Egyl C. Davis BS FAPC
Filed and recorded in accordance with the laws of the State of the	Official Davis Control of the Contro
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Illen in June 1976.
	Signed Glen M. Harrey Clerk

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE No. 217 File Bk37 HENDRICKS County

MALE Medical Examination Report Dated 5-12-76	FEMALE Date of Application
Name of Physician Paul S. Lewis	Medical Evamination
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False station of pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	stement—Whoever progues the
MALE APPLICANT	the issuance of a license to marry by any false statement, representa-
Name Ronald Wallen Xhtte Last	Name First
Date of Birth Month Day Year	Date of Birth Alana Su Last
Place of Birth (State or foreign gountry)	Day Year
Residence Address Street or R. R. City County State	Parlianagelis (1)
Previous Marital Status: Never Married Number of Previous Marriages	Residence Address Street or R. R. City County State
	Maiden Name if Different Sadple. Hendricks Ind.
Last Marriage Ended By: Death Divorce Annulment Whay 2, 1976	Previous Marital Status: Never Married C No.
Color of Race White Negro Other (specify)	Last Marriage Ended By: Dooth D. Dooth
Usual Occupation Julea Danne	Color or Research May 9, 1976
Date of birth verified by Birth Cert. Judicial Decree (Other (Specify) Selections Service #12-17-46-185	Regro Uther (specify)
1. Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation Manager Date of high paris 11
An Impective: Of Unsound Mind? No D Yes D	Date of birth verified by: Birth Cert. Undicial Decree Other (Specify) # 13286
2. Are you now or have you been within five (5) years an inmate of a	1. Are you now or have you been adjudged, diagnosed or considered as:
If answer to I is "yes" has the cause of such condition been recovered.	An imbedie?
4. Are you afflicted with a transmissible disease? No E 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 Ye
1. Are you now under the influence of a narcotic drug? No B Yes	4. Are you releted to the group death
9. Are you likely to so continue? Yes B 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, e)	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 Harry Edward Idworthy
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Return Race of father W. Birthplace of father (State or foreign country) Sudpla Sudiana
	8. Full maiden name of mother Beylat Bours Smith
(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. Pull same of father Junthary William Hattentack	Occupation of mother Advanced Race of mother W
Residence of father (If deceased so state) Decease &	Birthplace of mother (State or foreign country) Connascelle Jac
Occupation of father Race of father	The same provided and the same of the same
Birthplace of father (State or foreign country) Jell City , Values	State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
2. Full maiden name of mother Disgrain Gladys Stevens	Signed & Duora 8. Kay
Residence of mother (If deceased so state) Phincette, Show	New Address 10229 Sacora
Decupation of mother Ashar School of Race of mother W. Birthplace of mother School or topping appears Asses as wells. KU	New Address. 10 day of June 19.76
Birthplace of mother (State or foreign country) April 2016, A. G. Rate of Indiana.	Subscribed and sworn to before me this day of Clerk HENDRICKS Circuit Court
County of HENDRICKS and in this application is true and correct.	Gerk Mentalian Circuit Court
Signed X Honald W Hallenbock	CONSENT OF PARENTS, PARENT OR GUARDIAN
Now Address 10153 Rewanna Dr. Justinia 10 day of June 1976.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
blen M Harvey Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS. PARENT OR GUARDIAN	
Ve. the parents, of this applicant hereby give consent for this marriage. If only one parent	
igns, state facts which render the consent of the other parent unnecessary.	
	State of Indiana,
tate of Indiana,	County of HENDRICKS
ounty of	Signed Father Wether
Signed Father	Signed
Signed Mother	Subscribed and sworn to before me this
and sworn to before me this	Clerk
	T A marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	r. A marriage license having been recommended and filed art by written order issued and filed a marriage license to the above named parties.
HENDRICKS County authorizes and directs the issuance of	f a marriage license to the above named parties.
authorizes and directs the issuance of	
indiana dated the	III
e it further remembered the following marriage certificate was filed in my of	fice to-wit:
Te it further remembered, the following marriage certificate was filed in my of	dereby certify that on the 26th day of June dereby certify that on the Laterns County of Hendricks Indiana
Teal O. Younce the thousand nine hundred and Ronald William Hattenbard Royal	ut, Lake of the Laterns County of Indiana
tate of international Ronald William Hattenbay	County, State of Indiana,
nd, Bride Diana Lynn Key	Hendricks Hendricks Hendricks
nd, Bride Diana Lynn Key of the street by me united in marriage as authorized by a marriage license issued for to ounty.	
ounty.	6. Signed Teal O. Younce Minister
ated this 26th day of June , 19 7	
	9th day of June , 19 Clerk
iled and recorded in accordance with the laws of the State of Indiana this	9th day of June , 15 Signed Gless M. Harvey Circuit Court HENDRICKS Circuit Court
	HENDRICKS.

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

	Date of Application
MALE 6-9-76	FEMALE Medical Examination Report Dated 6-9-76
Medical Examination Report Dated	Name of Physician David Hadley
Name of Physician Name of Phys	V.
LL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes False on or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	FEMALE APPLICANT
MALE APPLICANT	Name First & Middle Last
ame First Middle Devens	Date of Birth Month Day Year
ate of Birth Month Day Year	Place of Birth (State for foreign country)
ace of Birth (State or foreign country)	Residence Address Street or R. B. City County State
sidence Address Street or R. R. City County State	503 Stephens Dr. Brownsburg Ind
revious Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different
ast Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
	Last Marriage Ended By: Death Divorce Annulment
lor or Race White Negro Other (specify)	Color or Race White Negro Other (specify)
ate of birth verified by: Birth Cert. Judicial Decree John West of Health	1 10 00 1 1
Other (Specify).	Date of birth verified by: Birth Cert. Judicial Decree Jula - Dept. of
Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes	Other (Specify)
Of Unsound Mind? No Yes Yes Yes	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 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?
Are you afflicted with a transmissible disease? Are you related to the bride closer than second cousin? Yes Yes Yes Yes	2. Are you under guardianship as a person of unsound mind? No Z Yes
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 ☐
Are you able to support a family? Yes No	4. Are you related to the groom closer than second cousin? 5. Are you now under the influence of intoxicating liquor? No Yes
Are you likely to so continue? 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 drug? No Yes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father Suppola Frederick Donrolse
Name Age Address	Residence of father (if deceased so state) Allen filled Attach
ason allen Ousens 5 Jupto, Ind	Occupation of father Altered Race of father H
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes Vo \(\sqrt{No} \)	8. Full maiden pame of mother table succelle Homrolds
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state)
Full name of father James Stell Owens	Occupation of mother Mallall fl. Race of mother.
Residence of father (if deceased so state) Allasta	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) Full maiden name of mother Delaties Jane Zialej	County of
Residence of mother (if deceased so state), I senfully and	Signed & Miriam Elaine Domisese
Occupation of mother accuses tant Race of mother 21	New Address 503 Stephen Dr Brownsburg, In
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this LP day of June 1976
te of Indiana, I depose and state the information given in this application is true and correct.	Illen M. Harriey Gerk HENDRICKS Circuit Court
unty of HENDRICKS In this application is true and correct.	Mest to Admin History of the Control
New Address 503 Stephen Dr. Brownslung	CONSENT OF PARENTS, PARENT OR GUARDIAN
bscribed and sworn to before me this	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Illen M. Harvey ClerkHENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
NSENT OF PARENTS, PARENT OR GUARDIAN	
the parents, of this applicant hereby give consent for this marriage. If only one parent s, state facts which render the consent of the other parent unnecessary	
as, scale laces which render the consent of the other parent unnecessary	
	State of Indiana,
te of Indiana,	County ofHENDRICKS
inty of HENDRICKS	SignedFather
Signed	SignedMother
scribed and sworn to before me this	Subscribed and sworn to before me thisday of, 19
	Clerk
MDI ETE LE MADDIACE LIGENCE TOCKED DE LE	
HENDRICKS COUNTY	Γ. A marriage license having been refused to the above named parties, the
authorizes and directs the issuance of	art by written order issued and filed
RETURN OF MARRIAGE LICENSE Be It Remembered, there was filed in my office a marriage license	
Thurunu dated the	· 7 /
Howard J. Owens	nd. Miriam F. Domroese
it turther remembered the fall.	fice, to-wit:
W. Robert Lewis	ereby certify that on the 20th day of June
thousand nine hundred and 76	Brownshire
e thousand nine hundred and 76 ate of Indiana, Groomoward J. Owens	
e thousand nine hundred and 76 ate of Indiana, Groom Oward J. Owens d, Bride Miriam E. Domroese	Marion County, State of Indiana
e thousand nine hundred and 76 ate of Indiana, Groom Oward J. Owens d, Bride Miriam E. Domroese	Marion County, State of Indiana
e thousand nine hundred and 76 ate of Indiana, Groom Oward J. Owens d, Bride Miriam E. Domroese of of the office of the office of the order of the office of the order of the office of the order of th	Hendricks County, State of Indiana
ere by me united in marriage as authorized by a marriage license issued for to the state of the state of the state of the state of this state of the	Hendricks County, State of Indiana Hendricks County, State of Indiana Heat purpose by the Clerk of the Circuit Court of HENDRICKS
e thousand nine hundred and 76 ate of Indiana, Groom oward J. Owens d, Bride Miriam E. Domroese of of or the state of indianal marriage as authorized by a marriage license issued for the state of this 15th of day of June 19.	Hendricks County, State of Indiana Hendricks County, State of Indiana Hendricks County, State of Indiana Hendricks Hendricks Hendricks Hendricks Hendricks Albert Lewis Church
te thousand nine hundred and 76 ate of Indiana, Groomoward J. Owens d, Bride Miriam E. Domroese of of the standard of the st	Hendricks County, State of Indiana Hendricks County, State of Indiana that purpose by the Clerk of the Circuit Court of HENDRICKS 76 Signed W. Robert Lewis Official Designation Retired Minister, Christian Church
te thousand nine hundred and 76 ate of Indiana, Groom oward J. Owens d, Bride Miriam E. Domroese of reby me united in marriage as authorized by a marriage license issued for the steel this 15th day of June 19. Ited and recorded in accordance with the laws of the State of Indiana this.	Hendricks County, State of Indiana Hendricks County, State of Indiana Hendricks County, State of Indiana Hendricks Hendricks Hendricks Hendricks Hendricks Albert Lewis Church

STATE OF INDIANA

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 tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT FEMALE APPLICANT Previous Marital Statust 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 | White Negro Other (specify)... Date of birth verified by : Birth Cert. | Judicial Decree Usual Occupation Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile? Date of birth verified by: Birth Cert. Didicial 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 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? Yes 🗌 No 🖯 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? No 🗹 Yes 🗆 6. Are you now under the influence of intoxicating liquor? No B 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 Yes 8. Are you able to support a family? Yes [] No 🗆 9. Are you likely to so continue? 5. Are you now under the influence of intoxicating liquor? Yes 🗹 No 🗆 10. Do you have minor children from one or more former marriages? No 🗆 Yes 🗆 (If yes, answer questions a, b, c) Charles R (a) List their full names, ages and addresses Address (b) Are you supporting or contributing to their support? No 🗆 Birthplace of mother (State or foreign country)..... Occupation of father // lachun State of Indiana, Birthplace of father (State or foreign country) Residence of mother (if deceased so state). Harve Clerk 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. Clerk HENDRICKS Hasuly 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. County of..... Father State of Indiana, County of HENDRICKS 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 HENDRICKS County Court by written order issuedauthorizes and directs the issuance of a marriage license to the above named parties. RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court Be It Remembered, there was filed in my office a marriage license issued by the clerk of the....., 19. ZG authorizing the joining together as husband and wife and Matchie Luann Fitzgibbons of Indiana dated the S day of and and Be it further remarks to grave filed in my office, tohereby certify that on the 19th day of June Be it further remembered, the following marriage certificate was filed in my office, to-wit:

1, Norman L. Weaver hereby certify at Danville , County of Hendricks , State of Indiana, Groom Gary Randall Cameron of Marion County, State of Indiana Matchie Luan Fitzgibbons 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 Signed Norman L. Weaver June , 19 76. Dated this. Minister Official Designation ... Clerk Filed and recorded in accordance with the laws of the State of Indiana this...... 22nd..... Harvely Signed Glen M.Circuit Court ... HENDRICKS.

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

...Circuit Court

No. 220

HENDRICKS County

FEMALE

MALE Medical Examination Report Dated 6-1-76	Medical Examination Report Dated
Val Orenharary M. to.	Name of Physician And Sunbanger, M. to
Name of Physician Karl Sunbarrager, 17 Prescribes "False state	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 to tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	FEMALE APPLICANT
MALE APPLICANT	Name First Middle Last
Name Africa Wyland Done	Date of Birth Month Day Year
Date of Birth Day Year 1953	Place of Birth (State or foreign country)
Place of Birth (State or foreign country)	+ Mond Calif
Residence Address Street or R. R. City County State	518 S. Jefferson, Drownshung, In.
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 Divorce	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	The Color of Consists
Usual Occupation Insurance	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Udicial Decree	Usual Occupation Survey
☐ Other (Specify)	Date of birth verified by: Birth Cert. Judicial Decree
An Imbecile? Of Unsound Mind?	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county asylum 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?	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? No Par Yes
7. Are you now under the influence of a narcotic drug? No Yes No Yes No N	4. Are you related to the groom closer than second cousin? No Yes □ No Yes □ No Yes □
9. Are you likely to so continue? Yes No	5. Are you now under the influence of intexteating inquor. 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? No Yes (If yes, answer questions a, b, c)	7. Full name of father Austral M. Laufen
(a) List their full names, ages and addresses Age Address	Residence of father (if deceased so state) Brownsburg, In
Name Age Address	Occupation of father Suspector Bace of father Wh
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother Many & Plummur
(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 decoased so state) Browndung.
their support? Rose Rose	Occupation of mother Assistancy Race of mother wh
11. Full name of father (if deceased so state) Wally James	Birthplace of mother (State or foreign country) Indiana
Occupation of father Sumance Bace of father Will	
Birthplace of father (State or foreign country)	State of Indiana, County of
12. Full maiden name of mother Jan J. Flettboler	Signed Ly Clar Taylor
Residence of mother (if deceased so state) Waller South	0/1:/1.4/2 N m.
Occupation of mother Addition Race of mother WW	New Address J. J. J. Gardensely Just, Who Gours
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of day of 1966.
State of Indiana, County of HENDRICKS Ses: I depose and state the information given in this application is true and correct.	Glerk HENDRICKS Circuit Court
Signed Charles Wyland Bone	
New Address 9523 University ave and 3	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of June 1976.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
ClerkHENDRICKS 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	
signs, state facts which render the consent of the other parent unnecessary	
	State of Indiana,
State of Indiana,	County ofHENDRICKS
County of HENDRICKS	SignedFather
Signed Father	Signed
Signed	Subscribed and sworn to before me thisday of
Clerk	Clerk
	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
Be It Remembered, there was filed in my office a marriage lice	SE AND MARRIAGE CERTIFICATE onse issued by the clerk of the HENDRICKS Circuit Cour
of Indiana dated the day of day of	, 19.76., authorizing the joining together as husband and wife
Charles Ix yland Bone	and Ly man Yould's
Be it further remembered the following marriage certificate was filed in my	and Lis ann Faylor
1, Justify M. Madde	hereby certify that gn the 26 day of June
State of Indiana Grown Charles 198	at Brownsburg Country of Itendricks
and Bride Lee Ann. Freday	of County, State of Journ
were by me united in marriage as authorized by	Thenolricks County, State of Indiana
	r that purpose by the Clerk of the Circuit Court of
Dated this 26 day of June, 19	76.
	of 100 the state of the the the state of a change day the the the
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Minister
this	Signed Alen M. Harries Clerk
	Sey well the state of the

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 Bk 37 HENDRICKS County MALE Medical Examination Report Dated 6-7-76 Date of Application FEMALE Medical Examination Report Dated 6-7-76 Stephen Name of Physician R. Name of Physician R. Stephen ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "Palse 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 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 / Control by Birth Cest, Dudicial Decree Color or Race White Negro □ Other □ (specify)... Usual Occupation Unemployed Fother (Specify) Mary Deschings Papers 1. Are you now or have you been adjudged, diagnosed or considered as:
An imbedile? Date of birth verified by: Birth Cert. | Judicial Decree Yes [Of Unamend Mind? Other (Specify gat# 628 Bt 16 P. 6 2. Are you under guardianship as a person of unsound mind? Yes 🗌 Are you now or have you been within five (5) years an immate of home for indigent persons? 1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes If answer to I is "yes" has the cause of such condition been removed? No [Yes 🗌 Of Unsound Mind? 4 Are you afflicted with a transmissible disease? Yes [2. Are you under guardianship as a person of unsound mind? I. Are you related to the bride closer than second cousin? Yes 🗆 No Yes 4. Are you now under the influence of intoxicating liquor? No E Yes [3. Are you afflicted with a transmissible disease? No Yes t. Are you now under the influence of a narcotic drug? No B 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? Yes / No [No Yes 10. Do you have minor children from one or more former marriages? Yes [6. Are you now under the influence of a parcetic drug? No 🖾 Yes 🗆 (If yes, answer questions a, b, c) (a) List their full names, ages and addresses 7. Full name of father Classon Ranu eased so state) Indple Address Residence of father (if dec Occupation of father Bulgepat Buso Race of father W Birthplace of father (State or foreign country). Rextucky 8. Full maiden name of mother Ella Mae (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) Brownshung Ind Yes 🗆 No [Occupation of mother Waitress 11. Pull name of tather Sidney Lee Dunam Birthplace of mother (State or foreign country) Kentuckey ss: I depose and state the information given in this application is true and correct. State of Indiana. 12. Full maiden name of mother Thille Black Sugar Signed X Clayetta D. Raxuy New Address Reachdall Occupation of mother Mariana Alde Birthplace of mother (State or foreign country) Judgle, State of Indiana, Clerk HENDRICKS I depose and state the information given in this application is true and correct. Signed Widney Broman CONSENT OF PARENTS, PARENT OR GUARDIAN Now Address Roachdale We, the parents, of this applicant hereby give consent for this marriage. If only one parent kene signs, state facts which render the consent of the other parent unnecessary. Alen III Hawey Clerk 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... HENDRICKS County of..... State of Indiana. County of HENDRICKS Father 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 Court by written order issued..... authorizes and directs the issuance of a marriage license to the above named parties. HENDRICKS 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, authorizing the joining together as husband and wife and Clayetta D. Raney June of Indiana dated the ... hereby certify that on the 19th day of June, Be it further remembered, the following marriage certificate was filed in my office, to-wit: at New Maysville , County of Putnam , Rev. Charles E. Caplinger State of Indiana, Groom Sidney Lee Branam of Hendricks County, State of Indiana Putnam County, State of Indiana, Signed Rev. Charles E. Caplinger June , 19 76 Official Designation Minister Dated this Signed bless M. Garwelf Clerk Filed and recorded in accordance with the laws of the State of Indiana this 28 day of Messer M.

HENDRICKS.....

464 Form Prescribed By

STATE OF INDIANA ION FOR MARRIAGE LICENSE

File		
	0.11	1071
	Menell,	1716

APPLICATION FOR MAINTENANCE County APPLICATION FOR MAINTENANCE COUNTY HENDRICKS County Date of Application	
	FEMALE / 3 - 7/a
MALE 6/3/76	Medical Examination Report Dated 6-3-16
Medical Examination Report Dated	Name of Physician James Black, M. W.
Name of Physician James Places 1/14.	
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 produces the assumed the Applicant
MALE APPLICANT	FEMALE ATTECANT
Name First Middle Straugh	Name Jenny Lynne Wood
Date of Birth Month Day Year	Date of Birth Month 12 1958
Place of Birth (State or foreign country)	Place of Birth (State or foreign/country)
Treesfield P. P. City County, State	Residence Address Street or R. R. City County State
Residence Address Street or R. R. City Manually Manually Street or R. R. B & 55 Manually Manually	Maiden Name if Different
Previous Marital Status: Never Married Number of Previous Marriages	Previous Marital Status: Never Married V 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
Daniel .	Color or Race White Negro Other (specify)
Usual Occupation //fleChanter	Usual Occupation // /n/bus
Other (Specify) 1/3 - 56 - 0/9270	Date of birth verified by: Birth Cert. Dudicial Decree
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes □ Yes □ Yes □	Other (Specify)
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 asylum or No \(\text{No} \) Yes \(\text{Ves} \)	An Imbecile? No I Yes No
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes
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. 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 Yes	4. Are you related to the groom closer than second cousin? No Yes
8. Are you able to support a family? Yes V	5. Are you now under the influence of intoxicating liquor? No Yes
9. Are you likely to so continue? Yes \(\text{Yes} \(\text{No} \) \(\text{I} \) 10. Do you have minor children from one or more former marriages? No \(\text{Yes} \(\text{I} \)	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 Marles Jusiph Wood
Name Age Address	Residence of father (if deceased so state). It lamy let
	Occupation of father Caspinitas Race of father Race
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Sulland A
(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 Lev Stroup	Occupation of mother Race of mother
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Ballu Race of father Mille	State of Indiana, I depose and state the information given
Birthplace of father (State or foreign country)	County ofHENDRICKS
12. Full maiden name of mother of Marilla Talka Alla Alla Con le	Signed Sony Lyn Wood
Occupation of mother	New Address RB 3 Box 55 Danville
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this 14 day of June 1976
State of Indiana, Section 1 depose and state the information given in this application is true and correct.	Hen M. Hasself Clerk HENDRICKS Circuit Court
County of	J. J. J. J. J. W. W. J. Glerk Halling and Color of the Co
Signed Dogg allow Strough New Address R3 BOX 55 Dagwille IN	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 10 23 Vacantite Subscribed and sworn to before me this day of 41 11 1976	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworth to be the the subscribed and sworth to be the subscribed and	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR SPARDIAN	
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 ofHENDRICKS
State of Indiana, County of HENDRICKS	Charles and Wood Bather
Signed Father	Signed
Signed	Signed Salvar Salvar 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 COUL	RT. A marriage license having been refused to the above named parties, the
HENDRICKS County C	ourt by written order issued and filed
inauthorizes 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 HENDRICKS Circuit Court
of Indiana dated the day of Jens	, 19.76., authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my	and Jenny Lynn Wood
1, James I Schockley	hereby certify that on the 17 day of Jene
one thousand nine hundred and 76	at Danville Country of Tendricks
State of Indiana, Groom Delg Allen Strucep	hereby certify that on the 17 day of June at Nanvelle County of Hendricks of Hendricks County, State of Indiana
one, Draw again the horas of the the of	Sland Heller County State of Indedundading
County no diletted in marriage as authorized by a marriage license issued for	that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this /7 day of June, 19.7	
0	Signed James I Schockley Official Designation minister
Filed and recorded in accordance with the	Official Designation minister
Filed and recorded in accordance with the laws of the State of Indiana this	21 day of June , 19.76
	Signed Glen M. Harvey Clerk
	HENDRICKS Circuit Court

HENDRICKS ..

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS File_ 37

HENDRICKS

MALE	
Medical Examination Report Dated 6-11-76	FEMALE Date of Application
Name of Physician Thomas O. moare	Medical Examination Report Dated 6-11-76
	Name of Physician Thomas O
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	Thame of Physician Thomas O. moore
MALE APPLICANTE	tement—Whoever procures the issuance of a license to many !
Nome First Middle	marry by any false statement, representa-
Name Are S. Hingh Last	Name First FEMALE APPLICANT
Date of Birth Day Year	Caral Middle Last
Place of Birth (State or forgign equatry) 1928	Date of Birth Month Day Year
Linton . 1.1'	Place of Birth (State of foreign country) 29 1957
Residence Address Street or R. R. City County State	Residence Add
Previous Marital Status: Never Married Number of Previous Marriages	3535 Brach City County State
	Maiden Name if Different Thury Indianapoles, Ind.
Last Marriage Ended By: Death Divorce Annulment	Previous Marital State 2
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
Color of International Control of	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation School Jeacher	Color or P
Date of birth verified by: Birth Cert. Judicial Decree Voter Seq. 2007	Color or Race White Negro Other (specify)
Other (Specify)	Usual Occupation Gesearch an't
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
No D Yes	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county	1. Are you now or have you been adjudged, diagnosed or considered as:
Manager to 3 is "yes" has the gauss of such condition have	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	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 P 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? Yes 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? No Z Yes
(a) List their full names, ages and addresses	7. Full name of father Lamer Cale
Name Age Address	Residence of father (if deceased so state) Indianapalis Ind.
	Occupation of father Sainter Race of father 34.
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother Bernice Osiris armendaris
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for	3535 Bracksede Okuy Indianapelis Ind
their support?	
11. Full name of father Cliffe 6. Juncher	Occupation of mother Secretary Race of mother 94
Residence of father (if deceased so state) Julion, Sud.	Birthplace of mother (State or foreign country)
Occupation of father Librard Race of father T	Charles of Taillians
Birthplace of father (State or foreign country) Indiana	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 Madge M. Walton	Signed Carol Cole
Residence of mother (if deceased so state). Declared	
Occupation of mother Race of mother	New Address 116 OakHURST PK BLOWNSBULG In
Birthplace of mother (State or foreign country) Indiana	Subscribed and sworn to before me this
State of Indiana, I depose and state the information given	Glerk HENDRICKS Circuit Court
County of HENDRICKS in this application is true and correct.	XXXIII III III III III III III III III
Signed & then & Junctur	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 116 Ochhunt VIL Burnshyla	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 June 019	
Glen m. Harvey Gerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN	
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
igns, state facts which render the consent of the other parent unnecessary	
the consent of the order parent district.	
Table Action 1	State of Indiana,
state of Indiana,	County of HENDRICKS
County of HENDRICKS	SignedFather
Fether	Signed
Signed Mother	Subscribed and sworn to before me thisday of
subscribed and sworn to before me thisday of, 19	Subscribed and swoth to see the second swoth to second
Clerk	
	The marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County C	1. A marriage needs and filed and filed
HENDRICKS County Co	art by written order issued.
therings and directs the issues	
THE PROPERTY OF THE PARTY OF TH	HENDRICKS CETCULO COULT
TO THE ME STATE OF THE STATE OF THE CONTROL OF THE	the inimina together as nusbana and wife
Indiana de la	, 19.76, authorizing the following
Indiana dated the day of day	· (and 6. and
e it further remembered the following marriage certificate was filed in my o	of Indianapolis , Country of marion ,
Julion a formendaring	vereby certify that the marion, Country of Marion,
Company to the contract of the	at muful Indiana
total to the surrender of the surrender	County, State of
tate of Indiana, Groom Johns fr. Sinches	Marcold HENDRICKS
nd, Bride of Indiana, Groom of of only of the order of th	hat purpose by the Clerk of the Circuit Court of
ounty.	, Ol & y hor
ounty. Outed this 18 day of June, 19 7	6 Signed Subero & Sincher
day of	Official Designation Tresbyterian Minister
	70 day of O' Clerk
iled and recorded in accordance with the laws of the State of Indiana this	30 day of Garrely Clerk
th accordance with the ways of	Signed HENDRICKS Circuit Court

Form Prescribed By Indiana State Board of

STATE OF INDIANA

Health under Authority Chap. 126, Ind. Acts 1905 HENDRICK	County June 1, 1976 Date of Application
1/2/2/	FEMALE 6/2/76
MALE Medical Examination Report Dated MALE Medical Examination Report Dated	Medical Examination Report Dated Name of Physician Limin J. Rock Inc.
Name of Physician Common A Manager Manager	
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	Name Name Middle
Name A First Middle Clark	Date of Birth Mopth Day Year
Date of Birth Month Day Year 1955	Alleman 7 1957
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)
Residence Address Street or Ro R. City County State	Résidence Address Street or R. R. City County State
47 W. Calumbra Mantally The	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)	
Usual Occupation Muntinunce	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: 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? No Yes Yes	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 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? No ☐ Yes ☐ 4. Are you related to the groom closer than second cousin? No ☐ Yes ☐
8. Are you able to support a family? Yes No	4. Are you related to the groom closer than second cousin? 5. Are you now under the influence of intoxicating liquor? No Yes
9. Are you likely to so continue? Yes 10. Do you have minor children from one or more former marriages? No Yes 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 Withthe Walther T.
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Race of father Allutt
	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? Yes No	Residence of mother (if deceased so state)
11. Full name of father Murles Williams	Occupation of mother A MARINE Race of mother A Mile
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father flower facility and the Race of father had been a father for the father flower father flower father flower father flower	State of Indiana, 88: I depose and state the information given
Birthplace of father (State or foreign country)	County of
Residence of mother (if deceased so staty)	Signed Kachel a. Dr. hitaker
Occupation of mother Alaska Company Race of mother Alaska	New Address 236 3. Jufferson
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of day of
State of Indiana, County of HENDRICKS Section 1 depose and state the information given in this application is true and correct.	JUN DOLLARD CHER HENDRICKS Circuit Court
Signed Tay F. Clayk	
New Address 47 W. Columbia Sty Danville and	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of day of 19 l	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,
State of Indiana, County of HENDRICKS	County ofHENDRICKS
Signed Father	SignedFather
SignedMother	Signed Mother
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	RT. A marriage license having been refused to the above named parties, the
County Co	ourt by written order issued and filed
in authorizes and directs the issuance of	
Let a marriage lices	E AND MARRIAGE CERTIFICATE nse issued by the clerk of the HENDRICKS Circuit Court
Re it further remembered the following	and Rackel A. Whitaku
I, Norman L. Weaver	office, to-wit:
one thousand nine hundred and 76	hereby certify that on the 20th day of June
OI	HOS desiral
Games and the state of a marriage accesse assued for	that murnose by the Class of th
Dated this day of June 7	6
, 19	Signed Norman L. Weaver
Filed and recorded in accordance with the land	Official Designation Minister
Filed and recorded in accordance with the laws of the State of Indiana this	day of June , 19
	Signed Glen M. Harvelf Clerk
	HENDRICKS Circuit Court

No. 225

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

HENDRICKS County File 37	
MALE Medical Examination Report Dated 6-7-76	FEMALE Date of Application
Name of Physician Joseph C. Kerlin	Medical Examination Report Dated 6-7-76
	Name of Physician Joseph C. Kerlin
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 fellow
Name First Middle Last	FEMALE APPLICANT
Date of Birth Month Day Year	First Middle
Place of Birth (State of foreign country) 25 1953	Date of Birth Month Day Year
Andrew Street or R. R. City Indiana	Place of Birth (State or foreign country) 1957
818 W. Main Danville Ind.	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Nanvelle Ind.
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married V Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended Ry
Usual Occupation Truck Driver	Color or Page
Date of birth verified by: Birth Cert. Judicial Decree Jud. St. Bd. of	Color or Race White Negro Other (specify)
Other (Specify)	Date of birth verified by: Birth Cert. Judicial Decree
Of Unsound Mind? No E Yes Are you under guardianship as a person 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 asylum or home for indigent persons? No Yes Yes Yes	Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind?
4. Are you afflicted with a transmissible disease? No Yes 5. Are you related to the bride closer than second cousin? No Yes 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? 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 P 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 Vernon Heb
Name Age Address	Residence of father (if deceased so state) Including pulsa grade
	Occupation of father State or foreign country)
	8. Full maiden name of mother Lain Marie Jaylor
(c) Are you complying with any court order or orders issued for their support? Yes No Veryou complying with any court order or orders issued for their support? Yes No Veryou Complying with any court order or orders issued for their support?	R6 Bot 247 Residence of mother (if deceased so state) Danville, Ind
11. Full name of father John Juseph Lehr	Occupation of mother Sales Clerk Race of mother 2
8/8 W. Maife Residence of father (if deceased so state) Danville, Ind	Birthplace of mother (State or foreign country)
Occupation of father Truck Printer Race of father The	State of Indiana, I depose and state the information given in this application is true and correct.
Birthplace of father (State or foreign country) Shokana 12. Full maiden name of mother Satricia Lan Fareman	County of HENDRICKS ss: in this application is true and correct.
12. Full maiden name of mother Sadrusch fan Singmund 8/8 9% main Residence of mother (if deceased so state) Danville Ind.	Signed X VEUA X WEBP
Occupation of mother Sales Clerk Race of mother I	New Address 12 1 20% 33 Coalestill
Birthplace of mother (State or foreign country) Indiana	Subscribed and sworn to before me this day of gunl, 1976
State of Indiana, County of HENDRICKS as: I depose and state the information given in this application is true and correct.	Gireuit Court
Signed X John Ll II	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address RAB Box 33 COATEVILLE IND.	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 June 19.7%	signs, state facts which render the consent of the other parent unnecessary
CONSERVE OF DEPOSITE OF THE STREET CHERK 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, ss:
State of Indiana,	County of HENDRICKS Father
County ofHENDRICKS	Signed
Signed Father Signed Mother	Signedday of
Subscribed and sworn to before me this	Subscribed and sworn to before me thisday of
Clerk	
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. County	urt by written order issued
nauthorizes and directs the issuance o	f a marriage license w district the first transfer of the first tr
RETURN OF MARRIAGE LICENSE	as issued by the clerk of the
Be It Remembered, there was filed in my office a marriage licen of Indiana dated the day of the following marriage certificate was filed in my of the Howard Cupp	, 19.76, authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my o	hereby certify that on the 18th day of Hendricks
	at Hade of Indiana
and the hunarea and	of State of Indiana,
one thousand nine hundred and 76 State of Indiana, Groom John J. Lehr II and, Bride Verna G. Webb of the state of the stat	Hendi Land Hendricks Hendricks
State of Indiana, Groom	that purpose of the contract o
	Official Designation
Files	and day of
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Glen M. HENDRICKS Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No. 226

Health under Authority Chap. 126, Ind. Acts 1905 HENDRICK	S County Date of Application
	FEMALE 5/20/76
MALE Medical Examination Report Dated	Medical Examination Report Dated
en de Clark me	Name of Physician The Thurse Md.
	ement-Whoever procures the issuance of a license to marry by any false statement, representa-
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1900 pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	FEMALE APPLICANT
Name First Middle Last	Name Pamela J. Middle Caldwell Last
Date of Birth Month Day Year 949	Date of Birth Month October 33 1954
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) Marian Co. Ja.
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 1975 West	Previous Marital Status: Never Married Number of Previous Marriages
Consists)	Last Marriage Ended By: Death Divorce Annulment
R. t. ma	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert Judicial Decree	Usual Occupation Secretary
Other (Specify) Self Symbol H 2 2 2 6 7 8 1. Are you now or have you been adjudged, diagnosed or considered as: No 19 Yes 1	Date of birth verified by: Birth Cert. Judicial Decree
An Imbecile? Of Unsound Mind?	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county asylum or	An Imbecile? No Ves
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 3. Are you afflicted with a transmissible disease? No Yes 3.
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? No. Yes
8. Are you able to support a family? 9. Are you likely to so continue? Yes No T	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)	6. Are you now under the influence of a narcotic dryg? Not Yes
(a) List their full names, ages and addresses Name Age Address	7. Full name of father (if deceased so state)
Raymond P. Jane II 5 moresville DA	Occupation of father Cs - Brassatte Hage of father Willet
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother which have been been a supplied to the supplied
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state) Race of mother All All Race of mother
11. Full name of father (if deceased so state)	Occupation of mother State or foreign country)
Occupation of father Adaptation Race of father Adaptation	
Birthplace of father (State or foreign country)	State of Indiana. County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother	Signed Famela Q Caldwell
Occupation of mother A A Ballon Bace of mother A A Ballon Bace of mother A A Ballon Bace of Mother A Ballon Bace of Mother A Ballon Bace of Mother Ballon Bace of Mother Ballon Bace of Mother Ballon Bace of Mother Ballon	New Address 625 Semmons St.
Birthplace of mother (State or foreign country) Ally C.	Subscribed and sworn to before me this day of John 19
State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.	LUN M. MANNING CHER HENDRICKS Circuit Court
Signed Raymond F. Lane H	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address Subscribed and sworn to before me this / day of ALM 19.7%	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
The Manuage ClerkHENDRICKS 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 content of the other parent universally	
	State of Indiana,
State of Indiana, County of HENDRICKS	County of HENDRICKS Father
SignedFather	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
HENDRICKS County CO	ourt by written order issued and filed
in authorizes and directs the issuance of	of a marriage license to the above named parties.
RETURN OF MARRIAGE LICENS	E AND MARRIAGE CERTIFICATE
of Indiana dated the day of day of want	nse issued by the clerk of the HENDRICKS Circuit Court , 19.76, authorizing the joining together as husband and wife
1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	hereby certify that on the 19 day of June
one thousand nine hundred and	at ilainfield
John South and South South South	of Sentericks County State of Indianto
of O	Dendricks)
County. Dated this	that purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this 19 day of June, 19 7	6. Signed G. Kent allen
	Official Designation Minister
Filed and recorded in accordance with the laws of the State of Indiana this	23 day of June, 19 76.
	Signed Slen M. Tarvely Clerk
	HENDRICKS Circuit Court

STATE OF INDIANA

APPLICATION FOR MARK

Chap. 126, Ind. Acts 1905 HENDRICKS File.		
HENDRICK	County Quantity	
MALE Medical Examination Report Dated Quinc. 4, 1976	FEMALE Date of Application	
Name of Physician Victor J. Wollroth 7n.10.	Name of Physician Victor Vollents on 10	
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False stattion of pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	Coment W. W.	
MALE APPLICANT	ement—whoever procures the issuance of a license to marry by any false statement, representa-	
Name First . Middle Last	FEMALE APPLICANT	
Month Day	Name First A Middle a Last	
9 27 1957	Date of Birth Month Day Layrock	
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)	
Residence Address Street or R. R. City County State	Paridon Windianapolis) Ja	
Previous Marital Status: Never Married Number of Previous Marriages	7/1/2 County State	
	Maiden Name if Different CL XII Indeples	
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married W Number of Previous Marriages	
Color or Race White Negro Other (specify)	Last Marriage Ended By	
Usual Occupation Marcagu K Mart	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) #11.3-57-07 9968	Usual Occupation Sales 1	
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) # 6803	
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 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 ☐	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? 6. Are you now under the influence of intoxicating liquor? No Yes	2. Are you afflicted with a transmissible discount	
7. Are you now under the influence of a narcotic drug? No Yes	3. Are you afflicted with a transmissible disease? No A Yes 4. Are you related to the groom closer than second cousin? No Yes 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	6. Are you now under the influence of a narcotic drug? No S Yes	
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father & obest mason Layock	
Name Age Address	Residence of father (if deceased so state) Aams	
	Occupation of father Salesman Race of father	
	Birthplace of father (State or foreign country)	
A) A Section of the s	8. Full maiden name of mother Sheriley and Lane	
(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 deceased so state) R #1 Waldow Con.	
their support? 11. Pull name of father, William Klean Horn 12. Pull name of father, William Klean Horn	Occupation of mother JJW. Race of mother.	
Residence of father (if degreesed so state) Lame	Birthplace of mother (State or foreign country) Kentucky	
Occupation of father Too duray Especial Race of father		
Birthplace of father (State or foreign country)	State of Indiana, I depose and state the information given in this application is true and correct.	
12. Full maiden name of mother Rhelday Jinn Smith	County of	
Residence of mother (if deceased so state)	Signed Deworah Lynn Fayork	
Occupation of mother Jousewess Race of mother	New Address 36.19C D Stur Wrm TH	
Birthplace of mother (State or foreign country) — Indiana	Subscribed and sworn to before me thisday of	
State of Indiana, County of HENDRICKS I depose and state the information given in this application is true and correct.	Clerk HENDRICKS Circuit Court	
County of HENDRICKS in this application is true and corrects	THE RESERVE OF THE PERSON OF T	
Signed Aller Dyn Bd	CONSENT OF PARENTS, PARENT OR GUARDIAN	
New Address OG 7 19	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	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		
sate races which render the consent of the other passes	out of Indiana	
	State of Indiana, County of HENDRICKS	
State of Indiana,	SignedFather	
County ofHENDRICKS	Signed	
Signed Father Mother	Signed	
Signed	Subscribed and sworn to before me this	
Subscribed and sworn to before me thisday of		
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	A marriage license having been refused to the above named parties, the	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	and filed	
HENDRICKS County CO	our by witten	
in authorizes and directs the issuance of	MARRIAGE CERTIFICATE	
RETURN OF MARRIAGE LICENS	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court nse issued by the clerk of the , 19.7.6, authorizing the joining together as husband and wife	
Be It Remembered, there was filed in my office a marriage liver	19.7.6, authorizing the joining together as husband and	
RETURN OF MARRIAGE LICENCE RETURN OF MARRIAGE LICENCE Of Indiana dated the day of day of given	nd Debarah Lynn Bufor	
Clad am mill	Illoudy of The Land of	
Be it further remembered, the following marriage certificate was filed in my	hereby certify that on formand Country of Lendricks,	
one thousand nine hundred and State of Indiana, Groom Brian & Lawrence of	at Drull Miller State of Indiana	
assund nine hundred and	of State of Analana,	
and Bridge All the at the Laurock of	HENDRICKS	
one thousand nine hundred and State of Indiana, Groom Brian Lorn and, Bride Delarah Lynn Laytock of were by me united in marriage as authorized by a marriage license issued for County.	that purpose by the constant	
County, me united in marriage as authorized by	1 hash	
County. Dated this 19 day of June, 19 7	Signed mister	
	Official Designation June , 19 76.	
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Gless Marself Circuit Court	
and recorded in accordance with the laws of the	Signed	

STATE OF INDIANA

No	228
File	,

Chap. 126, Ind. Acts 1905	County Q - 14 - 76 Date of Application
	FEMALE (2 7)
MALE Medical Examination Report Dated 6-2-76	Medical Examination Report Dated 4-2-76
Name of Physician a. D. Soudder mil.	Name of Physician (k. 7) Scudder
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False str	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 Yast	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 N. R. City County State
4/29 Yendleton, and	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)	
Usual Occupation Soles Date of birth verified by: / Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)
DOther (Specify) Selective Service) #12-48-55-1110	Usual Occupation 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 □	Date of birth verified by: Birth Cert. Judicial Decree
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 If answer to 3 is "yes" has the cause of such condition been removed? No Yes	An Imbecile? Of Unsound Mind? No 2 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? 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 No 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
 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 Retired Race of father
	Birthplace of father (State or foreign country) Undiana)
(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 dellian, Closa Smith
their support? 11. Full name of father & Mnest W. White	Residence of mother (if deceased so state) dame Occupation of mother WWW Race of mother
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father. Co. Mag	
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother (ana Majine) Shotts Residence of mother (if deceased so state) Same	Signed & Susan Marie Trimble
Occupation of mother / Housewefe Race of mother	New Address. Same
Birthplace of mother (State or foreign country) Indianapolis &	Subscribed and sworn to before me this 14 day of June 1976
State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Glen M. Harry Clerk HENDRICKS Circuit Court
Signed Orman Lehile	
New Address 4129 Condition as andorses	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of June 1976 Lin M. January ClerkHENDRICKS Circuit Court	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,
State of Indiana,	County ofHENDRICKS
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
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
Col	urt by written order iggued
in authorizes and directs the issuance of	f a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSI Be It Remembered, there was filed in my office a marriage licen	E AND MARRIAGE CERTIFICATE se issued by the clerk of the HENDRICKS Circuit Court
of Indiana dated the day of fune	se issued by the clerk of the HENDRICKS Circuit Court , 19 2 c, authorizing the joining together as husband and wife
Be it further remembered, the following marriage parties.	nd
I. McCormick	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
one thousand nine hundred and 76	tereby certify that on the 19th day of Juen at Brownsburg , County of Hendricks ,
and Bride Susan Marie Trimble	of Brownshurg , County of Hendricks , of Madison County, State of Indiana Hendricks County, State of Indiana , that murrous but he Classical State of Indiana ,
were by me united in marriage as authorized 1	Hendricks County, State of Indiana
County.	have purpose by the Clerk of the Circuit Court of HENDRICKS
Dated this	76
	Signed V. C. McCormick Official Designation Minister
rued and recorded in accordance with the laws of the State of Indiana this	22nd June 76
	Official Designation Minister 22nd day of June ,19 76 Signed Alen M. Harrey Clerk

Form Present Present of Indiana State Board of Indiana State Board of Health under Authority Chap. 126, Ind. Acts 1905 APPLICATION FOR MARRIAGE LICENSE		
Health under Author 1905 Chap. 126, Ind. Acts 1905	MARRIAGE LICENSE	
HENDRICK	County File Rk37	
MALE	June 14, 1976	
Medical Examination Report Dated 6-7-76	FEMALE Date of Application	
Name of Physician Ellett	Medical Examination Report Dated 6-7-76	
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 of Physician Ellett	
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 many	
Middle Middle	The statement of the st	
Robert I Last	Name First a	
Date of Birth Month Day Year 26	Date of Birth Month	
Place of Birth (State or foreign country)	Day Year	
Residence Address Street or R. R. City County State	Ocal (State or foreign country)	
Manualle Henders Ind.	Residence Address Street of R. R. City County State	
Previous Marital Status: Never Married Number of Previous Marriages. 4	Maiden Name if Different Pullerralle Jenning III.	
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriage	
Color or Race White Negro Other (specify)	T. A. V. And T. A. V. A. V. And T. A. V. A. V. And T. A. V. A.	
Usual Occupation Farmer	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) Dr. June # \$315-34-6388	Usual Occupation Language 1 - Q T 1 1 A C	
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes	Date of birth verified by: Birth Cert. Dudicial Decree	
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? Yes \ \ \ Yes \ \ \ Yes \ \ \ \ Yes \ \ \ \ \ \ Yes \ \ \ \ \ \ \ Yes \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Other (Specify) Ne License # \$309201028	
3. Are you now or have you been within five (5) years an inmate of a county asylum or	An Imbecile? 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? 5. Are you related to the bride closer than second cousin? No Yes	2. Are you under quardianchin as a second of the second of	
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 Z Yes	
10. Do you have minor children from one or more former marriages? No V 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 Talle Think Sustin	
Name Age Audress	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 & aura may Duka	
(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) North Dunon Al	
their support? Yes No	Occupation of mother Austra Jone Race of mother W	
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country) Mean Pendleton, Sho	
Occupation of father Race of father	Direnpiace of mother (state of foleign country)	
Birthplace of father (State or foreign country) Sumans	State of Indiana, State of Indiana, State of Indiana, State of Indiana, State of Indiana, State of Indiana, State of Indiana, State of Indiana, Indiana, State of India	
12. Full maiden name of mother Mary Clar Hallett	County of HENDRICKS	
Residence of mother (if deceased so state) Deceased	Signed Jeola 13 Toyer	
Occupation of mother Race of mother Col	New Address R2. Bro 104 Damilla and	
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of 19.10	
State of Indiana, County of HENDRICKS Ss: I depose and state the information given in this application is true and correct.	Olen M Hawey Clerk HENDRICKS Circuit Court	
County of HENDRICKS Signed R Hould 7 mts. dre	CONTRACTOR DESCRIPTION OF THE PROPERTY OF THE	
New Address R 2 - Bax 14 Marrille Ind 46122	CONSENT OF PARENTS, PARENT OR GUARDIAN	
Subscribed and sworn to before me this. If day of Juny 19.76	We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
Alen M Lawey 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, ss:	
State of Last	County of HENDRICKS Father	
State of Indiana, County of	Signed	
Signed. Father	Signed	
SignedMother	Subscribed and sworn to before me thisday of	
Subscribed and sworn to before me thisday of	Clerk	
Clerk	having been refused to the above named parties, the	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR ———————————————————————————————————	T. A marriage license having been re-	
HENDRICKS County Co	urt by written order issued	
inauthorizes and directs the issuance o	f a marriage house	
RETURN OF MARRIAGE LICENS	se issued by the clerk of the hendricks Circuit Court not be in the hendricks and wife not be in the hendricks and wife her his beautiful to the his beautif	
Be It Remembered, there was filed in my office a marriage twen	, 19 76, authorizing the joining together as husbana and wife	
Illuland dated the	9. 10 7.1	
Be it further remembered the following marriage certificate was filed in my o	ffice, to-wit: 19th day of June	
I, C. Raymond Rissler	Danville County of Hendricks	
Be it further remembered, the following marriage certificate was filed in my of I, C. Raymond Rissler one thousand nine hundred and State of Indiana, Groom Robert Fritsche and Bridge II I I I I I I I I I I I I I I I I I	Hendricks County, State of Indiana	
State of Indiana, Groom Robert Fritsche	Jennings County, State of Indiana	
LOIA B. BYIQ	that murnose by the Clerk of	
were by me united in marriage as authorized by a marriage license issued for		
Dated this 19th June	Signeal Raymond Rissiel Baptist	
Filed and recorded in accordance with the laws of the State of Indiana this	6. SignedC. Raymond Rissler Baptist Minister Official Designation	
Dry .	Official Designation Juen , 19 7.6 22nd day of Juen Clerk Signed HENDRICKS Circuit Court	
rued and recorded in accordance with the laws of the State of Inauma thesame	Signed Glen M. Garveef Circuit Court	

STATE OF INDIANA

No	250	
	01.	27
File_	DR 3	1
(1 /	1/ 1971
->	Date of	Application

Health under Authority Chap. 126, Ind. Acts 1905 HENDRICK	S County Date of Application
	FEMALE
MALE Medical Examination Report Dated 6-8-76	Medical Examination Report Dated 6-8-76
Was Blanding E 110 D. Clark	Name of Physician Esic D. Clark
1005 progrihes "False stat	tement-Whoever procures the issuance of a license to marry by any false statement, represent
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribed in or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	FEMALE APPLICANT
MALE APPLICANT	Name First Middle Last
Name Girst Hiddle Lester &.	Date of Birth Month Day Year
Date of Birth Month Day Year	October 11 1958
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
RR#2 Box 53 Danville Hendricks Ind.	Maiden Name If Different
Previous Marital Status: Never Married Number of Previous Marriages	Devices Marital Status: Never Married P Number of Previous Marriages
ast Marriage Ended By: Death Divorce Annulment	Previous marital Status.
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
1 100	Color or Race White Negro Other (specify)
Date of birth verified by: Dirth Cert. Jydicial Decree	Usual Occupation Stylent - Marmalouses
Tother (Specify) Selective Sewice # 12-30-56-419	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 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?	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? No Yes Yes	2. Are you under guardianship as a person of unsound mind? No Ye
6. Are you now under the influence of intoxicating liquor?	3. Are you afflicted with a transmissible disease? No ✓ Ye 4. Are you related to the groom closer than second cousin? No ✓ Ye
8. Are you able to support a family?	4. Are you related to the groom closer than second cousin? 5. Are you now under the influence of intoxicating liquor? No Ye
9. Are you likely to so continue? Yes No No P Yes No P Yes	6. Are you now under the influence of a narcotic drug? / No VY
(If yes, answer questions a, b, c)	7. Full name of father Robert Roy Hunte
(a) List their full names, ages and addresses Name Age Address	Residence of father (if deceased so state) Danielle &
Name Age Address	Occupation of father Much Race of father W.
	Birthplace of father (State or foreign country) Alleges Sudiane
	8. Full maiden name of mother sure Elizabeth Williams
(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) Danville, J.J.
their support? Yes No	Occupation of mother Lauseungs g Race of mother W
11. Full name of father Assault Assaul	Birthplace of mother (State or foreign country) Scatt By Indiana
Occupation of father Lamung Race of father W	Dittiplace of motiles (coase of total)
Birthplace of father (State or foreign country)	State of Indiana, I depose and state the information ging this application is true and corr
12. Full maiden name of mother Mollis Bla Colleges	County of
Residence of mother (if deceased so state)	Signed Lorday La Bulling
Occupation of mother Musses Will Race of mother W.	New Address.
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this
State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Glen M Lawy Gerk HENDRICKS Circuit C
Sign X A D P	
New Add	
Subscribed and sworn to be	
Glen M Bla	the state of the section of the sect
CONSENT OF PARENTS, I, Robert R Hunte	, hereby give my consent for
We, the parents, of this ap	to
signs, state facts which ren my Daughten, lindy	of Hunter
marry paul Lester	
State of Indiana,	
County ofHENDRICKS.	Robert R. Venter
Signed	
Subscribed and sworn to	before me this 164 day of 600e 1976
Subscribed and sworn to befo	
	0) / 2
COMPLETE IF MAR My Commission Expires	
October 4, 1978	Notary Public
HENDRICKS October 4, 1978	Notary Public
HENDRICKS authorizes and directs the issuance of	Notary Public of a marriage ricense to the above named parties.
in authorizes and directs the issuance of RETURN OF MARRIAGE LICENS	Notary Public or a marriage neense to the above named parties. SE AND MARRIAGE CERTIFICATE
in	Notary Public or a marriage mense to the above named parties. SE AND MARRIAGE CERTIFICATE nse issued by the clerk of the HENDRICKS Circuit C
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage licer of Indiana dated the	Notary Public or a marriage neense to the above named parties. SE AND MARRIAGE CERTIFICATE nse issued by the clerk of the HENDRICKS Circuit C
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage licen of Indiana dated the 18 day of 1978 Be it further remembered, the following marriage certificate was filed in my	Notary Public of a marriage meanse to the above named parties. SE AND MARRIAGE CERTIFICATE nse issued by the clerk of the HENDRICKS Circuit Common, '19 76, authorizing the joining together as husband and confice to wit:
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage licen of Indiana dated the 18 day of 19	Notary Public or a marriage neense to the above named parties. SE AND MARRIAGE CERTIFICATE nse issued by the clerk of the HENDRICKS Circuit Common of the Marriage needs of t
RETURN OF MARRIAGE LICENS RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage licen of Indiana dated the 18 day of 18 Be it further remembered, the following marriage certificate was filed in my of 1, 18 Manyela 24 one thousand nine hundred and 24	Notary Public of a marriage mense to the above named parties. SE AND MARRIAGE CERTIFICATE nse issued by the clerk of the HENDRICKS Circuit Common, 19.76, authorizing the joining together as husband and and confice, to-wit: thereby certify that on the 7 day of July
RETURN OF MARRIAGE LICENS RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage licen of Indiana dated the day of da	Notary Public Of a marriage meanse to the above named parties. SE AND MARRIAGE CERTIFICATE Inse issued by the clerk of the HENDRICKS Circuit Common of the Authorizing the joining together as husband and and and confice, to-wit: Thereby certify that on the Today of July at Danwelle County of Hendricks.
RETURN OF MARRIAGE LICENS RETURN OF MARRIAGE LICENS Of Indiana dated the 18 day of 10 day of 1	Notary Public Of a marriage meanse to the above named parties. SE AND MARRIAGE CERTIFICATE Inse issued by the clerk of the HENDRICKS Circuit Common and Constant August August August Confice, to-wit: Thereby certify that on the Today of August County of August County of August County of August County of August County, State of August County State of August County State of August County August County State of August County August County State of August County August Count
RETURN OF MARRIAGE LICENS RETURN OF MARRIAGE LICENS Of Indiana dated the 18 day of 10 day of 1	Notary Public Of a marriage meanse to the above named parties. SE AND MARRIAGE CERTIFICATE Inse issued by the clerk of the HENDRICKS Circuit Common of the standard of the HENDRICKS Circuit Common office, to-wit: Thereby certify that on the Today of July at Annual Control of Hendricks of Hendricks County, State of Ind. Thendricks County, State of Ind.
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage licens of Indiana dated the	Notary Public Of a marriage meanse to the above named parties. SE AND MARRIAGE CERTIFICATE Inse issued by the clerk of the HENDRICKS Circuit Common distribution of the day of Sendrecks of Manual And Sendrecks County of Alexandricks of Manual County, State of Indian County
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage license of Indiana dated the	Notary Public Of a marriage meanse to the above named parties. SE AND MARRIAGE CERTIFICATE Inse issued by the clerk of the HENDRICKS Circuit County of July Advantage office, to-wit: Inhereby certify that on the 7 day of July at Annual County of Alexandricks of Mandricks County, State of Industrial County, State of Industrial County, State of Industrial County of Alexandricks County, State of Industrial County of Industria
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage license of Indiana dated the language of Language of the following marriage certificate was filed in my of the state of Indiana, Groom and Plansages Sester, Jr., and, Bride and Town of Languages Sester, Jr., and, Bride and Languages Sester, Jr., were by me united in marriage as authorized by a marriage license issued for County. Dated this 7 day of July, 19.71	Notary Public Of a marriage meanse to the above named parties. SE AND MARRIAGE CERTIFICATE Inse issued by the clerk of the HENDRICKS Circuit County of Australia and and and and and and and and and an
RETURN OF MARRIAGE LICENS RETURN OF MARRIAGE LICENS of Indiana dated the 18 day of day of the following marriage certificate was filed in my office a marriage licent of further remembered, the following marriage certificate was filed in my office a marriage in my office a marriage licent day of the following marriage certificate was filed in my office of Indiana, Groom would place feet further form and The State of Indiana, Groom would place feet further form and, Bride Lindly Law Huntle of the following marriage certificate was filed in my of the state of Indiana, Groom would place feet feet form of the state of Indiana, Groom would place feet feet feet feet feet feet feet fe	Notary Public Of a marriage meanse to the above named parties. SE AND MARRIAGE CERTIFICATE Inse issued by the clerk of the HENDRICKS Circuit Common of the standard of the Hendricks and the standard of the standard of the Hendricks of Standards of The Standards County of Alexandricks of The County, State of Indian Standards County, State of Indian Standards County, State of Indian that purpose by the Clerk of the Circuit Court of HENDRICKS Signed Jahn L. Maurer Official Designation of The Standards County of The Circuit Court of The Circuit Cour

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS County Date of Application Medical Examination Report Dated____ 6-11-76 FEMALE Name of Physician Eric D. Clark Medical Examination Report Dated_ Name of Physician Eric D. ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False statement—Whoever procures the issuance of a license to marry by any false statement, representa-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 (specify)... Last Marriage Ended By: Death Divorce Annulment dadorer Usual Occupation White Negro | Other | (specify)..... Date of birth verified by: Birth Cert. Judicial Degree Blesset South 1. Are you now or have you been adjudged, diagnosed or considered as the left and Imbecile? Date of birth verified by: Birth Cert. | Judicial Decree Ohis Suft. No D Yes D Of Unsound Mind? Heater # 2346 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? 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? 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 No Ves 6. Are you now under the influence of intoxicating liquor? Yes 🗌 3. Are you afflicted with a transmissible disease? No Yes 🗆 7. Are you now under the influence of a narcotic drug? 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 🗆 9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? No Yes No TO Yes T Of yes, answer questions a, b, c) (a) List their full names, ages and addresses Address Occupation of father July Handley Race of father (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 Nicholas Michael Occupation of mother Houseway Birthplace of mother (State or foreign country) Sillanvele Oli ss: I depose and state the information given in this application is true and correct. County of HENDRICKS Birthplace of father (State or foreign country). Signed Chinotine maire Lambardo New Address 733 Huli Blod age 3 Birthplace of mother (State or foreign country) Cleveland also. 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.. Clerk 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. Signed.. County of HENDRICKS Father Subscribed and sworn to before me this.....day of...... 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 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..... ..., 19,7 ..., authorizing the joining together as husband and wife and Christine marie Lambardo michael David Curtis of Indiana dated the ... Be it further remembered, the following marriage certificate was filed in my office, to-wit: Ser a schard zarl men hereby certify that on the 26 day of at Clainfield , County of Hendrick of Cuyanago County, State of Ohio and, Bride Christiene Lambardo of Hendricks Court of HENDRICKS Official Designation aman Catholis Greek Dated thisCircuit Court

HENDRICKS.

STATE OF INDIANA

Form Prescribed By Indiana State Board of Health under Authority Chap. 126, Ind. Acts 1905 HENDRICK	County Line 14, 1976
	Pate of Application FEMALE
MALE 6/14/76	Medical Examination Report Dated
Medical Examination Report Dated	Name of Physician Marien Cuthburt, Me.
Name of Physician Must BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state of the physician of the hundred dollars (\$500.00)".	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 live hands	FEMALE APPLICANT
MALE APPLICANT Name / First Middle Last	Name First Middle Last
Sand W. Melly Tyon	Date of Birth Month Day Year
Date of Birth Month Day 1937	Place of Birth (State or foreign country)
Place of Birth (State or toreign country) Brown	malanapalie marien sul
Residence Address Street or R. R. City County State Residence Address Street or R. R. City County	PR#1 By 292-4 Brownstry &
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 Ain Frace	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Argust atti
Gother (Specify) 4.8 Armed Fines	Date of birth verified by: Birth Cert. Jufficial Decree
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Of Unsequed Mind? No Yes No Yes	Other (Specify) # 6/33
2. Are you under guardianship as a person of unsound mind?	1. Are you now or have you been adjudged, diagnosed or considered as:
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? Yes	An Imbecile?
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 Yes	Of Unsound Mind? Now Yes 2. Are you under guardianship as a person of unsound mind? Now 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 Yes	3. Are you afflicted with a transmissible disease? No Ves
7. Are you now under the influence of a narcotic drug?	4. Are you related to the groom closer than second cousin? No Yes
8. Are you able to support a family? 9. Are you likely to so continue? Yes V No V	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 daug? Not Yes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father Blank Full Millian
Name Age Address	Residence of father (if deceased so state)
	Occupation of father file and the state of father for the state of father father for the state of father father for the state 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 and bloom and bl
their support? Yes No	Occupation of mother Application Bace of mother Alaska Bace of mot
11. Full name of father (if deceased so state) Bull No States	Birthplace of mother (State or foreign country)
Occupation of father Aplantin Race of father White	Birthplace of mother (State of Toreign Country)
Birthplace of father (State or foreign country)	State of Indiana, County of
12. Full maiden name of mother that Maye What	Bolesco Donestor
Residence of mother (if deceased so state)	Signed 1 1
Occupation of mother Race of mother Birthplace of mother (State or foreign country)	New Address Ten antany , 4x.
State of Indiana, I depose and state the information given	Subscribed and sworn to before me this day of Man, 19 C.
County of HENDRICKS ss: in this application is true and correct.	A SELAN STATE OF CHERK HENDRICKS Circuit Court
Signed Signed W. Sewoy	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 4 day of 4 day of 19	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Alla M. MAMM CIerkHENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR QUARDIAN	
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 Tallians
State of Indiana,	State of Indiana, County ofHENDRICKS
County of HENDRICKS ss:	Signed Father
Signed Father	
Signed	Signed Mother Subscribed and sworn to before me this day of , 19
Clerk	Clerk
HENDRICKS COUNTY	T. A marriage license having been refused to the above named parties, the
inauthorizes and directs the issuance of	urt by written order issued and filed
	E AND MARRIAGE CERTIFICATE se issued by the clerk of the HENDRICKS Circuit Court
of Indiana dated the	19 2 Guthomizing the initial together as hyphand and wife
of Indiana dated the day of Donald W. Newby II Be it further remembered, the following marriage certificate was filed in my of Rev. Lawrence, W. Newstrificate was filed in my of Rev. Lawrence, W. Newstrificate was filed in my of Rev. Lawrence, W. Newstrificate was filed in my of Rev. Lawrence, W. Newstrificate was filed in my of and and and and and and	ndRebecca J. Overton
i, Newans	
one thousand nine hundred and 76 State of Indiana, Groom Donald W. Newby II and, Bride Rebecca J. Overton	t Brown share 19th day of June
State of Indiana, Groom Donald W. Newby II	Hendricks County of Hendricks
and, Bride Rebecca J. Overton of were by me united in marriage as authorized by a marriage license issued for the	Hendricks 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 HENDRICKS
Dated this day of June 79	6
, 19	Signed Rev. Lawrence W. Newans
Filed and recorded in accordance with the laws of the	Minictor
the laws of the State of Indiana this	22md day of Tune 19 76
	Signed Men M Jarvelf Clerk
	HENDRICKS Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 37 HENDRICKS County 6-15-76 MALE Medical Examination Report Dated_ Date of Application 6-11-76 FEMALE Medical Examination Report Dated. Name of Physician_ Name of Physician_ Carl 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 M Number of Previous Marries 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 | White → Negro □ Other □ (specify) Date of birth verified by : Whith Cert. | Judicial Decree Av. Bd. of Health 113-53-100341 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 No Yes 🗆 Of Unsound Mind? 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 Yes 🗌 6. Are you now under the influence of intoxicating liquor? No P 3. Are you afflicted with a transmissible disease? Yes 🗌 No Yes | 1. Are you now under the influence of a narcotic drug? Yes 🗆 No D 4. Are you related to the groom closer than second cousin? No Yes Yes No No D 8. Are you able to support a family? 4 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 Of yes, answer questions a, b, e) Harold Floyd Mary hear (a) List their full names, ages and addresses 3041 Clover Pr. Residence of father (if deceased so state) Indianapalis, Ja. Address Name Occupation of father Maintenance Race of father 9 Birthplace of father (State or foreign country) Indeana 8. Full maiden name of mother Caral ann Mann (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 Claims Supresen Tales Birthplace of mother (State or foreign country) ... Indiana 69 n. Wayne Residence of father (it deceased so state) Danville Occupation of father Waltsman Birthplace of father (State or foreign country) Indiana County of HENDRICKS 12. Full maiden name of mother Carelian Residence of mother (1) deceased so state) Danville, In Occupation of mother ... Hauslevile Birthplace of mother (State or foreign country) ... Glen M. Harvey 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 Subscribed and sworn to before me this 15 signs, state facts which render the consent of the other parent unnecessary. Glin M. Harrely Gork HENDRICKS mother has custody 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. County of State of Indiana. County of HENDRICKS 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 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...... ., 19.26., authorizing the joining together as husband and wife any I marpheer of Indiana dated the hereby certify that on the 26 day of June Be it further remembered, the following magriage certificate was filed in my office, to-wit: at Indeanapales, County of Marian, State of Indiana, Groom Jalin Karl glamson of Hendricks County, State of Indiana.

and, Bridge. marghett of Gendricks County, State of Indiana, Dated this. Official Designation June , 19 7 6.

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Signed Lless

HENDRICKS.

.. Circuit Court

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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No. 234
File 6-15-76

...Circuit Court

HENDRICKS ...

Chap. 126, Ind. Acts 1905	HENDRICK	County Date of Appli	cation
		FEMALE / - / 7/	
MALE Medical Examination Report Dated 6-/- 76		Medical Examination Report Dated	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Name of Thysician	
A 4- 1005	prescribes "False states (\$500.00)".	ement—Whoever procures the issuance of a license to marry by any false states	nent, representa-
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1900 tion or pretense shall be fined in any sum not exceeding five hundred dolls MALE APPLICANT	118 (\$000.00)	FEMALE APPLICANT	
Name / First / Middle /	Last	Name Pirst Van Ben	nett
Date of Birth Monthy Day	Year	Date of Birth Month Day Y	954
Place of Birth (State or foreign country)	1976	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
538 anderly ave, apt. 3. 12 pours		Maiden Name if Different	
Previous Marital Status: Never Married Number of Previous Marria	ges	Previous Marital Status: Never Married Number of Previous Marriag	es
Last Marriage Ended By: Death Divorce Annulment		Last Marriage Ended By: Death Divorce Annulment	
Color or Race White Negro Other (specify)		Last Marriage Ended 27.	
Usual Occupation Carpenter		Color or Race White Negro Other (specify)	
Date of birth verified by: Birth Cert. Judicial Decree		Usual Occupation Muses aid	
Other (Specify)	No 🛛 Yes 🗆	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 No Yes	Other (Specify)	
 Are you now or have you been within five (5) years an inmate of a home for indigent persons? 	county asylum or No Yes	An Imbecile?	No Yes
If answer to 3 is "yes" has the cause of such condition been removed? 4. Are you afflicted with a transmissible disease?	No	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 🗆	Are you under guardianship as a person of unsound hime. Are you afflicted with a transmissible disease?	No Yes
 Are you now under the influence of intoxicating liquor? Are you now under the influence of a narcotic drug? 	No Yes 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 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?	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	
Name Age Addres	98	Occupation of father	
		Birthplace of father (State or foreign country)	ia
	Yes □ No □	8. Full maiden name of mother Barbara and Mu	and
(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)	Opio
11. Full name of father daward Francis Blaur)		Occupation of mother And Race of moth	er UM
Residence of father (if deceased so state) Manlewelle		Birthplace of mother (State or foreign country)	······································
Occupation of father	her WW	State of Indiana, I depose and state the in this application is	information given
Birthplace of father (State or foreign country) 12. Full maiden name of mother 12.	Short	County ofHENDRICKS in this application is	true and correct.
Residence of mother (if deceased so state) Mondayill	Jn.	Signed Selling L. Bennet	# = 7000
Occupation of mother Manuel Race of mot		New Address 338 Cnally Sul	3 Drown
Birthplace of mother (State or foreign country)		Subscribed and sworn to before me this day of day	
State of Indiana, County of HENDRICKS ss: I depose and state th in this application is	e information given s true and correct.	Alex M. Harvelf Clerk HENDRICKS	Circuit Court
Signed 7		CONSENT OF PARENTS, PARENT OR GUARDIAN	
New Address 338 ENDERLY AVE \$ 3 BROWN	,	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 ClerkHENDRICKS		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 unnecess	sary		
		State of Indiana,	
State of Indiana,		County ofHENDRICKS	
County of HENDRICKS ss:		Signed	Father
Signed		Signed	Mother
Subscribed and sworn to before me thisday of		Subscribed and sworn to before me thisday of	, 19
	Clerk		Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY	ORDER OF COU	RT. A marriage license having been refused to the above name	ned parties, the
		ourt by written order issued	
inauthorizes and d	irects the issuance	of a marriage license to the above named parties.	
		SE AND MARRIAGE CERTIFICATE	
		nse issued by the clerk of the HENDRICKS	
Edward Phillip Blair	June	nd Debora Jean Bennett	sband and wife
Be it further remembered, the following marriage certification of James A. Jones	te was filed in my	and Debora Jean Bennett	······
one thousand nine hundred and 76		hereby certify that on the 19th day of June Brownshure	drieke
		at Brownsburg , County of Hen of Hendricks County, State of	
and, Bride Debora Jean Bennett	of	Hendricks County, State of Indi	ana ana
were by me united in marriage as authorized by a marriag	e license issued for	that purpose by the Clerk of the Circuit Court of	KS
County. 19th June	10	76	
	, 19	Signed James A. Jones Official Designation Minister	
Filed and recorded in accordance with the		Official Designation Minister	76
the State	e of Indiana this	22nd June Signed Alex M Jarvelle	19

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS County MALE Medical Examination Report Dated Date of Application FEMALE 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 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 Color or Race Date of birth verified by: Birth Cert. Judicial Decree White Negro Other (specify)... Other (Specify) Selective assures care Usual Occupation Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Date of birth verified by: No Yes Birth Cert. Judicial Decree Of Unsound Mind? Yes 🗌 Other (Specify). 2. Are you under guardianship as a person of unsound mind? Yes 🗌 1. Are you now or have you been adjudged, diagnosed or considered as: 3. Are you now or have you been within five (5) years an inmate of a home for indigent persons? No Yes An Imbecile? If answer to 3 is "yes" has the cause of such condition been removed? No Yes No 🗆 Yes 🗌 Of Unsound Mind? 4. Are you afflicted with a transmissible disease? Yes 🗌 No Ø 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? No V Yes 🗌 Yes 🗆 6. Are you now under the influence of intoxicating liquor? No 🛮 Yes 🗌 3. Are you afflicted with a transmissible disease? 7. Are you now under the influence of a narcotic drug? No D Yes 🗌 4. Are you related to the groom closer than second cousin? 8. Are you able to support a family? No 🗆 Yes A No Yes 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 🗌 (If yes, answer questions a, b, c) (a) List their full names, ages and addresses edward ! Name Address Occupation of father Machinist Birthplace of father (State or foreign country) ... 8. Full maiden name of mother Maxima James Spiner (b) Are you supporting or contributing to their support? Yes 🗆 NoП (c) Are you complying with any court order or orders issue their support? Yes 🗆 No 🗆 Birthplace of mother (State or foreign country) Sudiana State of Indiana. Birthplace of father (State or foreign country) ... RR 4 BOX 303 1 lone Occupation of mother Birthplace of mother (State or foreign country) ... June , 19.76 State of Indiana, VVI. Harvey Clerk HENDRICKS CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one Subscribed and sworn to before me this signs, state facts which render the consent of the other parent unnecessary Alla M. Haraus Clerk 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, County of HENDRICKS 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, County Circuit Court by written order issued 3 day waiver Clark's Office 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..... , 19.76, authorizing the joining together as husband and wife of Indiana dated the ... Cendy Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the 19th day of day of atPlainfield , County of Hendricks, 1, H. Dean Wilsted State of Indiana, Groom Anthony Wayne Bailey of Marion County, State of Indiana and, Bride 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 76 Signed H. Dean Wilsted Dated this .. June ..day of .. Official Designation.....
22nd Clerk Filed and recorded in accordance with the laws of the State of Indiana this... .Circuit Court

STATE OF INDIANA

HENDRICKS County File		
MALE Medical Examination Report Dated 6-14-76	FEMALE Date of Application	
Name of Physician Price Clark M. D.	Medical Examination Report Dated 6-14-76	
	Name of Physician Price (Om to See	
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 First Middle	tement—Whoever program of the tement whoever program of the tement who the temperature who temperature who the temperature who the temperature who temperature who the temperature who temp	
MALE APPLICANT	procures the issuance of a license to marry by any false statement, representa-	
Name Anthony (1/2000) 13 lagt	FEMALE APPLICANT	
Date of Birth Month Day Year	Middle Middle	
Place of Birth (State or foreign country)	Date of Birth Month Day Year	
Residence Address A Street or R. R. City County	Place of Birth (State or foreign country) 1958	
3/23 Sligabeth St. Clermont In	Residence Address Street or R. R. City	
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different 157, Plainfield State	
Last Marriage Ended By: Death Divorce Annulment	P	
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages	
W .	Last Marriage Ended By: Death Divorce Annulment	
Usual Occupation Change Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)	
gother (Specify) Selective service card	Usual Occupation (specify)	
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?	Date of birth verified by: Birth Cert. Judicial Decree	
Of Unsound Mind? No Yes No Yes No Yes 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	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? No P Yes 2. Are you under guardianship as a person of property in the second of	
6. Are you now under the influence of intoxicating liquor? No 7 Yes	2. Are you under guardianship as a person of unsound mind? No Yes 3. Are you afflicted with a transmissible disease?	
7. Are you now under the influence of a narcotic drug? No Ves	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	
(0. 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 Laward formas Cole	
Name Age Address	Residence of father (if deceased so state) I launfield. In	
	Occupation of father Alachimist Race of father Wh	
	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 I agent famile Apender	
their support? Omno Refer t Barley	Residence of mother (if deceased so state) A hall refilled the	
Residence of father (if deceased so state) Cleamont	Occupation of mother. Race of mother. Race of mother.	
Occupation of father Painting Race of father Wh	Birthplace of mother (State or foreign country)	
Birthplace of father (State or foreign country) Indiana	State of Indiana, 88: I depose and state the information given in this application is true and correct.	
2. Full maiden name of mother Dorothea L. Warfield	County of HENDRICKS in this application is true and correct.	
Residence of mother (if deceased so state). Clermout. On	Signed and Society	
Occupation of mother / ONL Race of mother Wh	New Address RR 4 BOX 303 Brownship	
Birthplace of mother (State or foreign country) Sudiana	C. Accorded and sworn to before me this day of day of 19.76	
tate of Indiana.		
THE TANK OF THE PERSON NAMED IN COLUMN		
of 1 De		
ubscribed and sv I, Edward Cole	hereby give my consent for	
Alla dumite Cindu	& Cale to	
ONSENT OF P.	0 .0	
e, the parents. marry Anthony W.	Bailey.	
gns, state facts	09	
	Cayara Cou	
ate of Indiana,	11 11 10 7/	
Subscribed and sworn to before	e me this / parcay of horse 1979	
abscribed and aw	Sorella Truck fruck	
and aw	Notary Public	
	a marriage licelise having sten to	
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT		
HENDRICKS County Circuit County Count		
authorizes and directs the issuance of	AND MARRIAGE CERTIFICATE	
RETURN OF MARRIAGE LICENSE	e issued by the clerk of the HENDRICKS Circuit Court	
Be It Remembered, there was filed in my office a marriage ticens	, 19:76, authorizing the joining together as husbana and wife	
marana dated the day of	a Cendy suc	
oil and the file of the the the was filed in my of	fice, to-wit.	
H. Dean Wilsted	Plainfield County of Hendricks,	
H. Dean Wilsted the thousand nine hundred and 76 The control of	Marion County, State of Indiana	
tate of Indiana, Groom Anthony Wayne Bailey of Maride Cindy Sue Cole of Indiana, Groom Sue Cole of Ind	Hendricks County, State of Indiana,	
ate of Indiana, Groom Anthony Wayne Balley	hat purpose by the Clerk of the Circuit Court of	
me united in marriage as authorized by a marriage	76	
1946	or o	
day of	Signed H. Dean Wilsted Bishop Official Designation June ,19 76 22nd day of Clerk Signed Llen M. Harrelf Circuit Court	
	-1	
iled and recorded in accordance with the laws of the State of Indiana this	22nd day of Clerk	

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

County

Circuit Court

Chap. 126, Ind. Acts 1905 HENDRICKS Date of Application FEMALE Medical Examination Report Dated MALE 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)". Name of Physician MALE APPLICANT Name Day Date of Birth Place of Birth (State or country) ansing Residence, Address Previous Marital Status: Never Married | Number of Previous Marriages. Number of Previous Marriages Previous Marital Status: Never Married Death Divorce Annulment Last Marriage Ended By: Death Divorce Annulment Last Marriage Ended By: White Negro Other (specify)... Color or Race Other [(specify). Negro [Color or Race Usual Occupation Date of birth verified by: Birth Cert. | Judicial Decree Durlan & Usual Occupation Stateslice 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?
 No Yes Other (Specify) Jangung Yes 🗌 Yes 🗍 No D 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? No P Yes An Imbecile? county asylum or No Yes Are you now or have you been within five (5) years an inmate of a home for indigent persons? No Yes Of Unsound Mind? Yes 🗌 No 🗆 If answer to 3 is "yes" has the cause of such condition been removed? Are you under guardianship as a person of unsound mind? No P Yes No 📮 Yes 🗌 4. Are you afflicted with a transmissible disease? Yes 🗌 No 🗸 5. Are you related to the bride closer than second cousin? No Yes 3. Are you afflicted with a transmissible disease? No B Yes 🗌 6. Are you now under the influence of intoxicating liquor? 4. Are you related to the groom closer than second cousin? No Yes No V Yes 7. Are you now under the influence of a narcotic drug? No 🗌 Yes Z 5. Are you now under the influence of intoxicating liquor No Yes 8. Are you able to support a family? Yes No 9. Are you likely to so continue? 6. Are you now under the influence of a nargotic dr 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 Name Occupation of father ... Birthplace of father (State or foreign country) 8. Full maiden name of mother. (b) Are you supporting or contributing to their support? Yes 🗌 No 🗌 (c) Are you complying with any court order or orders issued for their support? Yes [No [Occupation of mother..... Birthplace of mother (State or foreign country) ... Residence of father (if deceased Occupation of father Harm State of Indiana, Birthplace of father (State or foreign country). County of HENDRICKS Occupation of mother Mouseur Birthplace of mother (State or foreign country). State of Indiana, I depose and state the information given in this application is true and correct. Clerk HENDRICKS 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 Glen M. Harvey ClerkHENDRICKS 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 ofHENDRICKS. State of Indiana. County of HENDRICKS Signed. Signed ...day of..... Subscribed and sworn to before me this...... Subscribed and sworn to before me this, 19...... COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the HENDRICKS 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 HENDRICKS Circuit Court of Indiana dated the day of July , 1976, authorizing the joining together as husband and wife thomas & traceford and salrices & Engelbrecht

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

1, John D. Weflen hereby certify that on the 3rd day of July one thousand nine hundred and 76 at Cambridge City, County of Hendricks,
State of Indiana, Groom Thomas & Crawford of Wayne County, State of Ind.
and, Bride Latricia & Engilbrecht of Hendricks County, State of Ind. were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court ofHENDRICKS....... July , 19 76. Dated this _____day of _____ Official Designation Minister Filed and recorded in accordance with the laws of the State of Indiana this............

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. Name of Physician Waved ALL QUESTIONS MUST BE ANSWERED. Chapter 126. Indiana Acts 1965 prescribes "False statement—Whoever procures the issuance of a license to marry by any false statement, representa-Name of Physician Waved FEMALE APPLICANT Middle Previous Marital Status: Never Married | Number of Previous Marriages. Death Divorce & Annulment Madison Last Marriage Ended By : Previous Marital Status: Never Married Number of Previous Marriages White Negro Other (specify)_ Last Marriage Ended By: Death Divorce Annulment White Negro Other (specify). Date of birth verified by . | Birth Cert. | Judicial Decree Aucharae - 376768 1. Are you now or have sent been afforded, distributed or considered as: Date of birth verified by: Birth Cert. | Judicial Decree Yes 🗌 Of Unsound Mind? # 46 55 Other (Specify) 2. Are you under guardianahip as a person of unsound mind? No 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? you afflicted with a transmissible disease? No Yes [Yes [2. Are you under guardianship as a person of unsound mind? I 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? No D 3. Are you afflicted with a transmissible disease? Yes [No Ta Yes 7. Are you now under the influence of a narcotle drug? No Z Yes 🗌 4. Are you related to the groom closer than second cousin? No 4 Yes 🗌 8. Are you able to support a family? Yes D No 🗆 9. Are you likely to so continue? 5. Are you now under the influence of intoxicating liquor? Yes D No 🗆 No Yes 14. Do you have minor children from one or more former marriages? No 🗆 Yes E No 🗗 Yes 🗆 (If yes, answer questions a, b, c) (a) List their full names, ages and address Address Age Occupation of father Seld Camplogla Race of father Birthplace of father (State or foreign country) Yund endleton in 8. Full maiden name of mother Matha Louella Yes No 🗆 (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). Hame Yes No 🗆 Birthplace of mother (State or foreign country). I depose and state the information given in this application is true and correct. Birthplace of father (State or foreign country) LUNG 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 Clerk HENDRICKS Circuit Court XUX 711 Larves 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 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 Court by written order issued... authorizes and directs the issuance of a marriage license to the above named parties. HENDRICKS County.... RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court Be It Remembered, there was filed in my office a marriage license issued by the clerk of the..... of Indiana dated the 25 day of Fila Louise Rund

Be it further remark there was filed in my office a marriage acceptance to the pointing together as husband and wife and Fila Louise Rund

The tagether remarks the pointing together as husband and wife and Fila Louise Rund hereby certify that on the 27th day of June Be it further remembered, the following marriage certificate was filed in my office, to-wit: at Salem Un. Meth. Ch. , County of Hendricks , State of Indiana, Groom Charles Leonard Hawhee of Hendricks County, State of Indiana

and, Bride Ella Louise Rund of Hendricks County, State of Indiana

And Charles Leonard Hawhee of Hendricks County, State of Indiana

And Bride County, State of Indiana Theron R. Castleman June 76 United Methodist Minister Signed..... Official Designation.... Dated this. 27th day of Signed Glen M. Harvelf Clerk Filed and recorded in accordance with the laws of the State of Indiana this

HENDRICKS.....

Form Prescribed By Indiana State Board of

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No.___238

Health under Authority Chap. 126, Ind. Acts 1905 HENDRICK:	SCounty
	Dute of application
MALE 6/16/76	FEMALE Medical Examination Report Dated
Medical Examination Report Dated	Name of Physician Baruca W. Loutt, Md.
Name of Physician L. Janky III),	A
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-
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1903 prectition or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	FEMALE AFFLICANT
Name O First Middle Russell Last	Name Jina Sue M- Cay
Date of Birth Month Day Year	Date of Birth Month Day Year 1955
Place of Birth (State of foreign country)	Place of Birth (State or foreign country)
St. francis Nosp City County State	Residence Address Street or R. R. J. City County State
Pla Box 635, Mather air Free Pas	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 Pin Force (4.8-	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Casher
Other (Specify)	Date of birth verified by: Sirth Cert. Judicial Decree
An Imbecile? Of Unsound Mind?	Other (Specify)
2. Are you under guardianship as a person of unsound mind? No 1 1es 1	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes
3. Are you now or have you been within live (3) years an inneces to No Ves No V	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 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 Ves
9. Are you likely to so continue?	5. Are you now under the influence of intoxicating liquor? No 2 Yes No 2 Y
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 Wilt The Calif
(a) List their full names, ages and addresses	Residence of father (if deceased so state) Ballundlung In.
Name Age Address	Occupation of father Race of father White
	Birthplace of father (State or foreign country)
V-D N-D	8. Full maiden name of mother Mavies Will support
(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 Richard Edward Lossman	Occupation of mother Almana Race of mother What
Residence of father (if deceased so state) Supplemental and in the state of the	Birthplace of mother (State or foreign country)
Occupation of father MCTALLE Race of father Malle	State of Indiana, l depose 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 multiplicate of the control of the	Signed Time Sue Mc Cay
Residence of mother (if deceased so state) Occupation of mother Race of mother Race of mother	New Address Sacramento CA
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of June 1976
State of Indiana, I depose and state the information given	Illa M. Darmes Clerk HEMDRICKS Circuit Court
County of HENDRICKS signed Government of the and correct.	- State of the sta
New Address Sacramento California	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
Jun Me Markey ClerkHENDRICKS 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 ofHENDRICKS
County of HENDRICKS.	Signed Father
Signed Father Signed Mother	SignedMother
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of
	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	The second parties the
	RT. A marriage license having been refused to the above named parties, the ourt by written order issuedand filed
inauthorizes and directs the issuance	of a marriage license to the above named parties.
	SE AND MARRIAGE CERTIFICATE
We It Remembered, there was filed in my office a marriage lice	nse issued by the clerk of the HENDRICKS Circuit Court
of Indiana dated the 22 mg day of June	, 19.76., authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my	Man Man Man
1, Clefford & Carmichael	hereby certify that on the 26 day of June
one thousand nine hundred and	at Banceral and a Header Ray
State of Indiana, Groom Subert Mechael Joseman	of Vendricks Country State of Indiana
ana, Briae of 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 ofHENDRICKS
Dated this 22 nd day of June, 197	6. 0000 000 . 10
	Signed Clifford L. Carmichael Official Designation Minister
	Official Designation [Managed]

Filed and recorded in accordance with the laws of the State of Indiana this 2 nd day of July ,1976...

Signed Llen M. Narvelf

......HENDRICKS.....

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. Name of Physician M. O. 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 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). Last Marriage Ended By: Death Divorce Annulment actory Usual Occupation White Negro Other (specify)... Date of birth verified by : Birth Gert. Judicial Decree Other (Specify) # 2111 Usual Occupation Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile? Date of birth verified by: Birth Cert. _ Judicial Decree Yes 🗆 Of Unsound Mind? Witham Memorial 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 home for indigent persons? Yes 🗌 1. Are you now or have you been adjudged, diagnosed or considered as: No Yes An Imbecile? No Ves 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? 5. Are you related to the bride closer than second cousin? No Yes No 🗹 Yes 🗆 6. Are you now under the influence of intoxicating liquor? Yes 🗌 3. Are you afflicted with a transmissible disease? No Ves 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 🗆 9. Are you likely to so continue? No Yes Yes No 🗆 10. Do you have minor children from one or more former marriages? No Yes (If yes, answer questions a, b, c) (a) List their full names, ages and addresses Residence of father (if deceased so state) Name Address Occupation of father The fords Jaun Kate for father Birthplace of father (State or foreign country), Kentu 8. Full maiden name of mother Hoberta Yes 🗌 No 🗆 (b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for Yes No No Occupation of mother Housewell 11. Full name of father Daymond, Gas youman) Birthplace of father (State or foreign country) Indiana polis County of HENDRICKS 12. Full maiden name of mother Thomas Occupation of mother Housewife Clerk 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. Clerk HENDRICKS 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, County of HENDRICKS Father Subscribed and sworn to before me this..... COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the 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 license issued by the clerk of the HENDRICKS Circuit Court 24 day of Connie L. Cook hereby certify that on the 26th day of June Be it further remembered, the following marriage certificate was filed in my office, to-wit: at Indianapolis , County of Marion , State of Indiana, Groom Michael W. Herring 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 County. Minister June Dated this. Official Designation..... Filed and recorded in accordance with the laws of the State of Indiana thisCircuit Court Form Prescribed By Indiana State Board of

STATE OF INDIANA

APPLICATION F

OR MARRIAGE LICENSE	File
NDRICKS County	June 18, 1970 Date of Application

Health under Authority Chap. 126, Ind. Acts 1905 HENDRICK	County June 18, 1976 Date of Application
	FEMALE / / / / / / / / / / / / / / / / / / /
MALE Medical Examination Report Dated 6/7/76	Medical Examination Report Dated
Name of Physician Elmer L. Rack, Mil-	Name of Physician Carl J. Munlein Md.
The state of the s	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 fiducial	FEMALE APPLICANT
Name / First Middle Last	Name / First, Middle Last
Danny Narnell Williams	Date of Birth Month Day Year
Date of Birth Month Day 19954	Place of Birth (State or foreign, country)
Place of Birth (State or fopeign country)	Indianapales Marion Ind.
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
Dast Marriage Bluck by.	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	
Usual Occupation	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert.	Usual Occupation fill Clark
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes	Date of birth verified by: Birth Cert. Dudicial Decree
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 asylum or home for indigent persons?	An Imbecile? No Ves 🗆
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 Yes
8. Are you able to support a family?	4. Are you related to the groom closer than second cousin? 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 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 California file Temmerman
Name Age Address	Residence of father (if deceased so state) / Allah, Wisc
	Occupation of father Addition Race of father Addition
	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? Yes No	Residence of mother (if deceased so state)
11. Full name of father	Occupation of mother
Residence of father (if deceased so state) Occupation of father Mllwught Race of father Mult	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country)	State of Indiana, I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Mange Andresson	County of HENDRICKS In this application is true and correct.
Residence of mother (if deceased so state)	Signed (atolyn Jummuman)
Occupation of mother Allele Rage of mother Allele	New Address dollar /della Estella, Indola.
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this
County of HENDRICKS ss: I depose and state the information given this application is true and correct.	Jun Da Dansky Gerk HENDRICKS Circuit Court
Signed Lanny Starnell Williams	CONCENT OF PARISHES PARISHES DATE.
New Address Mest Huld estates of Indiangely	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of SUR 19/0. Subscribed and sworn to before me this day of ClerkHENDRICKS Circuit Court	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	State of Indiana, County ofHENDRICKS
State of Indiana, County of	
Signed Father	Signed Father
Signed	SignedMother
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	T. A marriage license having been refused to the above named parties, the
County Co	ourt by written order issued
inauthorizes and directs the issuance o	
RETURN OF MARRIAGE LICENS	E AND MARRIAGE CERTIFICATE
of Indiana dated the day of	use issued by the clerk of the HENDRICKS Circuit Court
Danny Darnell Welliams	nd Carolyn Zimelland
Be it further remembered, the following marriage certificate was filed in my o	ffice, to-wit:
	homobal and if 11 1 11
State of Indiana, Groom Danney Darnell Zuillians	at Hansville , County of Hendricks ,
of V	NINDADIC BA
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
County. Dated this 3rd day of July , 1976	HENDRICKS
19.76	Signed James E. Janahas
	Official Designation Ministry
Filed and recorded in accordance with the laws of the State of Indiana this	8 day of July 1976
	Signed Alen M. Karweef Clerk
	HENDRICKS Circuit Court

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICH	County
MALE Medical Examination Report Dated 6-12-76	FEMALE Date of Application
Name of Physician Eric D. Clark	Medical Examination Report Dated 6-12-71
Maine	12/0
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False station of pretense shall be fined in any sum not exceeding five hundred della reserve the state of the st	tement W.
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, represents
Name First Middle Last	FEMALE APPLICANT
Date of Birth Month Day Year	First Middle
Place of Birth (State or foreign country)	Date of Birth Month Day Slunkett
Indianascoles 1	Place of Birth (State or foreign country) 1958
Residence Address Street or R. R. City County State 303 Green St. Glainfield And	Residence Address Street or R. R. City Condiana
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Clainfield State
Last Marriage Ended By: Death Divorce Annulment	A STATE OF THE STA
	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 Clectricean	Golor or Race White The Name
Date of birth verified by: Birth Cert. Judicial Decree Div. of Sublic Heal	Usual Occupation 7
Other (Specify) 99.23 1. Are you now or have you been adjudged, diagnosed or considered as:	anem played
An Imbecile? Of Unsound Mind? No Z Yes	Date of birth verified by: Birth Cert. Judicial Decree Div. of Decree Di
2. Are you now or have you been within five (5) years an inmate of a county coulty	1. Are you now or have you been adjudged, diagnosed or considered as:
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 P 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 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	
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 intoxicating liquor? No Yes 7
(a) List their full names, ages and addresses	7. Full name of father William & Clunkett
Name Age Address	Residence of father (if deceased so state) alasmifulds In
	Occupation of father Bels Brever Race of father 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 Mary J. Thinky
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state) Sull land, 1990
11. Full name of father ack a Harren Hutchesan	Occupation of mother Secretal Race of mother The
Residence of father (if deceased so state) Treenword Ind	Birthplace of mother (State or foreign country)
Occupation of father Machinist Race of father	State of Indiana, I depose and state the information given
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS Ss: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother to the little ways a distribution of the little ways and the little ways and the little ways and the little ways are the little ways ar	Signed X Elizabeth Francett
Occupation of mother Insurance legent Race of mother.	New Address 303 Stran St Panguld and
Birthplace of mother (State or foreign country) Indiana	Subscribed and sworn to before me this
	Glen M. Harvey Clerk HENDRICKS Circuit Court
State of Indiana, County of HENDRICKS ss: Vdepose and state the information given in this application is true and correct.	- Della - Dell
Signed & Chus Oulchigan	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 505 (50lm 5) Wangued 71	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 SUNE 1972. Slen M. Jarry & Jerk HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
	Sather has ustoly
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 ofHENDRICKS
State of Indiana,	SignedFather
County of HENDRICKS Father	Signed
Mother	day of June 1976
Signed	Subscribed and sworn to better in Henry Marwey Clerk
Clerk	建物型的工作的特别的工作。
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 Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT COMPLETE ISSUED BY ORDER OF COURT COURT BY ORDER OF COURT COURT BY ORDER OF COURT COURT BY ORDER OF COUR	urt by written order issued.
HENDRICKS County	f a marriage license to the above named parties.
authorizes and discourse and d	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
RETURN OF MARRIAGE LICENSIA Be It Remembered, there was filed in my office a marriage licen of Indiana dated the day of day of Be it further remembered, the following marriage certificate was filed in my of the second of th	se issued by the clerk of the the joining together as husband and wife
of Indiana dated the 2311 day of	Plunketh
aurea ine all the to leave	nd. G. W. June
Be it further remembered, the following marriage certificate was filed in my o	hereby certify that on the ZOLII day of Hendricks
I, Norman L Weaver	Danville , County State of Indiana
Be it further remembered, the following marriage certificate was filed in my of thousand nine hundred and the state of Indiana, Groom Chris W. Hutcheson and, Bride Elizabeth K. Plunkett	of Hendricks County, State of Indiana
State of Indiana, Groom	Hendi ICKS
und, Bride Elizabeth K. Fluite issued for	that purpose by the Clerk of the Circuit States
were by me united in a marriage with a marriage with a marriage	THE COURSE OF THE PARTY OF THE
Detail line, 10	Signed Minciter
	Official DesignationJune ,19 // O
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation June , 19 28th day of Jarvey Clerk Signed Llen M Flarvey Circuit Court
and recorded in accordance with the laws of the	SignedCircuit Court

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

File 34

MALE		
Medical Examination Report Dated 6-12-76 Name of Physician Eric D. Clark	FEMALE Medical Examination Report Dated Date of Application	A 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	atement—Whoever procures the issuance of a license to marry by any false statement	
Name Christ Middle W. + Last	Name Finest PLICANT	1111
Date of Birth Quality 29 Year 1956	Date of Birth Month Last Clen & Hast	
Place of Birth (State or torign country) Indianagralis Street or R. R. City	Place of Birth (State or foreign country) Day Year 17 1958	
Residence Address Streen, St. City County State 303 Green, St. Glainfield, Ind.	Residence Address Street or R. R. City County State	
Previous Marital Status: Never Married Number of Previous Marriages.	Maiden Name if Different Slainfield Su.	
Last Marriage Ended By: Death Divorce Annulment 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: Birth Cert. Judicial Decree Div. of Cublic Heat		
Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?	Date of birth verified by: Brith Cert. Dudicial Decree Div. of Public	
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes Yes	Other (Specify) Health 80-2682	
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? 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 No Yes No Yes No Yes No Yes No Pyes	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 P 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□	
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 William & Sun Alth 1717 Hawthorne Residence of father (if deceased so state) Mainfully, In	
	B Drisser, Race of father 91	
	hy-	<i> </i>
	maryland	Aut
	other	
Mi Sell Wit		
1, Dellaria Lunden	hereby give my consent for the information given is true and correct.	
my daughter , Elizabeth Kathleen Pl	unkett to) wild and	
marry Chris Warren Hutcheson	1976.	
	M - EM 69	
a	Illiam Eflunkett	
Subscribed and sworn to before me this 7th day	of June 19 76 e. If only one parent	
	essary	
	Chin & Syrus	
	Notary Public	12
My commission expires 8-12-78		
	Father	
	Mother	
	une 19.76	30//
\$10.700 - 5.500 (State of State of Stat	named parties, the	XIA
	named parties, the	1
		1
	Circuit Court	
The same of the same	, 19./6., authorizing the joining cogenic, as husband and wife	
of Indiana dated the 2314 day of Be it further remembered, the following marriage certificate was filed in my of I, Norman L. Weaver	and Elizabeth A Philarketh June	
Be it further remembered the following marriage certificate was full	Hendricks	
I, Norman L Weaver one thousand nine hundred and 76 State of Indiana, Groom Chris W. Hutcheson and, Bride Elizabeth K. Plunkett were by many indianal desired by a marriage license issued for	at Hendricks County, State of Indiana	
State of Indiana, Groom Chris W. Hutcheson	Hendricks County, State of HENDRICKS	X4
of the united an manning of the mithorized of the	2 LIACITAY	
Data i i i i i i i i i i i i i i i i i i	Signed	
	29th Janes Glank	
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation 28th day of June Clerk Signed HENDRICKS Circuit Court	

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No	242
File_	
	6-18-76

Chap. 126, Ind. Acts 1905	CKS County Date of Application
	FEMALE
MALE Medical Examination Report Dated 6-14-76	Medical Examination Report Dated (0-14-76
Name of Physician Lloyd Jerry	Name of Physician J. May Derry
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
MALE APPLICANT	FEMALE APPLICANT
Name First Middle Last	Name 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
200 South Main Hoth Halem	Maiden Name if Different A Jotth Salem In,
Previous Marital Status: Never Married Number of Previous Marriages	(arr)
Last Marriage Ended By: Death Divorce Annulment 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 Divorce
Usual Occupation Steam Litter	Color or Race White Negro Other (specify)
Date of birth verified by: A Sirth Cert. Undicial Decree	Usual Occupation Jrano.
Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes	Date of birth verified by: Birth Cept. Judicial Decree
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? Yes Yes Yes	Other (Specify) Ollas Reg., 13176
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? No Yes
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind? No A Yes
4. Are you afflicted with a transmissible disease? No ✓ Yes ☐ S. 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? 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	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 Yaul . Cost
Brinda Hay Comes 15" Address	Residence of father (if deceased so state) Alcelased
Roger Gracy Come 12 Perd.	Occupation of father Race of father Race of father
	8. Full maiden name of mother. (State or foreign country). Pauline Marle.
(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 Ves No	Residence of mother (if deceased so state) Alclased
11. Full name of father Skiller James Thes	Occupation of mother Race of mother
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country) Deblesvelle In.
Occupation of father	
Birthplace of father (State or foreign country) 12. Full maiden name of mother.	State of Indiana, County of HENDRICKS I depose and state the information given in this application is true and correct.
Residence of mother (if degeased so state)	Signed Ludrey June marter
Occupation of mother Ketired Race of mother	New Address B. # 1 Box 121 North Selection &
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this. I ap of June 1976.
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Glen M. Harvey Glerk HENDRICKS Circuit Court
Signed Coge Del Jones	J CHELL COULT
New Address & # 1 12 04 121 grath Jalen	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this. S day of Anne, 1974	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
ClerkHENDRICKS Circuit Court 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,	State of Indiana, County of
County of HENDRICKS 88:	
Signed Father	SignedFather
Signed	Signed
Clerk	Clark
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COMPLETE	UELA
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County C	
in authorizes and directs the issuance of	a marriage license to the chore por d
RETURN OF MADDIAGE ANGELS	
of Indiana dated the 24 day of June	, 19.76, authorizing the joining together as husband and wife
which temembered, the following marriage and is	a
one thousand nine hundred and 76	ereby certify that on the 2 nd day of Jelle
State of Indiana Groom	with the Misleton by County of New dry & Raling
and, Bride What relife June man time	County, State of Indiana
were by me united in marriage as authorized by a marriage license issued for the	hat purpose by the Clork of the Circle of the Clork of the Circle of the
Dated this 2 med day of July , 1976	
	Signed. Octobe (Alphy 1) () [Alphy
Filed and recorded in accordance with the laws of the	ficial Designation Castary - Cueenselar
of Indiana this	day of
	Signed Them III Clerk
	HENDRICKS Court

HENDRICKS Circuit Court

STATE OF INDIANA

Health under Authority Chap. 126, Ind. Acts 1905 HENDRICK	rile_	
MALE	County 6-18-76	
Medical Examination Report Dated 6-76-76	FEMALE Medical Examination Report Dated 6-16-76	
Name of Physician Alen Daker M. D.	W ₁ =	
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	tement—Whoever procures the issuance of the	
Sarch Mac Donald Timm	Name First Middle	
Date of Birth Day Month Day Year	Date of Birth Rayra Rathryn Barrey	
Place of Birth (State or tokeign country)	Place of Birth (State or foreign country) Day Year 1957	
Residence Address Street or R. R. City County State	Residence Address Street or R. R. Shows An	
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different County State	
Last Marriage Ended By: Death Divorce Annulment	The state of the s	
	Previous Marital Status: Never Married Number of Previous Marriages	
000 01 1100	Last Marriage Ended By: Death Divorce Annulment	
Usual Occupation Date of birth verified by: Birth Cert. Judicial Degree	Color or Race White Negro Other (specify)	
Other (Specify) Selective Servece Card	Usual Occupation Sales Make	
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes	Date of birth verified by: Birth Cert. Judicial Decree	
Of Unsound Mind? No Yes 2. Are you under guardianship as a person of unsound mind? No Yes	Other (Specify)	
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? Yes	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? 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 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	4. Are you related to the groom closer than second cousin? 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 Wes	
(a) List their full names, ages and addresses	7. Full name of father Almus W. Blance	
Name Age Address	Residence of father (if deceased so state) Worthungton, In	
	Occupation of father Assistance Race of father (State or foreign country) Kansas	
	8. Full maiden name of mother Alberta L. Mysso	
(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) Worthington	
11. Full name of father Story Ria Jimmerman	Occupation of mother. Race of mother wh	
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)	
Occupation of father Self employed Race of father we	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.	
Residence of mother (if deceased so state) A writing the	Signed Dayna L. Berrey	
Occupation of mother Males Race of mother Wh	New Address 12 William Dr. Hot. D	
Birthplace of mother (State or foreign country) Ollinsia	Subscribed and sworn to before me this day of 19	
State of Indiana. County of HENDRICKS Sas: I depose and state the information given in this application is true and correct.	Glex M. Plasury Clerk HENDRICKS Circuit Court	
Signed Tath Timosamora	CONSENT OF PARENTS, PARENT OR GUARDIAN	
New Address 121 Apr B. William Dr. Brownburg 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 June 19/1.	signs, state facts which render the consent of the other parent unnecessary	
Dlen M. Harry 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, ss:	
	County of HENDRICKS Father	
State of Indiana, County of	Signed	
Signed	Signed	
Signed Mother	Subscribed and sworn to before me thisday ofday	
Subscribed and sworn to before me thisday ofClerk		
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	or A marriage license having been refused to the above named parties, the	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	ourt by written order issued	
HENDRICKS County	of a marriage license to the above named partial	
authorizes and discourse	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court	
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage licen of Indiana dated the 23 day, of day, of the marriage licens	nse issued by the clerk of the management of the state of	
of Indiana dated the 23 day, of June Be it further remembered, the following marriage certificate was filed in my of I, Gary C. Black	office, to-wit: June June	
Be it further remembered, the following marriage certificate was filed in my of I, Gary C. Black one thousand size by the last 76	hereby certify that on the	
one thousand nine had all 76	. Hendricks County, State of Hndlana Indiana	
and the nundred and	of Chata of decisions	
Be it further remembered, the following marriage certificate was filed in my office, to-wit. I, Gary C. Black one thousand nine hundred and. State of Indiana, Groom Garth MacDonald Timmerman of Hendricks and, Bride Dayna Katherine Berry of Warion Hendricks County, State of Indiana All Hendricks County, State of Indiana Hendricks County, State of Indiana All Hendricks All Hendricks All Hendricks County, State of Indiana Hendricks County, State of Indiana Hendricks County, State of Indiana Hendricks All Hendricks All Hendricks County, State of Indiana Hendricks County, State of Indiana		
were by me united in marriage as authorized by a marriage license issued for	Signed Gary C. Black Minister	
7 7 4 1		
ady of	Official Designation	
Filed and	Official Designation 29th day of Signed HENDRICKS Circuit Court	
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Hendricks Circuit Court	

	PANANA	No. 244
	FINDIANA MARRIAGE LICENSE	
Health under Authority		File June 21 1976
Chap. 126, Ind. Acts 1905	KSCounty	Date of Application
	FEMALE	6/15/7/
MALE Medical Examination Report Dated	Medical Examination Report Dated	2m /1/2/1
Name of Physician Riger Fossum Md.	Name of Physician Andrews	M. Walker, MI.
Acta 1905 prescribes "False sta	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 live hands	FEMALE A	
MALE APPLICANT Name First Middle // Lagt	Name First G	Middle Last
Victor R. Jorgan	Date of Birth Month	Day Year
September 18 1949	Place of Birth (State of) foreign country)	5 1951
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	8. 8. 2 BOX 178 D.	Braunsburg 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	lumber of Previous Marriages
Date Marriage Date Dy	Last Marriage Ended By: Death Di	vorce Annulment
Color or Race White Negro Other (specify)		
Usual Occupation Physician	Color or Race White Negro O	ther (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Studiest	
1. Are you now or have you been adjudged, dragnosed or considered as: An Imbecile? No Yes	Date of birth verified by: Birth Cert. Ju	
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes Yes Yes		71-0363693
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, diag An Imbecile?	nosed or considered as: No ❷ Yes □
home for indigent persons? If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind?	No. 2 Yes
4. Are you afflicted with a transmissible disease? No ☐ Yes ☐	2. Are you under guardianship as a person of	
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 7	3. Are you afflicted with a transmissible disease	e? No. Yes
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 se	cond 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 intoxics	
0. 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 narco	tic drug? No Yes
(a) List their full names, ages and addresses	7. Full name of father Muna	B
Name Age Address	Residence of father (if deceased so state)	La hit
	Occupation of father (State or foreign county)	Race of father White
	Birthplace of father (State or foreign count	A. Chenton
(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 A. A. A.	Ballen State of S
their support? Carl Ulrana Jalan No	Residence of mother (if deceased so state).	Jack Market William &
11. Full name of father.	Occupation of mother all talks	Race of mother White
Residence of father (if deceased so state)	Birthplace of mother (State or foreign count	TY) Delle gla
Occupation of father Race of father Race 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.
Residence of mother (if deceased so state)	Signed That	E. nec
Occupation of mother Race of mother 4/44	New Address 404 BU	reside; Muncie 11.47
Birthplace of mother (State or foreign country) Musich Suna	Subscribed and sworn to before me this	day of Jacob 1876.
State of Indiana, Satisfy of HENDRICKS Satisfy of HENDRICKS Satisfy of HENDRICKS Satisfy of HENDRICKS	Ill m Henry	
This of loser	John John John John Wary	Clerk HEMORICKS Circuit Court
New Address 404 Riverside Munice Tu 42303	CONSENT OF PARENTS, PARENT OR GUAR	DIAN .
Subscribed and sworn to before me this 2/ day of January 1976	We, the parents, of this applicant hereby give c	onsent for this marriage. If only one parent
Glen M. Warney ClerkHENDRICKS Circuit Court	signs, state facts which render the consent of t	
CONSENT OF PARENTS, PARENT OR GUARDIAN	The state of the s	re other parent unnecessary
We, the parents, of this applicant hereby give consent for this marriage. If only one parent		
igns, state facts which render the consent of the other parent unnecessary		

	State of Indiana,	
tate of Indiana,	County ofHENDRICKS	
Signed Father	Signed	Father
Signed Father Signed Mother	Signed	Mother
ubscribed and sworn to before me this	Subscribed and sworn to before me this	day of 19
Clerk		
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER		
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County	T. A marriage license having been refuse	ed to the above named parties, the
HENDRICKS County Co authorizes and directs the issuance o	of a marriage lives and	and filed
		rties.
2 2 2 continuente, there was filed in my office a marriage licen	E AND MARRIAGE CERTIFICATE	BICKE
f Indiana dated the 25 day of June	to the cierk of the MEND	Circuit Court
Part Curtor of Julgren	nd More E. authorizing the join	ning together as husband and wife
Be it further remembered, the following marriage certificate was filed in my office, to-wit:		
1, Aux Charles hold hereby certify that on the 3rd day of July one thousand nine hundred and 76 at Brawnsburg, County of Hendricks,		
State of Indiana, Groom Victor & O. Care	at Mawnsburg	, County of Hendricks,
State of Indiana, Groom Victor & Julgren and, Bride Mary & Lee of	of Melaware Cour	ity, State of Ind
County. HENDRICKS		
Dated this 25 day of June, 1976		1 30 00
	Signed All Charl	est hold
Filed and recorded in accordance with the laws of the State of Indianal	Official Designation Cathples	Melst
Filed and recorded in accordance with the laws of the State of Indiana this	Simul All day of July	, 19. 7.6
	Signed Llen My Har	Nelf Clerk

-----HENDRICKS....

Circuit Court

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS County MALE Medical Examination Report Dated. Date of Application FEMALE Medical Examination Report Dated. Name of Physician Warrid Haggard 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 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 | upentar 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: An Imbecile? Date of birth verified by: Birth Cert. Judicial Decree Yes 🗆 Of Unsound Mind? Other (Specify)... Yes 🗌 2. Are you under guardianship as a person of unsound mind? 2. Are you now or have you been within five (5) years an inmate of a county asylution of 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 🗌 4. Are you afflicted with a transmissible disease? No TYes No D Yes 🗌 2. Are you under guardianship as a person of unsound mind? 5. Are you related to the bride closer than second cousin No D Yes 🗌 6. Are you now under the influence of intoxicating liquor? Yes 🗌 3. Are you afflicted with a transmissible disease? No Yes 7. Are you now under the influence of a narcotic drug? No TYes 4. Are you related to the groom closer than second cousin? 8. Are you able to support a family? No D Yes 🗆 No 🗆 9. Are you likely to so continue? No 🗆 Yes D 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 Address (b) Are you supporting or contributing to their support? Yes 🗆 No [(c) Are you complying with any court order or orders issued for Yes [No 🗆 Birthplace of mother (State or foreign country) State of Indiana, County of..... Circuit Court 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. Clerk HENDRICKS den Harvey 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 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 ..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.... , 19.76., authorizing the joining together as husband and wife Lisa J. Patrick Chine..... of Indiana dated the 25and.... Be it further remembered, the following marriage certificate was filed in my office, to-wit:

I, Rev. Dillon Laffin Plainf: Hendrikcs, State of Indiana, Groom. James Auman, Jr. James Auman, Jr. County, State of Indiana

and Resident State of Marion County, State of Indiana and, Bride. Lisa J. Patrick of Hendricks County, State of Hendricks 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 HENDRICKS

County. Signed Rev. Dillon Laffin June , 19 76 Minister Dated this .. Official Designation.... Filed and recorded in accordance with the laws of the State of Indiana thisCircuit Court

HENDRICKS.

STATE OF INDIANA

Form Prescribed By Indiana State Board of APPLICATION FOR I	MARRIAGE LICENSE File
Health under Authority Chap. 126, Ind. Acts 1905 HENDRICE	(2) 7/
WALE	FEMALE Medical Examination Report Dated 6-14-76
MALE Medical Examination Report Dated (0-14-76	Name of Physician Lloyd Jerry
Name of Physician Lloyd Jerry	
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-
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1995 prectriction or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	FEMALE APPLICANT
Name Vo First A Middle Vo Last	Name Cothy Middle Welliams
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
R+ 6 Bob 195 Nanvelle, In.	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 Megro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation June A, Stop	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Daudicial Decree	Usual Occupation
Dotner (Specify) was been adjudged diagnosed or considered as:	Date of birth verified by: Deirth Cert. Undicial Decree
An Imbecile? Of Unsound Mind?	Other (Specify) # 55.56
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? No Yes
13. Are you now of mark you can write the home for indigent persons? 14. If answer to 3 is "yes" has the cause of such condition been removed? 15. Are you now of mark you have you h	Of Unsound Mind?
4. Are you afflicted with a transmissible disease?	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? No Average 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 No Yes
9. Are you likely to so continue? 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 ☐
0. Do you have minor children from one or more former marriages? No Yes (If yes, answer questions a, b, c)	7. Full name of father Assues Sewig Wellians
(a) List their full names, ages and addresses Name Age Address	Residence of father (if deceased so state) Same
	Occupation of father Returned 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 wandselle a assor
(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 Chester Thomas	Occupation of mother Con Control Parage 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 Austen C. Jrent	County of
Residence of mother (if deceased so state) R#6 Bod 195 Wannell	Signed Colly Jo Williams
Occupation of mother	New Address 394 W. Marion St. Lawy
Birthplace of mother (State or foreign country) Jennessel	Subscribed and sworn to before me this 2 day of time, 197 4
State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Dlen M. Harvey Clerk HENDRICKS Circuit Court
Signedy Darolf & Sundy	
New Address 394 a marion	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of June, 1976.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Dun 7/1 Hawly ClerkHENDRICKS 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, September 1.	County ofHENDRICKS
County of HENDRICKS Signed Father	Signed Father
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 COU	RT. A marriage license having been refused to the above named parties, the
	Court by written order issued and filed
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 lice	ense issued by the clerk of the HENDRICKS Circuit Court
Harold F. Hangley	, 19.76., authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in mu	and Cath Jo Williams office, to-wit:
Rev. H. Cliff Davis	26+h T
one thousand nine hundred and	at Banville County of Hendricks
State of Indiana, Groom	of Hendricks County State of Indiana
and, Bride Call JO Williams of	Hendricks County, State of Indiana
	r that purpose by the Clerk of the Circuit Court of
Dated this 29th day of June , 19	76. Pov. H. Cl. 65 Day
	Signed Rev. H. Cliff Davis Official Designation Minister, Hillcrest Baptist Chu
Filed and recorded in accordance with the laws of the State of Indiana this	29 day of June 10 76
, , Jose of Industra this	Signed Lless m Tarvey Clerk
and the pro-	HENDRICKS Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS _County MALE Medical Examination Report Dated. FEMALE Name of Physician Jolen 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 Name of Physician MALE APPLICANT FEMALE APPLICANT Previous Marital Status: Never Married Number of Previous Marriage Death Divorce Annulment Last Marriage Ended By : Previous Marital Status: Never Married Number of Previous Marriage White Negro Other (specify). Color or Race Last Marriage Ended By: Death Divorce Annulment Color or Race White Negro | Other | (specify)... Date of birth verified by: Birth Cert. Judicial Decry 113-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. Dudicial Decree No Yes Of Unsound Mind? Yes 🗆 # 58-256-705 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? county asylum or Yes An Imbecile? No Yes 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? No D 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 D Yes 🗌 Yes 🗌 6. Are you now under the influence of intoxicating liquor? Yes 🗌 3. Are you afflicted with a transmissible disease? No Yes 7. Are you now under the influence of a narcotic drug? Yes 🗆 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? Yes D No 🗆 5. Are you now under the influence of intoxicating liquor? No P 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 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 their support? Birthplace of mother (State or foreign country)... Residence of father (if deceased so state) ... Occupation of father Birthplace of father (State or foreign country). 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. 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. Henry 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 ... County of HENDRICKS...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 authorizes 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. 19.26, authorizing the joining together as husband and wife Daniel Edward Varmillion and Relecce ann Sastetter of Indiana dated the 25 day of Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the 2 mel day of ... at Slainfield, County of Tendricks Educard Vermillion of Henbericks County, State of Indiana Lev. Tickard zorl and, Bride Selecca Inn Rastetter of Nendrick Court of HENDRICKS 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 HENDRICKS County. 25 day of June, 19.76. Official Designation Jonnan Catholic Dated this ... Filed and recorded in accordance with the laws of the State of Indiana thisCircuit Court

HENDRICKS.

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

File				
	uni	22	19	76

No. 248

Health under Authority Chap. 126, Ind. Acts 1905 HENDRICKS _County Date of Application FEMALE Medical Examination Report Dated. MALE Medical Examination Report Dated arcadio M. Name of Physician_ Name of Physician Madus M 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 First Name Date of Birth Place of Birth (State or foreign country State Residence Addres 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: Last Marriage Ended By: Death Divorce Annulment White Negro Other (specify)... Color or Race Negro Other (specify). Color or Race Date of birth verified by: | Birth Cert. | Judicial Decree Usual Occupation 19 Other (Specify) Commy Date of birth verified by: Birth Cept. Dudicial Decree Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile?
 No 🖰 Yes 🗌 Other (Specify). No 🖾 Yes 🗌 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 asylum or home for indigent persons? No Yes An Imbecile? If answer to 3 is "yes" has the cause of such condition been removed? Yes 🗌 No Yes No 🗆 Of Unsound Mind? No D Yes 🗌 4. Are you afflicted with a transmissible disease? 2. Are you under guardianship as a person of unsound mind? No Yes Yes 🗌 No 🕡 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 🗌 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? Yes 🔃 5. Are you now under the influence of intoxicating liquor? No 🗌 Yes 🔽 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 Residence of father (if deceased so state). Occupation of father ... Birthplace of father (State or foreign country 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). No \square Occupation of mother 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. State of Indiana, Birthplace of father (State or foreign country) County of HENDRICKS 12. Full maiden name of mother. Tuttle Residence of mother (if deceased so state). Occupation of mother / / MA Birthplace of mother (State or foreign country) ... I depose and state the information given in this application is true and correct. 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 Subscribed and sworn to before me this Allew III Farvey ClerkHENDRICKS 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 Mother Signed. Mother Subscribed and sworn to before me thisday of..... Subscribed and sworn to before me this .., 19...... COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the HENDRICKS 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 HENDRICKS Circuit Court of Indiana dated the 26 fine joining together as husband and wife ames allen Jolle Be it further remembered, the following marriage certificate was filed in my office, to-wit: Charles L. Denny hereby certify that on the 27th day of June, 76 one thousand nine hundred and at R. R. #1 , County of Morgan, James Allen Tolle of Hendricks County, State of Indiana State of Indiana, Groom..... Janice Carroll Brittenback 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 ofHENDRICKS...... , 19 76 June Dated this. Signed Charles L. Denny Baptist Minister Official Designation..... Filed and recorded in accordance with the laws of the State of Indiana thisday of June Signed

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS _County 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—in or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT FEMALE APPLICANT Previous Marital Status Never Married Number of Previous Marriage Death Divorce Annulment Last Marriage Ended By : Previous Marital Status: Never Married Number of Previous Marriages. White Negro Other (specify)... Color or Race Last Marriage Ended By: 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).... 1. Are you now or have you been adjudged, diagnosed or considered as:
An Imbecile? Date of birth verified by: Birth Cert. Judicial Decree No Yes Of Unsound Mind? Wealth + Karpetal Carp marion & 2. Are you under guardianship as a person of unsound mind? Yes 🗌 1. Are you now or have you been adjudged, diagnosed or considered as 3. Are you now or have you been within five (5) years an inmate of a home for indigent persons? An Imbecile? No D 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 🗌 2. Are you under guardianship as a person of unsound mind? 5. Are you related to the bride closer than second cousin? No Yes 🗆 No 🖸 Yes 🗆 6. Are you now under the influence of intoxicating liquor? No D 3. Are you afflicted with a transmissible disease? Yes 🗌 No D 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 [5. Are you now under the influence of intoxicating liquor? No 🗆 Yes 🗌 No 🗆 9. Are you likely to so continue? 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 Address Birthplace of father (State or foreign country) ... 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? Birthplace of mother (State or foreign country)..... Residence of father (if deceased so state) And Occupation of father Alle State of Indiana, Birthplace of father (State or foreign Residence of mother (if deceased so state) -Occupation of mother Symumaku Birthplace of mother (State or foreign country). Clerk HENDRICKS .. Circuit Court 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 GAR signs, state facts which render the consent of the other parent unnecessary. Clerk HENDRICKS Illy Markey 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 State of Indiana, County of HENDRICKS Father 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. HENDRICKS 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...., 19.76, authorizing the joining together as husband and wife Wonald Treston Dugan and Turi Lynn Hauffman of Indiana dated the .. Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the 29 ..., County of Hendricke at BrownsburgCounty, State of ... Indiana Sw. Donald TylerCounty, State of Indiana, State of Indiana, Groom Donald Weston Dugan of one thousand nine hundred and. and, Bride Mere Synn Caleffman of Hendricks were by me June , 19 76. Dated this., 19.76. Official Designation.... Filed and recorded in accordance with the laws of the State of Indiana this...... .Circuit Court

Signed.

HENDRICKS

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS ____C

___County

No. 250

6-22-76 Date of Application

...Circuit Court

......HENDRICKS ...

MALE 6-21-76	Medical Examination Report Dated 6-21-76
Medical Examination Report Dated	Name of Physician M. D. Scamahorn
Name of Physician // , & Camanawa	
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)".	tement—Whoever procures the issuance of a license to marry by any false statement, representa-
MALE APPLICANT	Name First Middle Last
Name First Middle Blacker	Vickee Jan Smith
Date of Birth Month Day Year	Date of Birth 1951
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) Showe and
Residence Address Street of R. R. City County State	Residence Address & Street or R. R. B. City County State
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name it Different
	Previous Marital Status: Never Married Number of Previous Marriages.
Last Marriage Ended by.	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	Color or Race
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	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? 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 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?	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? 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	7. Full name of father for the fathe
Name Age Address	Occupation of father
	Birthplace of father (State or foreign country) I Language
No. of the second secon	8. Full maiden name of mother flands Hangsaus
(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) Sudianapalis, In
11. Full name of father Hanny + Blacker	Occupation of mother And Race of mother Whe
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Allesand Race of father Wh	State of Indiana, I depose and state the information given
Birthplace of father (State or foreign country)	County of HENDRICKS in this application is true and correct.
Residence of mother (if deceased so state)	Signed Tilkin gelen South
Occupation of mother Race of mother Will	New Address 16 1 Shart, Brownshuse
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this 32 day of 4 1976
State of Indiana, County of HENDRICKS Sa: I depose and state the information given in this application is true and correct.	The MANUA CHER HENDRICKS Circuit Court
Signed Jun L. Islachu	
New Address // 4 M. Co Nant ST 13 sounding	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 day of 19/6.	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 uniccessory.
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 ofHENDRICKS
County of HENDRICKS	Signed. Father
Signed Father	Signed. Mother
Signed	Subscribed and sworn to before me thisday of, 19
Clerk	Clerk
COMPLETE IE MAPPIACE LICENSE ISSUED DV OPDED OF COM	
	RT. A marriage license having been refused to the above named parties, the ourt by written order issued and filed
in authorizes and directs the issuance	of a marriage license to the above named parties.
	SE AND MARRIAGE CERTIFICATE
Be It Remembered, there was filed in my office a marriage lice	nse issued by the clerk of the HENDRICKS Circuit Cour
of Indiana dated the day of the	, 19.7 authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my	and trakel fan Smeth
I, Megron Barnard	hereby certify that on the 32 d. day of
one thousand nine hundred and	The state of the s
State of Indiana, Groom Strait In and len Black in	of Mendreshall
were by me united in marriage as authorized by a marriage is	Hendrick County, State of Indiana
County.	that purpose by the Clerk of the Circuit Court of
Dated this 3 rd day of Jally , 19 7	Signed Mich 1000 Back was al
the state of the s	Signed Myrson Barnard Official Designation Judge
Filed and recorded in accordance with the laws of the State of Indiana this	6 day of Jels 1976
	Signed Glen m. Harved Clerk

No. 251

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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICK	S County File 37
MALE Sent Day (5.15.7)	6-22-76 Details
Medical Examination Report Dated 6-15-76	
Name of Physician Irving Cahen	Medical Examination Report Dated 6-15-76
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "Folsont Acts 1905 pre	Name of Physician Irving Caken
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
Name First Middle A Last	FEMALE APPLICANT
Date of Birth Month Day Day Wrsdale	Name First Middle Last
Place of Birth (State or foreign country)	Date of Birth Month Day Levris
Indianapoles and.	Place of Birth (State or foreign country) 24 1954
Residence Address State Cambril Cambril State State	Residence Address Street or R. R. City
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Slainfield Sid
Last Marriage Ended By: Death Divorce Annulment	Prayions Marital Co.
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation (Andrew Clerk Cert. Judicial Decree State, B. J. S. J.	Color or Race White Negro Other (specify)
Other (Specify) 113-57-080290	Usual Occupation Service Proposentation
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No PY Yes	Date of birth verified by: Birth Cert. Judicial Decree Bureau of Vital
Of Unsound Mind? No Yes 2. Are you under guardianship as a person of unsound mind? No Yes Yes	Other (Specify) Stalistics 12850
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. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10
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 Vers 5. Are you related to the bride closer than second cousin? No Vers 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?
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 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 Zwilliam Earl Lewis
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Self employed Race of father I
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother. Ann Stanton Rain
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state) Albunfully,
11. Full name of father Speland To Can arssall	Occupation of mother Milliana Bell Race of mother The Marieland
Residence of father (if deceased so state) Cambel, Ind.	Birthplace of mother (State or foreign country) Maryland
Occupation of father Self employed Race of father S	State of Indiana, ss: I depose and state the information given in this application is true and orrect.
Birthplace of father (State or foreign country) Shalland 12. Full maiden name of mother of mother by athless Brace	County of HENDRICKS
Residence of mother (if deceased so state) Lambef, Ind	Signed MULLUL SAMON STATES
Occupation of mother. Hellselvife Race of mother.	New Address.
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this
State of Indiana, County of HENDRICKS Sas: I depose and state the information given in this application is true and correct.	Glen Marvey Clerk HENDRICKS Circuit Court
Signed X Mechael R. Van aradale	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 15 day of 1976.	signs, state facts which render the consent of the other parent unnecessary
Alem Marvell Gerk 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	
accs which render the consent of the other parent	· · · · · · · · · · · · · · · · · · ·
	State of Indiana, County of HENDRICKS
State of Indiana,	Signed
County of HENDRICKS 85:	Signed
Signed Mother Signed 10	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me thisday of, 19,	Subscribed and Clerk
	heen refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been related and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT COMPLETE ISSUED BY ORDER OF COURT COURT BY ORDER OF COURT COURT BY ORDER OF COURT COURT BY ORDER OF COUR	urt by written order issued
inauthorizes and directs the issuance o	f a marriage include to
RETURN OF MARRIAGE LICENSI	E AND MARRIAGE CERTIFICATE se issued by the clerk of the HENDRICKS Circuit Court 19.76, authorizing the joining together as husband and wife Deborah Ann Lewis
RETURN OF MARRIAGE LICENSI Be It Remembered, there was filed in my office a marriage licen of Indiana dated the 29 day of	, 19.76, authorizing the joining together as husband and
of Indiana dated the 29 day of	nd Deborah Ann Lewis
Be it further remembered the following marriage certificate was filed in my o	md Deborah Alli Demonstration of July ffice, to-wit: hereby certify that on the July hereby certify that on the County of Hendericks at Hendericks County, State of Indiana
Be it further remembered, the following marriage certificate was filed in my of thousand nine hundred and the state of Indiana, Groom Michael Ray Van Arsdale and, Bride Deborah App Lewis of the state of Indiana, Groom Michael Ray Van Arsdale and, Bride Deborah App Lewis of Michael Ray Van Arsdale	Plainfield , County of Indiana
one thousand nine hundred and	f Render 20 . State of Indiana
one thousand nine hundred and 76 State of Indiana, Groom Michael Ray Van Arsdale and, Bride Deborah Ann Lewis of were by me writed by a marriage license issued for	Hendricks County, State of HENDRICKS
and, Bride Deborah Ann Lewis of	that purpose by the Clerk of the Circuit Court of
a me united in marriage de difficultation	Rev. Richard Zore
County. Dated this 29th day of June , 19.76	Rev. Richard Zore Signed Roman Catholic Priest Official Designation Luly ,19 76
aug of	Official Designation
Filed and recorded in accordance with the laws of the State of Indiana this	Ilen M. Harvey Circuit Court
and recorded in accordance with the laws of the bound	Signed

HENDRICKS.

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

File	No	252
June 23, 197	File_	
Date of Application		June 23, 197

HENDRICKS County

...Circuit Court

HENDRICKS.

	Date of Application
11-176	FEMALE Medical Examination Report Dated 6/16/76
MALE Medical Examination Report Dated	Medical Examination Report Dated
a. 1 This do x	Name of Physician A Stephen Suvan M.
Name of Physician Coll L. Junean	Whose procures the issuance of a license to marry by any false statement represent
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 Patricia & Middle Gleade Last
Name Kenn Lee Smoot	Date of Birth // Month Day Year
Date of Birth Month Day 1956	Octaber 7 1960
Place of Birth (State/or foreign country)	Place of Birth (State or foreign country)
When star 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	Maiden Name II Different
The state of the s	Previous Marital Status: Never Married Number of Previous Marriages
Last Marriage Ended By: Death Divorce Annulment	Test Marriage Ended By: Death □ Divorce □ Annulment □
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
1. O Aritaba	Color or Race White Negro Other (specify)
Usual Occupation Nantra Ace - William Market Market	CF 1
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Student
Other (Specify) Solution of the Solution of th	Date of birth verified by: Birth Cert. Judicial Decree
An Imbecile?	Other (Specify) Fulnum C. Ospfill
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 asylum or home for indigent persons?	An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed? No Ves	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? 6. Are you now under the influence of intoxicating liquor? No Yes Yes Yes	3. Are you afflicted with a transmissible disease? 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?	5. Are you now under the influence of intoxicating liquor? No Yes
9. Are you likely to so continue? Yes ✓ No ☐ 10. Do you have minor children from one or more former marriages? No ☐ Yes ☐	6. Are you now under the inflyence of a parcotic drug? No Yes
(If yes, answer questions a, b, c)	7. Full name of father Paul aller Blesson
(a) List their full names, ages and addresses	Mar Emperor
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Race of father MMML
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Anna len Allandie
(c) Are you complying with any court order or orders issued for	Residence of mother (if deceased so state)
Shelf a Wardness Smart	Occupation of mother MAN G. BRace of mother MANTE
11. Full name of father 11. Full name of father 11.	Carles
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Race of father Mull	State of Indiana, l depose and state the information given
Birthplace of father (State or foreign country) The Manne State of State or foreign country)	County of
12. Full maiden name of mother All Manager All School Scho	Patricia 1 Alegan
Residence of mother (if deceased so state)	Signed 11.00 and 11-
Occupation of mother Addless A Magging. Race of mother White	New Address KKS (CMO) Collaboration (CM)
Birthplace of mother (State or foreign country).	Subscribed and sworn to before me this day of day of 196
State of Indiana, County of HENDRICKS Ss: I depose and state the information given in this application is true and correct.	Men M. Danuly Clerk HENDRICKS Circuit Court
toring for front	
New Address PR5 Gener Villa, 1. Veinon free	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 93	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 19	
Silla Menus ClerkHENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OF GUARDIAN	
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Ocation of legal father unknown
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
Signed	Signed (Auna to Stephens) Mother
SignedMother	DISTRICT TO THE PARTY OF THE PA
Subscribed and sworn to before me thisday of, 19,	Subscribed and sworn to before me this day of 19.72.
Clerk	Allen M. Danily Clerk
COMPLETE IE MARRIAGE LIGHTON TO THE CONTROL OF THE	
	RT. A marriage license having been refused to the above named parties, the
	ourt by written order issued 3 day walker and filed
authorizes and directs the issuance	of a marriage license to the above named parties.
RETURN OF MARRIAGE LICENS	SE AND MARRIAGE CERTIFICATE
we di Kemembered, there was filed in my office a marriage lice	nse issued by the clerk of the HENDRICKS Circuit Court
of Indiana dated the 23 day of June	, 19 authorizing the joining together as husband and wife
25 to far the removed, the following marriage certificate was filed in my	office, to-wit:
I, Jean C. Meerer	hereby certify that on the 25 day of
one thousand nine hundred and 76	at Danvilla. County & Denetreeks
State of Indiana, Groom Selling July Smaat	of Connings (County State of Indiana?
and, Bride Jatricea & Gleason,	Hendricks County, State of Indiana,
were by me united in marriage as authorized by a marriage license in the	that purpose by the Clerk of the Circuit Court of HENDRICKS
County.	that purpose by the Clerk of the Circuit Court ofHENDRICKS
Dated this 25 day of June, 19.71	6 a l a
	Signed John Collaboration
Filed and recorded in	Official Designation Judge Kendricks Co. Court
they and recorded in accordance with the laws of the Ctate of I. I.	25 day of June 19 76.

APPLICATION FOR MARRIA

APPLICATION FOR MARRIAGE LICENSES

Chap. 126, Ind. Acts 1905 HENDRICK	S File
MALE	
Medical Examination Report Dated	FEMALE Medical Examination
Name of Physician Janus Black Ind.	Medical Examination Report Dated 6/2/96 Name of Physician Blinds
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 whose a second famile Black and
MALE APPLICANT (\$500.00)".	whoever procures the issuance of a license to marry by any false statement, representa-
Name On Figst Middle 1 Logs.	Name First
Date of Birth Month Day Yest	Date of District Middle 15 Light /
Place of Birth (State of tyteign country)	Day Year
Residence Address Street of R. R. B. City County State	Place of Birth (State or foreign country) Residence Address Street or P. P. Residence Address
Previous Marital Status: Never Married Number of Previous Marriages.	401 County State
	Maiden Name if Different St. Brownship
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 Mulent	Color or Race White TO Name To Cale
Date of birth verified by: Birth Cert Judicial Decree Gother (Specify) Surv. # 12 30 54 179	Usual Occupation 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 Ves	Other (Specify) # 10699
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons?	Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind?
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 7. Are you now under the influence of a narcotic drug? No Yes 7.	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? 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
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father Non Maria Whitaber
Name Age Address	Residence of father (if deceased so state)
	Occupation of father All Race of father All Race of father
	Birthplace of father (State or foreign country).
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for	8. Full maiden name of mother
their support?	Occupation of mother Alui - Stand - Hage of mother White
Residence of father (if deceased so state) Baywashure	Birthplace of mother (State or foreign country)
Occupation of father Alston Engeneric Race of father White	A Superior of the State of the
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother & achely Suffer	shot my glabitakes
Residence of mother (if deceased so state)	New Address 3708 Hellow apple (t. Indplo.
Occupation of mother Andrews Race of Mother A	Subscribed and sworn to before me this day of day of 19.76
State of Indiana, I depose and state the information given	Alex D. D. MINING Clerk HENDRICKS Circuit Court
County of HENDRICKS application is true and correct.	
New Address 3708 TELLOW PORENT INDIANAPOUS	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 93 day of Hand 1976	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
Hen M HALMY Clerk HENDRICKS Circuit Court	signs, state facts which render the consent 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	
	State of Indiana, County ofHENDRICKS
State of Indiana,	SignedFather
County of HENDRICKS 88:	SignedMother
Signed Mother	Subscribed and sworn to before me thisday ofday of
Subscribed and sworn to before me thisday of19	
	T. A marriage license having been refused to the above named parties, the and filed part by written order issued
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County authorizes and directs the issuance of	T. A marriage license lianage and filed and filed
HENDRICKS County	of a marriage license to the above named parties.
in authorizes and directs the issuance of	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
DETURN OF MARRIAGE	is and by the clerk of the
Be It Remembered, there was filed in my office wife	19 authorizing Whiteker
matana dated the	and All All All All All All All All All Al
Be it further remembered, the following marriage certificate was filed in my	hereby certify that on the
1, Joseph D. Wilson	at Brownspury County, State of Indiana
Be it further remembered, the following marriage certificate was filed in my of the same one thousand nine hundred and State of Indiana, Groom and Price of Indiana, Groom and Bride were by me united in marriage are authorized by a marriage license issued for	Alexander by the Clerk of the Circuit Court of HENDRILES
State of Indiana, Groom Andrew Dungh of and, Bride Donna J. Whitaker of were by me united in marriage as authorized by a marriage license issued for County.	1 0 Julian
County.	() Joseph William
County. Dated this 9 day of July , 1976	Official Designation Municipality, 19 76.
Piled and recorded in accordance with the laws of the State of Indiana this	15 day of Clerk
Filed and recorded in accordance with the laws of the State of Indiana the	Signed Signed Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No. 257

ile_					
	June	2	3.	1976	
	Date of A	ppli	catio	on	

MALE (W-7 C	FEMALE Medical Examination Report Dated 6 - 11 - 76	
Medical Examination Report Dated	Name of Physician Carl L. Heinlein & . D.	
Name of Physician 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 in any	FEMALE APPLICANT	
MALE APPLICANT Name Middle Last	Name First Middle Last .	
Edward Pattor Year	Date of Birth Month Day Year	
Dure 30 1952	Place of Birth (State or foreign country)	
Place of Birth (State or foreign country) Street or P. P. City County, Strate	Residence Address Street or B. R. City County State	
Residence Address Street or R. R. Street or R. Street	Maiden Name if Different	
Previous Marital Status: Never Married Number of Previous Marriages		
Last Marriage Ended By: Death Divorce Annulment Superior Cl.	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 Plant Food Marker	Color or Race White Negro Other (specify)	
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation store clerk	
1. Are you now or have you been adjudged, diagnosed or considered as:	Date of birth verified by: Birth Cert. Judicial Decree	
Of Unsound Mind?	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	An Imbecile?	
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind?	
4. Are you afflicted with a transmissible disease? No ✓ Yes □ 5. Are you related to the bride closer than second cousin? No ✓ Yes □	2. Are you under guardianship as a person of unsound mind? No Yes	
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a narcotic drug? Now Yes	3. Are you afflicted with a transmissible disease? 4. Are you related to the groom closer than second cousin? No Yes	
8. Are you able to support a family? Yes No	5. Are you now under the influence of intoxicating liquor? No Yes	
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? No Yes No Yes	6. Are you now under the influence of a narcotic drug?	
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father De 2 B 2 B 2 B 2 B 2 B 2 B 2 B 2 B 2 B 2	
Name Age Address	Residence of father (if deceased so state)	
partice value petry - 7 - Lawrence of	Occupation of father State or foreign country The Hold of father State or foreign country	
	8. Full maiden name of mother Late Catterne Davis	
(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) RR 2	
their support? Charle Charles Res No	Occupation of mother Houseufe Race of mother W	
Residence of father (if deceased so state) P. o Bry 67, Chryton J.	Birthplace of mother (State or foreign country) New Jersey	
Occupation of father dock Worker Race of father W.		
Birthplace of father (State or foreign country)	State of Indiana, County of	
12. Full maiden name of mother. Dally Tokend Johnston	Signed Surance Main	
Residence of mother (if deceased so state) Occupation of mother Rocal Clk Race of mother Company Residence of mother Company Race of mother Company Residence of mother Company Race of Mother Race of Mo	New Address Rt Box 287, Clayland	
Birthplace of mother (State or foreign country) Dayton Ohio	Subscribed and sworn to before me this 33 day of 2000, 1976	
State of Indiana, County of HENDRICKS State of Indiana, I depose and state the information given in this application is true and correct.	Glen In Hawy Clerk HENDRICKS Circuit Court	
Signed Edward P. Neelley		
New Address Rt 1 Box 287, Clayla Lat.	CONSENT OF PARENTS, PARENT OR GUARDIAN	
Subscribed and sworn to before me this. 23 day of 1976	We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
Sle 7n. 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 ofHENDRICKS	
County ofHENDRICKS	SignedFather	
Signed	Signed. Mother	
Signed	Subscribed and sworn to before me thisday of, 19	
COMPLETE IF MARRIAGE LICENSE ISSUED BY OPDER OF COLU		
HENDRICKS County C	RT. A marriage license having been refused to the above named parties, the ourt by written order issued	
inauthorizes and directs the issuance	of a marriage license to the above named parties.	
RETURN OF MARRIAGE LICENS	SE AND MARRIAGE CERTIFICATE	
Be It Kemembered, there was filed in my office a marriage lice	nse issued by the clerk of the HENDRICKS Circuit Court	
of Indiana dated the as day of June , 1976, authorizing the joining together as husband and wife		
Be it further remembered, the following marriage certificate was filed in my office, to-wit:		
1, hereby certify that on the 2 m of day of		
one thousand nine hundred and	at Claution	
and, Bride Sugarnal Mc Cain	of Hendricks County, State of Indianas	
were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court of		
Dated this 28th day of Cum		
Dated this 28th day of June, 1976. Signed Henry & Gamsey, Jr.		
Filed and recorded in accordance with the	Official Designation and Susterior Can Far	
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Slen M Throng Clerk	

.. Circuit Court

HENDRICKS

Signed

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 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 MALE APPLICANT FEMALE APPLICANT Name Last Date of Birth Place of Birth (State or foreign country) 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 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 No Yes Of Unsound Mind? Yes 🗌 2. Are you under guardianship as a person of unsound mind? No 1 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? 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? 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? No W Yes 🗌 6. Are you now under the influence of intoxicating liquor? No 🔽 Yes 🗆 3. Are you afflicted with a transmissible disease? 7. Are you now under the influence of a narcotic drug? No D Yes 🗌 4. Are you related to the groom closer than second cousin? Yes 🗆 8. Are you able to support a family? 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 No Yes (If yes, answer questions a, b, c) (a) List their full names, ages and addresses Address No 🗆 (b) Are you supporting or contributing to their support? Yes 🗌 (c) Are you complying with any court order or orders issued for their support? Yes No No 11. Full name of father..... Birthplace of mother (State or foreign country). Lalla Residence of father (if deceased so state) Occupation of father Sugar Birthplace of father (State or foreign country)..... 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. Subscribed, and sworn to before me this Clerk 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..... HENDRICKS State of Indiana, County of HENDRICKS... Father Mother 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 HENDRICKS 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 HENDRICKS Be It Remembered, there was filed in my office a marriage license issued by the clerk of the..... ..., 1976, 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: .County, State of Ind.County, State of one thousand nine hundred and Linda D. Tungerford of Hendricks 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. Dated this..... Official Designation ... Filed and recorded in accordance with the laws of the State of Indiana this.....

Form Prescribed By Indiana State Board of APPLICATION FOR M	ARRIAGE LICENSE File Bk 37
Health under Authority Chap. 126, Ind. Acts 1905 HENDRICKS	11/19/6
	FEMALE Medical Examination Report Dated 6-15-76
MALE Medical Examination Report Dated 6-15-16	Name of Physician & P. Cripe
\mathcal{L}	//
Name of Physician LL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False states on 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 talse statement, represent
on or pretense shall be fined in any sum not exceeding the	FEMALE AFFLICANT
ame of First Middle Last	Name norita & liffus
ate of Birth Month Day Year	Date of Birth June 28 1958
lace of Birth (State or foreign country)	Place of Bigth (State or foreign country)
An Olego Cale Joines City County State esidence Address Street or R. R. Of City	Residence Address Street or R. R. Sity County State
405 W. Main Plainfield Hendricks Store	Maiden Name if Different
revious Marital Status: Never Married Number of Previous Marriages	Previous Marital Status: Never Married Number of Previous Marriages
ast Marriage Ended By: Death Divorce Annulment -	Last Marriage Ended By: Death Divorce Annulment
color or Race White - Negro - Other - (specify)	
Isual Occupation Zyadway	Color or Race White Negro Other (specify)
Pate of birth verified by: Birth Vert. Undicial Decree	Usual Occupation Unemployed
Other (Specify)	Date of birth verified by: Birth Cert. Judicial Decree
An Imbecile? No W Yes Yes	Other (Specify)
2. Are you now or have you been within five (5) years an inmate of a county asylum 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 Ves	2. Are you under guardianship as a person of unsound mind? No
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? No No No No No No No No
7. Are you now under the influence of a harcotte didg. 8. Are you able to support a family? Yes V No	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?
 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 Melian Ray Jeffun
(a) List their rull names, ages and addresses Name Age Address	Residence of father (if deceased so state) MAPA, MA
	Occupation of father Just Purch Race of father W
	Birthplace of father (State or foreign country) Kiley, Ind.
(b) Are you supporting or contributing to their support? Yes □ No □	8. Full maiden name of mother Da Strate Judge Judge 1966
(c) Are you complying with any court order or orders issued for their support?	Occupation of mother (if deceased so state) Race of mother W
of mother (if deceased so state) of mother (State or foreign country) of mother (State or foreign country) ss: I depose and state the information given in this application is true and correct. Signed New Address New Address ClerkHENDRICKS Circuit Court F PARENTS, PARENT OR GUARDIAN ents, of this applicant hereby give consent for this marriage. If only one parent facts which render the consent of the other parent unnecessary ana, HENDRICKS Signed Father Signed Father Signed Mother	New Address. Subscribed and sworn to before me this. Subscribed and sworn to before me this. 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 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. Subscribed and sworn to before me this.
and sworn to before me thisday of	Subscribed and sworn to before the this.
Clerk	
ETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	RT. A marriage license having been refused to the above named partie
HENDRICKS County	Court by written order issued 3 day warms an
RETURN OF MARRIAGE LICENS	SE AND MARRIAGE CERTIFICATE
of Indiana dated the 24th	ense issued by the clerk of the HENDRICKS Circuit , 19.7 a uthorizing the joining together as husband an
Be it further remembered, the following marriage certificate was filed in my	and Twite I Juffers
I,	hereby certify that on the ZOLD day of June
one thousand nine hundred and 76	at Marion County of Indianapo
State of Indiana, Groom. Gregory A. Whipps	of Hendricks County, State of Indiana
and, Bride NOTICE L. JETTERS of	Marion County, State of Indiana
were by me united in marriage as authorized by a marriage license issued for County.	
Dated this day of June , 19	76
있는 그들이 살아 보고 하는 것이 없는 것 같아 없다면 하다 하나 하나 없다.	Signed Rev. Harry Mosier Official Designation Minister

29th day of June , 19 76
Signed Elen M. Harvey Clerk
HENDRICKS Circuit Court

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

Form Prescribed By

STATE OF INDIANA N FOR MARRIAGE LICENSE

No	256
File_	Bk 37
	une 24, 1976

HENDRICKS Circuit Court

diana State Board of APPLICATION FOR I although Authority hap. 126, Ind. Acts 1905	14 19 76
	FEMALE / /C. 7/
MALE / - 15-7/a	Medical Examination Report Dated 6-15-76
Medical Examination Report Dated 6-75-76	Name of Physician & Cripe
Name of Physician J. P. (upe 7h.)	//
LI OUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False sta	atement—Whoever procures the issuance of a license to marry by any false statement, representa-
on or pretense shall be fined in	FEMALE AFFEICANT
MALE APPLICANT Middle Last	Name First Middle Last
ame The pps	Date of Birth Month Day Year
Date of Birth Day 1958	Place of Bigth (State or foreign country)
Place of Birth (State or foreign country)	Sullevan States
Lesidence Address Street or R. R. City County State	1931 S. Lynhurst Dr. Inaple Marion and
405 W. Thain Plainfuld Hendricks Green	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
5//	Color or Race White Negro Other (specify)
Date of birth verified by:	Usual Occupation of nemployee
Other (Specify) # 8009 300	Date of birth verified by: Birth Cert. Judicial Decree
1. Are you now or have you been adjudged, diagnosed or considered as:	Other (Specify)
An Imbecile? Of Unsound Mind? No □ Yes □ Yes □ Yes □	Are you now or have you been adjudged, diagnosed or considered as:
2. Are you now or have you been within five (5) years an inmate of a county asylum 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?	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	3. Are you afflicted with a transmissible disease?
6. Are you now under the influence of intollecting liquid. 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?	5. Are you now under the influence of intoxicating liquor? No Yes No W
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 F Yes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father. The last of the state of the stat
Name Age Address	Residence of father (if deceased so state) And Man
	Occupation of father Juick Diliver Race of father to
	Birthplace of father (State or foreign country). Killey, Ind.
(1) A server apporting or contributing to their support? Yes No	8. Full maiden name of mother La State file fuller
(c) Are you complying with any court order or orders issued for	Residence of mother (if deceased so state)
their support:	Occupation of mother Assault Race of mother Race of mother
11. Full name of father (if deceased so state) Lan Diego Colopeane	Birthplace of mother (State or foreign country)
I, Mylin R Affan, give my per Norita Jeffers, who is under age at this time, 1976. Solution II	e 23, 1976 marriage. If only one parent unnecessary
of Indiana dated the 24th day of Reps. Be it further remembered, the following marriage certificate was filed in not not thousand nine hundred and 76 State of Indiana, Groom Gregory A. Whipps and, Bride Norita L. Jeffers of were by me united in marriage as authorized by a marriage license issued	license issued by the clerk of the HENDRICKS Circuit County, 19.76, authorizing the joining together as husband and wing and for that purpose by the Clerk of the Circuit Court of HENDRICKS.
County. 26th June 19	76
Dated thisday of, 19	Signed Rev. Harry Mosier
	Official Designation Minister
Filed and recorded in accordance with the laws of the State of Indiana thi	is 29th day of June, 19 76
The same of the State of Thurbul the	Signed Glen M. Harveef Cl

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

Dated this

Form Prescribed By Indiana State Board of Indiana State Board of Indiana Authority APPLICATION		
Health under Authority Chap. 126, Ind. Acts 1905	INDIANA N. 0.57	
	MARRIAGE LICENSE No. 257	
HENDRIC	KS County File	
MALE Medical Examination Report Dated 4 - 21 - 76	June 24 1976	
61	FEMALE Date of Application	
Name of Physician I from Walker, M.D.	Medical Examination Report Dated 6-21-76	
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name First Middle	Name of Physician / homas Walker m	
MALE APPLICANT	stement—Whoever procures the issuance of a license to more	
	DEMAND of marry by any false statement, representa-	
Date of Birth Hamph Eddie Johnson	Name First Middle	
Place of Birth (Stategor toystan country) 21 1951	Date of Birth Month Wang	
Monan, Indian	Place of Birth (State or foreign country) Day Year 14 1959	
Residence Address Street on B. R. City County State	Residence Administration (6)	
Previous Marital Status: Never Married Number of Previous Marriages	526 Maple La City County State	
Last Marriage Ended By : Death Divorce Annulment	Malden Name if Different Mu, Brownshurg, In.	
	Previous Marital Status: Never Married Number of Previous Marriages	
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Co. De	
Usual Onougustion printer	Chan a Aunument	
Date of birth verified by : Digith Cart. D Judicial Decree	Color or Race White Negro Other (specify)	
2 Other (Specity) 1. Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation None	
Of Unsound Mind!	Date of birth verified by: Birth Cert. Judicial Decree	
2. Are you under quarmananth as a person of unsound mind? No Yes	1. Are you now or have you have	
If answer to 3 in "yes" has the cause of such condition been served.	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 D', Yes D	Of Unsound Mind?	
i. Are you related to the bride closer than second equain? No D Yes D	2. Are you under guardianship as a person of unsound mind? No Yes	
1. Are you now under the influence of a narcotic drug? No Ves	3. Are you afflicted with a transmissible disease? No Yes	
3. Are you able to support a family? 3. Are you likely to so continue? 4. 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	The state of the s	
(a) List their full names, ages and addresses	7. Full name of father	
Name Age Address	Residence of father (if deceased so state) Paragon,	
	Occupation of father Marvilla Race of father Wh	
	Birthplace of father (State of foreign country)	
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother fund M. Klind	
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state) Diffusionally In	
II. Pull name of father passes di phases	Occupation of mother Dender Worker Race of mother Wh	
Residence of tather (if document se state) I Afficialities	Birthplace of mother (State or foreign country)	
Occupation at tather Affair & Additional Base at tarker Will	State of Indiana. I depose and state the information given	
Birtholass of father (State or foreign country) 101111111111111111111111111111111111	County of HENDRICKS ss: in this application is true and correct.	
Residence of mother (it decensed so state) Enternally of the	Signed Hothy youak	
Occupation of mother Achiella divilla Revision Base of mother Wh	New Address 106 N Sheem	
Birtholisce of mother (State or thesign country) Indiana	Subscribed and sworn to before me this 2 4 day of June 19.26	
State of Indiana. I depose and state the information given	Glerk HENDRICKS Circuit Court	
County of HENDRICKS of many in this application is true and correct.		
Signed of Man Green T	CONSENT OF PARENTS, PARENT OR GUARDIAN	
Now Address of the State of St	We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
SIN III Harnes Cher HENDE CKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary	
CONSENT OF PARENTS, PARENT ON 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 ofHENDRICKS.	Signed Father	
Signed Father	Signed Signed Mother Mother	
Signed Mother	Subscribed and sworn to before me this 24 day of full , 19 19	
Subscribed and sworn to before me this day of Clerk	Clerk Clerk	
	having been refused to the above named parties, the	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	r. A marriage license having been refused and filed and filed art by written order issued	
HENDRICKS County Cot	irt by written order issuedante in the above named parties.	
in authorizes and directs the issuance of	f a marriage license to the above named parties.	
THE LICENSE	AND MARKIAGE CHARLES HENDRICKS Circuit Court	
Be It Remembered, there was filed in my office a marriage	, 19 76, authorizing the joining together as has	
I milliana dated the day of		
De la	nce, to-wit.	
one thousand nine hundred and 76 at Thendricks County, State of Indiana,		
State of Indiana, Groom Jetome to Mole Johnson	Gendricks County, State of HENDRICKS	
and, Bride Kathleen helank Mount with	hat purpose by the Clerk of the Circuit Court of	
and, Bride Sathleen Deane nowak of Jundrelle 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		

Official Designation Lason Munister, Speederay Christian Ch.

...Circuit Court

Signed Illen M. Harrief

HENDRICKS ...

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No		250	
File_			
	1.	2.1 11	

Circuit Court

HENDRICE	Date of Application
MALE 17-7/	FEMALE Medical Examination Report Dated 6-17-76
Medical Examination Report Dated	11/20 B K 1 > 200 O
Name of Physician M. D. D. M. J. M.	Name of Physician (1997), 1997 (1997)
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	tement—Whoever procures the issuance of a license to marry by any false statement, representa-
MALE APPLICANT	FEMALE APPLICANT
Name First Middle Last	Name Berker Sugarne Mc Faco
Date of Birth Month Day Year	Date of Birth Month Day Year 1958
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
	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	
Usual Occupation	Color or Race White Negro Other (specify)
Other (Specify)	Usual Occupation Date of birth verified by: Dirth Cert. Dudicial Decree
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Of Unsound Mind? No Yes No 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? 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? 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 6. Are you now under the influence of intoxicating liquor? No Yes Yes	3. Are you afflicted with a transmissible disease? No G Yes
7. Are you now under the influence of a narcotic drug? 8. Are you able to support a family? Yes No Yes	4. Are you related to the groom closer than second cousin? No ☐ Yes ☐
9. Are you likely to so continue? Yes ☑ No □	5. Are you now under the influence of intoxicating liquor? No Yes
10. Do you have minor children from one or more former marriages? No Yes (If yes, answer questions a, b, c)	6. Are you now under the influence of a narcotic drug? No Yes
(a) List their full names, ages and addresses Name Age Address	7. Full name of father (if deceased so state)
	Occupation of father Race of father Why
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Ally fund from a
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state) I lamfully was
Residence of father (if deceased so state)	Occupation of mother And Race of Management And Rac
Occupation of father Alleget Delleville Race of father delle	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS as: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Sharely W. Collection	
Occupation of mother (if deceased so state) All Race of mother (III)	Signed Beckup Sugaran Ha
Birthplace of mother (State or foreign country)	New Address Bedford Park West
State of Indiana, I depose and state the information given	Subscribed and sworn to before pie this day of 19.
County of HENDRICKS in this application is true and correct.	Circuit Court
New Address Blefaret Park West Snelsonespil	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this 24 day of the 19.7%	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
ClerkHENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OF 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 Tadiana	State of Indiana,
State of Indiana, County of HENDRICKS ss:	County ofHENDRICKS.
SignedFather	SignedFather
Signed	Signed
Clerk	Subscribed and sworn to before me thisday of, 19
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	C. A marriage license having been refused to the above named parties, the
inauthorizes and directs the issuance of	art by written order issued and filed
RETURN OF MARRIAGE LICENSE	AND WIDDLESS
the state of the s	of inqual beat at a total
Ollace Or all Significant	, 19 16 , authorizing the joining together as husband and wife
Be it further (reinembered, the following marriage certificate and flational and	a suranne Merall
1, All Willow Saffen	ereby certify that on the 24 day of July
State of Indiana, Groom, Wilsey James & James a	to Lainfilld , County of Thendricks,
State of Indiana, Groom Jeffrey James Linder of and, Bride Beckey Illyanne Mc Fall of were by me united in marriage as authorized by a marriage license issued for the	County, State of Indiana
were by me united in marriage as authorized by a marriage license issued for the	hat purpose by the Clark of the County, State of Indiana,
Dated this 30 day of June, 1976	HENDRICKS
, 19 7 Le	Signed Lev Dillon Laffin
Filed and recorded in accordance with the laws of the	
Filed and recorded in accordance with the laws of the State of Indiana this	day of July , 19 76.
	Signed Silm M. Narvey Clerk
	HENDRICKS Circuit Court

.Circuit Court

Form Prescribed By Indiana State Board of Health under Authority

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS _County MALE 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-FEMALE APPLICANT Date of Birth Place of Birth (State or foreign country) 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 Other (Specify) Memorial Hospital Usual Occupation New Tage Co 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 🗆 Of Unsound Mind? Other (Specify) # 1364 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 county asylum 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? Yes 🗆 4. Are you afflicted with a transmissible disease? Yes 🗌 No D 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? 6. Are you now under the influence of intoxicating liquor? No Ves 3. Are you afflicted with a transmissible disease? 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 🗆 Yes 🕡 8. Are you able to support a family? No 🗆 5. Are you now under the influence of intoxicating liquor? No Yes 9. Are you likely to so continue? Yes No 🗆 10. Do you have minor children from one or more former marriages? No ☐ Yes ☐ (If yes, answer questions a, b, c) (a) List their full names, ages and addresses Address Residence of father (if deceased so state), Dame Name Age Occupation of father Thunling Liessna Race of father Birthplace of father (State or foreign country). 8. Full maiden name of mother Laula Peaul No 🗆 (b) Are you supporting or contributing to their support? Residence of mother (if deceased so state) Same (c) Are you complying with any court order or orders issued for their support? Yes | No | Occupation of mother Thusewife Bulg Birthplace of mother (State or foreign country) Vennessel State of Indiana, Birthplace of father (State or foreign country) Hus County of HENDRICKS 12. Full maiden name of mother. ... accessed Residence of mother (if deceased so state) Race of mother. Occupation of mother Birthplace of mother (State or foreign country) ss: I depose and state the information given in 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 , 1976 signs, state facts which render the consent of the other parent unnecessary... ... Clerk HENDRICKS Harvey Llen CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent signs, state facts which render the consent of the other parent unnecessary State of Indiana, HENDRICKS County of State of Indiana. County of HENDRICKS. Mother Signed. Subscribed and sworn to before me this..... COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the County County Court by written order issued 3 day wave and filed liel 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..... hereby certify that on the 26th day of June of Indiana dated the ... Be it further remembered, the following marriage certificate was filed in my office, to-wit:

1, Dale H. Beutler hereby certify at Whitestown , County of Boone State of Indiana, Groom Andrew John Clark of Hendricks County, State of Indiana and, Bride Patricia Gail Mitchell of Boone Lithe Clerk of the Circuit Court of HENDRICKS _____day of ______, 19 ______, 76 Signed Dated this.... Official Designation.

Signed ...

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

Dated this ...

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No	260
File_	
	1 3- 7/

Chap. 126, Ind. Acts 1905 HENDRICKS _County 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 Date of Birth Place of Birth (State or Place of Birth (State or foreign country Number of Previous Marriages... Previous Marital Status: Never Married Previous Marital Status: Never Married | Number of Previous Marriages. Death Divorce Annulment Death Divorce Annulment Last Marriage Ended By: White Negro Other (specify)... Color or Race White Negro Other (specify).... Usual Occupation Color or Race Date of birth verified by : Birth Cerp. Judicial Decree Usual Occupation Other (Specify) Date of birth verified by: Dirth Cert. Dudicial Decree Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes 🗌 Other (Specify) HCH Suntification 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 county asylum or home for indigent persons? An Imbecile? No Yes Yes 🗌 If answer to 3 is "yes" has the cause of such condition been removed? No 🗌 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 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? Yes 🗌 No Yes No D Yes 🗌 7. Are you now under the influence of a narcotic drug? No 🕡 4. Are you related to the groom closer than second cousin? No Yes Yes 🖵 No 🗆 8. Are you able to support a family? 5. Are you now under the influence of intoxicating liquor? No Yes Yes 🔽 9. Are you likely to so continue? No 🗆 6. Are you now under the influence of a parcotic drug? 10. Do you have minor children from one or more former marriages? No Yes (If yes, answer questions a, b, c) William 7. Full name of father (a) List their full names, ages and addresses Residence of father (if deceased so state) Dubmington Name Address Occupation of father Alts Race of father Lill Birthplace of father (State or foreign country). 8. Full maiden name of mother // /aftl (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 🗌 Occupation of mother... 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). County of HENDRICKS 12. Full maiden name of mother..... Residence of mother (if deceased so state) ... Occupation of mother .. Birthplace of mother (State or foreign country).... Subscribed and sworn to before me this... State of Indiana. Clerk HENDRICKS. Signed Charly New Address R 2 Elay CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent 11. Harven ClerkHENDRICKS 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 unnecessar State of Indiana, State of Indiana, County of HENDRICKS County of HENDRICKS .. Mother Subscribed and sworn to before me this..... 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 named parties, the County Court by written order issued 3 day wawer and filed flashed 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 Circuit Court of Indiana dated the 35 day of June , 19.76, authorizing the joining together as husband and wife Charles B. Brock Irene Chasteen Irene Chasteen Be it further remembered, the following marriage certificate was filed in my office, to-wit: Rev. R. S. Yeats hereby certify that on the 28 day of June at Danville , County of Hendricks, Hendricks County, State of Indiana and, Bride Irene Chasteen of Hendricks County, State of Indiana,

Filed and recorded in accordance with the laws of the State of Indiana this 29th day of June

Signed....

Official Designation.....

Minister

Signed Glen M Harvey Clerk

HENDRICKS Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

	861
F	ile Bk 37
-	Date of Application
ated	6.25.76

HENDRICKS _County MALE Medical Examination Report Dated 6-25-76 FEMALE Medical Examination Report D Name of Physician Glenn W. Baker 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 states 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 Negro Other (specify)... Color or Race Last Marriage Ended By: Death | Divorce | Annulment | Usual Occupation Negro | Other | (specify)... Date of birth verified by : | Birth Cert. Judicial Decree DOther (Specify) Selective Servers #24-7-48-236 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? Yes 🗌 1. Are you now or have you been adjudged, diagnosed or considered as: 3. Are you now or have you been within five (5) years an inmate of a home for indigent persons? An Imbecile? No Yes If answer to 3 is "yes" has the cause of such condition been removed? No 🗆 Yes 🗌 Of Unsound Mind? 4. Are you afflicted with a transmissible disease? No D Yes 🗌 2. Are you under guardianship as a person of unsound mind? 5. Are you related to the bride closer than second cousin? 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 Yes 🗗 No 🗆 No Yes 10. Do you have minor children from one or more former marriages? Yes 🗌 No D Yes (If yes, answer questions a, b, c) (a) List their full names, ages and addresses Age Address (b) Are you supporting or contributing to their support? Yes 🗌 No 🗆 (c) Are you complying with any court order or orders issued for their support? Yes 🗌 No 🗆 11. Full name of father China Residence of father (if deceased so state) Mooresvelle Birthplace of mother (State or foreign country) ... Occupation of father Maintenance State of Indiana. Birthplace of father (State or foreign country) Thoulet 12. Full maiden name of mother Violet & Ken Residence of mother (if deceased so state) ... Moore swells Occupation of mother Race of mother... Birthplace of mother (State or foreign country) Monland State of Indiana. ss: I depose and state the information given 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 Subscribed and sworn to before me this 29 signs, state facts which render the consent of the other parent unnecessary. Clerk HENDRICKS Glen M Hanvery 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 Father Subscribed and sworn to before me this COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the HENDRICKS 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... .., 1976..., authorizing the joining together as husband and wife Susan J. McNelly of Indiana dated the Michael J. Jerin day of hereby certify that on the 10th day of July Be it further remembered, the following marriage certificate was filed in my office, to-wit: _atBrownsburg______, County of Hendricks____, State of Indiana, Groom Michael J. Jerin Hendricks County, State of Indiana
and, Bride County, State of Indiana Clifford L. Carmichael Hendricks County, State of Indiana Clifford L. Carmichael United Methodist Minister July Dated this. Official Designation ... Filed and recorded in accordance with the laws of the State of Indiana this Circuit Court Signed ..

HENDRICKS.

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

Indiana State Board of Health under Authority Chap. 126, Ind. Acts 1905 HENDRICK	County 6-30-76
	Date of Application
MALE 1- 71- 76	FEMALE Medical Examination Report Dated 6-21-76
Medical Examination Report Dated Black M. H.	Name of Physician pmis Dlack M.W.
Name of Physician Amus Dealer The States The	
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 Middle Last
Name First Middle Mast	Date of Birth Month Day Year
Date of Birth Month Day Year 953	March 4 1954
Place of Birth (State or foreign country)	Place of Birth (State of) foreign equatry)
Residence Address Street or R. R. City County	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 Annulment	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	
Usual Occupation Suptems analises	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation / gne
☐ 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 \to	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county asylum or	An Imbecile? No Yes
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind? No TYes
4. Are you afflicted with a transmissible disease? No Yes No Yes No Yes No Yes Yes	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? No Yes 4. Are you related to the groom closer than second cousin? No Yes Yes Yes Yes
8. Are you able to support a family? Yes No	4. Are you related to the groom closer than second cousin? No P Yes 5. Are you now under the influence of intoxicating liquor? No P Yes
9. Are you likely to so continue? Yes ☑ No ☐ 10. Do you have minor children from one or more former marriages? No ☐ Yes ☐	6. Are you now under the influence of a narcotic drug? No Ves
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father Dennand C. Malonsey
Name Age Address	Residence of father (if deceased so state) Dalla Malla Malla State Dalla Malla Malla Malla State Dalla Malla
	Occupation of father AMMA Race of father Race
	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 Angelia
their support? Yes No	Residence of mother (if deceased so state) Race of mother WA
Residence of father (if deceased so state)	A Linear
Occupation of father Addition Race of father with	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country)	State of Indiana, Sa: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother. I strue Olinizate	County of
Residence of mother (if deceased so state)	Signed Matheway Te. Malorey
Occupation of mother Race of mother Birthplace of mother (State or foreign country)	New Address 936 Westbrooke Way Abelins, Menn
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this John day of January 19 Me
County of HENDRICKS ss: in this application is true and correct.	Jen M. Plandef Clerk HENDRICKS Circuit Court
New Address 936 West Bracke WAY HOKINS MINN	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 736 WesTBRacke WAY Hopkin Minn Subscribed and sworn to before me this 30 day of June 1976	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Glew M. Harwif ClerkHENDRICKS 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 ofHENDRICKS
County of HENDRICKS	SignedFather
Signed Father Signed Mother	SignedMother
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of
	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	OT A
County	T. A marriage license having been refused to the above named parties, the purt by written order issued
inauthorizes and directs the issuance of	of a marriage license to the above named parties
RETURN OF MARRIAGE LICENS	E AND MARRIAGE GERMANGATE
The state of the s	and insurance of the termination of the County
Donald J. Giacchetti	nse issued by the clerk of the HENDRICKS Circuit Court , 19.76 , authorizing the joining together as husband and wife and Martina Eileen Maloney office, to-wit:
Be it further remembered, the following marriage certificate was filed in my o	office, to-wit:
I, Robert J. Gilday	hereby certify that on the 10th day of July ,
State of Indiana, Groom Donald J. Giacchetti	hereby certify that on the 10th day of July at St. Malachy Church, B'by County of Hendricks, of Cook County, State of Illinois
and, Bride Martina Fileen Maloney	of County, State of Illinois
were by me united in marriage as authorized by a marriage license issued for County.	Tendricka
County. Dated this 10th day of July , 19.7	that purpose by the Clerk of the Circuit Court of
aay of July , 197.	Signed Robert J. Gilday
Filed and never 1 1	Signed Robert J. Gilday Official Designation Assoc. Pastor, St. Malachy Church
Filed and recorded in accordance with the laws of the State of Indiana this	13 day of July 19 7.6
	Signed Den M. Harvey Clerk
	HENDRICKS Circuit Court

APPLICATION FOR MARRIAGE LICENSE

No. 263
File 37

HENDRICK	S County File 37
MALE Medical Examination Report Dated 6-12-76	FEMALE Date of Application
Name of Physician Thomas a. Facochi	Medical Examination Report Dated
AUTOTIONS MUST BE ANSWERED, Chapter 196 K. H.	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)". MALE APPLICANT	ement—Whoever procures the issuance of
MALE APPLICANT	
Name Thomas Middle Last	Name FEMALE APPLICANT
Date of Birth Month Day Year	Middle Last
Place of Birth (State of Greign country) 29 1940	Date of Birth Month Day Year
Suchmond India.	Place of Birth (State or foreign country)
Residency Address Street of R. M. City County State	Residence Address Street or R. R. City County
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different
Last Marriage Ended By : Death Divorce D Annulment D	The state of the s
	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Dther specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation C. G. L.	Color or Page
Date of birth verified by Birth Cart. Juncia Decree Bureau ef vetal	Name Negro Other (specify)
Other (Specify) Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation
An Imherile No No Yes	Date of birth verified by: Birth Cert. Judicial Decree
2. Are you under guardianahip as a person of ansound mind? No Pr Yes C	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: 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	2. Are you under guardianship as a person of unsound mind? No Yes
4. Are you now under the influence of intextesting liquer? No Z Yes	3. Are you afflicted with a transmissible disease? No \(\subseteq \text{Yes} \subseteq \)
7. Are you now under the influence of a narcotic drug? No Yes No No	4. Are you related to the groom closer than second cousin? No No Yes
9. Are you likely to so continue? Yes P No	5. Are you now under the influence of intoxicating liquor? No \(\subseteq \text{Yes} \subseteq
10. Do you have minor children from one or more former marriages? No P 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 Address	7. Full name of father.
Name America	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
(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
11. Pull name of father to allege and the second	Birthplace of mother (State or foreign country)
Residence of tether (If deceased so state) A.A	Birthplace of mother (State or foreign country)
Occupation of tather	State of Indiana, State of Indiana, I depose and state the information given in this application is true and correct.
Birtholace of father (State or fureign country). Shall be surber 12. Full maight name of mother Darbara Ellen Serber	County of HENDRICKS
Residency of mother (if deceased so state) ARI Millon, and.	Signed
Occupation of mother Hassestill Race of mother 94	New Address.
Birmplace of mother (State or foreign country) Indiana	Subscribed and sworn to before me thisday of
State of Indiana.	Clerk HENDRICKS Circuit Court
Cours of HENDRICKS and in this application is true and correct.	THE RESERVE OF THE PARTY OF THE
Signed X of James C. Maring	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address. A A A Marie Spatial (13)	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 Circuit Court	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	
Transfer the Consent of the Consent	Total Indiana
	State of Indiana, County of
State of Indiana.	SignedFather
County of HENDRICKS	Mother
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 Cherk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	art. A marriage license having been refused to the discussion and filed burt by written order issued
HENDRICKS County	a marriage license to the above human
authorizes and direct to	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
RETURN OF MARRIAGE Lice	nse issued by the clerk of the together as husband and wife
Be It Remembered, there was filed in my office a marriage lice of Indiana dated the	, 19, authorizing the joining vo
of Indiana dated theday of	ind
Be it further remembered, the following marriage certificate was filed in my	nd
one thousand nine hundred and	County, State of
one thousand nine hundred and State of Indiana, Groom	County, State of HENDRICKS
State of Indiana, Groom	that pur poor - o
day ofday	Official Designation , 19
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation
Filed and recorded in accordance with the laws of the State of Indiana this	Signed
The state of the s	MCNUMWW

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No	26	, 4	
File			
		4	

A CONTROL OF THE PARTY OF THE P

	Date of Application
MALE	FEMALE 7 1 7 6
Medical Examination Report Dated 7-1-76	Medical Examination Report Dated
Name of Physician seph C. Kerlin M.C.	Name of Physician Asseption C. Rerlen
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state of the hypothesis of the hypothes	ment—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 domais (FEMALE APPLICANT
MALE APPLICANT	Name First Middle Last
Name First Middle Can Room	Qudith Mouris Leters
Date of Birth Month Day Year	Date of Birth Month Pay Year
Place of Birth (State or)foreign country)	Place of Birth (State or foreign country)
Indianapolis In. State	Residence Address Street or R. R. City County State
Residence Address Street or R.R. City County State	806 Thorndale Indpls. In.
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different
1914	Previous Marital Status: Never Married Number of Previous Marriages
Last Marriage Ended By: Death Divorce Annulment Marriage Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment 7972
(1)	Color or Race White ☑ Negro □ Other □ (specify)
Usual Occupation Principal	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Stacher
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 □ Yes □	Other (Specify) 59 892
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?	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 ☐ 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 E 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 -
8. Are you able to support a family? 9. Are you likely to so continue? Yes 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 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 Bullet Sy. Worris
Name Age Address	Residence of father (if deceased so state) Alclased
	Occupation of father
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother Mildred P. Edwards
(b) Are you supporting or contributing to their support? Yes ☐ No ☐	
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state)
11. Full name of father Alexbert & Suckson	Occupation of mother Race of mother Race of mother
Residence of father (if deceased so state) MCLASIA	Birthplace of mother (State or foreign country) Dond Co - Sch
Occupation of father	
Birthplace of father (State or foreign country) Snolpana)	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 alle P Ross	County of the Co
Residence of mother (if deceased so state) 1400 D Camondoon (w	Signed It dith W. Fills
Occupation of mother Retistal Race of mother.	New Address 23 Eldin Dr. Mainfield
Birthplace of mother (State or foreign country) Andiana)	Subscribed and sworn to before me thisday of
State of Indiana, I depose and state the information given	
County of HENDRICKS in this application is true and correct.	Clerk HENDRICKS
Signed Signed	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address.	al delicity.
Subscribed and sworn to before me thisday of, 19,	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
ClerkHENDRICKS 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	
	<u>U</u>
	State of Indiana,
State of Indiana,	County ofHENDRICKS
County of HENDRICKS	Signed Father
SignedFather	Signed
Signed	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me thisday of, 19	day of19
Clerk	Clerl
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, the
	ourt by written order issued
in authorizes and directs the issuance of	
RETURN OF MARRIAGE LICENS	E AND MARRIAGE CERTIFICATE
t Indiana dated the	use issued by the clerk of the HENDRICKS Circuit Cour
R. Dale Jackson	Judi the Domai's Patrice Research and wife
of Indiana dated the day of a R. Dale Jackson a Be it further remembered, the following marriage certificate was filed in my of I, Rev. Charles R.E. Mueller	nd. Oddien Dollis Peters ffice, to-wit:
I, Rev. Charles R.F. Mueller	hereby certify that on the 9th day of Till se
one thousand nine hundred and 76	a2837 E. New York Stan Church Marion
State of Indiana, Groom R. Dale Jackson	of Hendricks a Taliana
and Bride Judith Dorris Peters	Marion County, State of Indiana County, State of Indiana
were by me united in marriage as authorized by	County, State of Indiana
Country.	that purpose by the Clerk of the Circuit Court ofHENDRICKS
Dated this 9th day of July 10.76	
	Signed Rev. Charles R.E. Mueller
	Official Designation Minister
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Minister July 76
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Rev. Charles R.E. Mueller Official Designation Minister July ,19 76 Signed Alem M. Harvey Clerk

Form Proceed of Indiana State Board of Health under Authority	APPLICATE OF	FINDIANA	
Health under Authors (Chap. 126, Ind. Acts 1905	APPLICATION FOR	MARRIAGE TYON	No. 265
	HENDRIC	VE LICENSE	File Bb 37
MALE		County	July 2 1976
Medical Examination Report Dated Name of Physician J. A. M	6.29.76 rukhta in a	FEMALE Medical Examination Report Dates	O Date of Application
	This	Name of Physician A. Q.	0-29-76
ALL QUESTIONS MUST BE ANSWERED. Chapter tion or pretense shall be fined in any sum not exce MALE APPLI Name First	126, Indiana Acts 1905 prescribes "False sta	atement—Whoever programs at	nukhtar MD
MALE APPLI	CANT	procures the issuance of a license	to marry by any false statement, representa-
Sed 4	liddle Last	Name First	PPLICANT
Date of Birth Month	Day Year	Date of Pill Cathy	Middle () Last
Place of Birth (State or foreign country)	28 1949	Thomas and the same of the sam	Day Year
Sanidence Address Street of R. R.	City County State	(State or foreign country)	31 1955
145 De malmet Jo	mestour Boons Onl	Residence Address Street or R. R.	Gity County State
Previous Marital Status: Never Married Name	ber of Previous Marriages	Maiden Name if Different	1. Ligton Herducks Ind.
Last Macriage Ended By : Death Diverg	Annulment Oct 1975	Previous Marital State	
Color or Race White Negro Other		Last Want w	Number of Previous Marriages
Usual Occupation Harris & Cantra	tz was	Last Marriage Ended By: Death D	ivorce Annulment
Date of birth verified by Birth Cert, Judicia	al Decree	Color or Race White Negro O	ther (specify)
Socher (Specify) Living Tolker	720 - 10331	Usual Occupation Be ;	
1. Are you now or have you been adjudged, diagnos An Imberile?	ed or considered as:	Date of birth verified by: Birth Cert. Ju	dicial Decree
Of Unsound Mind? 2. Are you under guardianship as a person of unso	sund mind? No E Yes	Other (Specify)	
 Are you now or have you been within five (5) home for indigent persons? 	years an inmate of a county as fum or	Are you now or have you been adjudged, dia An Imbecile?	gnosed or considered as:
If answer to 3 in "yes" has the cause of such con 4. Are you afflicted with a transmissible disease?	dition been removed? No Yes	Of Unsound Mind?	No Yes
5. Are you related to the bride closer than second e	No P Yes	2. Are you under guardianship as a person of	No ☐ Yes ☐ Unsound mind? No ☐ Yes ☐
 Are you now under the influence of intextenting. Are you now under the influence of a narcotic 	g liquor ? No 🖸 Yes 🗆	3. Are you afflicted with a transmissible diseas	
8. Are you able to support a family?	Yes Yes No	4. Are you related to the groom closer than se	
 Are you likely to so continue? Do you have minor children from one or more for 	rmer marriages? No Yes No Yes	5. Are you now under the influence of intoxica	
Of yes, answer questions a, b, c) (a) List their full names, ages and addresses	AND THE RESIDENCE OF THE PARTY	6. Are you now under the influence of a narco	otic drug? No Yes
Name J. Ag	Address)	7. Full name of father	Lister On D
Braden Kager Smith	3 Legton Und.	DH. Y	Naker-Race of father Ud
		Birthplace of father (State or foreign count	(D++1 , 1)1
(b) Are you supporting or contributing to their	support? Yes No No	8. Full maiden name of mother & Line	lle I Gravier
(c) Are you complying with any court order or their support?		Residence of mother (if deceased so state).	Liston, Ind
11. Pull name of tather KA best M.	Smith 1	Occupation of mother Assesses	ARRACE of mother W
Residence of father (if deceased so state)	Rungwille, And	Birthplace of mother (State or foreign count	try) Michigan
Occupation of tather I Aboutenance	Race of father W	The state of the s	
Birthplace of father (State or foreign country).	Debanon, and	State of Indiana, County of HENDRICKS 88	I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Jakkill	ummings	and control of	uni L Stewart
	desared	Signed X (CAA)	It pelinet town Iro
Occupation of mother Birthplace of mother (State or foreign country).	Nallarelle God	New Address Subscribed and sworn to before me this	day of July , 19.74
State of Indiana,	I depose and state the information given	Subscribed and sworn to belove the Harvey	Clerk HENDRICKS Circuit Court
County of HENDRICKS	in this application is true and correct.		J. Ole L.
Signed X	2 79	CONSENT OF PARENTS, PARENT OR GUAR	RDIAN
New Address	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	We, the parents, of this applicant hereby give of	
Subscribed and sworn to before me this.	Clerk HENDRICKS Circuit Court	signs, state facts which render the consent of t	he other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIA			
We, the parents, of this applicant hereby give conse			
signs, state facts which render the consent of the o	ther parent unnecessary		
	1	State of Indiana, ss:	
	ALIENSE AND A	County of HENDRICKS	A STATE OF THE PARTY OF THE PAR
State of Indiana. County of		Signed	Father
Signed	Father	Signed	Mother
Signed	Mother	Subscribed and sworn to before me this	day of, 19
Subscribed and sworn to before me this.	day of		Clerk
		license having been refuse	ed to the above named parties, the
COMPLETE IF MARRIAGE LICENSE	ISSUED BY ORDER OF COUR	T. A marriage license having been relusted urt by written order issued	and filed
HENDRICKS County.	Col	f a marriage license to the above named pa	arties.
2	1 11-eats the iggilance of	I d Illus	
R	RETURN OF MARRIAGE LICENSE	se issued by the clerk of the	Oricks Creati Court
Be It Remembered, there w	as filed in my office a marriage them	, 1976, authorizing the jo	t together as husband and asy
Indiana dated the	day of		
Be it further remembered, the following me	arriage certificate was filed in my of	ffice, to-wrt:	lay of July Links
1, Steven & Kar	de la	Liston	, County of Menanica,
one thousand nine hundred and	16 1 11	at Liston Courses Courses Courses Courses	nty, State of Indiana,
State of Indiana, Groom Jeddy	Loger Smith	Hendricks Con	nty, State of HENDRICKS
and, Bride	Stellward war igened for t	that purpose by the Clerk of the Circuit Co	ure of
y me united in manuface as suthering	ed by a marriage		W
Date	Julian Balance	Signed L	
Filed and recorded in accordance with the l		Official Designation Que	lefo, 19 7/6
Filed and	the State of Indiana this	Official Designation 2 0 day of July Signed Illem M. July WENDRICKS	ef Clerk
and recorded in accordance with the l	aws of the State of	Signed	Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No. 266

Jul	ur	a	,	1	9	7	6
Date	of	Anı	oli	ca	tio	n	-

Chap. 126, Ind. Acts 1905 HENDRICK	S County Date of Application
	FEMALE 7-1-76
MALE Medical Examination Report Dated 7-14-76	Medical Examination Report Dated
11/100 Malina da Milto	Name of Physician Que 20. Clare W. S.
Traine of the state of the stat	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 prescribed tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	FEMALE APPLICANT
MALE APPLICANT	Name First Middle Last',
Name Colland Ray Middle Ray McDonald	Date of Birth Month Day Year
Date of Birth Day Year	Zet. 16 1976
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) Wether men Hosp. Leberg Boon Ind.
Residence Address Street or R. R. City County	Residence Address Street or R. R. Plane County State
2232442 Mormandy, Morrance Cary.	Maiden Name if Different
Previous Marital Status: Never Married Námber of Previous Marriages	Previous Marital Status: Never Married Number of Previous Marriages
Last Marriage Ended By: Death Divorce Annulment D	
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation Thuck & night	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Waitres
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) Hosp Cut - A.M. Welst. R.N.
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?	An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind? No W Yes No W
5. Are you related to the bride closer than second cousin? No V 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 Yes
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a narcotic drug? No Yes Yes	4. Are you related to the groom closer than second cousin? No Yes
8. Are you able to support a family? Yes No	5. Are you now under the influence of intoxicating liquor? 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 X Yes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father Therey Joseph Wick
Name Age Address	Residence of father (if deceased so state) 435 Aula 51Pl
Mike anthony 2 Carson, Calif	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 Septime & won often
(c) Are you complying with any court order or orders issued for their support? Yes \sum No \subseteq	Residence of mother (if deceased so state) 435 Hall 1
11. Full name of father Ray 7. Mc Wonald	Occupation of mother School Race of mother
Residence of father (if deceased so state) Wilmangton, alif	Birthplace of mother (State or foreign country)
Occupation of father Little Race of father Little	
Birthplace of father (State or foreign country)	State of Indiana, County ofHENDRICKS
12. Full maiden name of mother Addle for Cullist	Vitte & Thickt
Residence of mother (if deceased so state)	Signed fine Man State of the St
Occupation of mother Race of mother	New Address of Made , all 7 (a)
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of 19 19
County of HENDRICKS Ss: I depose and state the information given in this application is true and correct.	Elle M. HENDRICKS Circuit Court
Signed Wyse Moland	
New Address 232 /2 Mormandie Dlud.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of 1976	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Sun Manual ClerkHENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GWARDIAN	
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 ofHENDRICKS
County of HENDRICKS	SignedFather
Signed Father	SignedMother
Signed	Subscribed and sworn to before me thisday of
Clerk	Clerk
COMPLETE IN MADRIAGE TRANSPORT	
	RT. A marriage license having been refused to the above named parties, the
	ourt by written order issued
inauthorizes and directs the issuance	
Be It Remembered, there was filed in my office a manife a live	SE AND MARRIAGE CERTIFICATE
of Indiana dated the	nse issued by the clerk of the HENDRICKS Circuit Court
Clifford Day me Donald	and Vinatta See Turight
be to factor telemotred, the following marriage certificate was filed in my	office, to-wit:
one thousand wine had a said of	hereby certify that on the 16 day of July
one thousand nine nunared and	1 LA
State of Indiana, troom (1111111777)	
of	Come de de la coma dela coma dela coma de la coma de la coma de la coma de la coma dela coma de la coma dela co
County.	that purpose by the Clerk of the Circuit Court ofHENDRICKS
Dated this 16 day of July , 19 7	16.
	Signed S. Dayle Cain 1000
Filed and recorded in accordance with the laws of the State of Indian	Official Designation Minister Ch. of Christ Manilla
Filed and recorded in accordance with the laws of the State of Indiana this	day of July 1976
	Signed Glen m Thanvey Clerk

-----HENDRICKS

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 ames Black m 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-FEMALE APPLICANT Name Date of Birth 9 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 Manager Usual Occupation Color or Race White Negro Other (specify). Date of birth verified by : Dirth Cept. Dudicial Decree 60421 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 | Yes | 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 county asylum or 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 P Yes 4. Are you afflicted with a transmissible disease? No D 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? No Yes 3. Are you afflicted with a transmissible disease? No Yes No Yes No 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? No. 5. Are you now under the influence of intoxicating liquor? 9. Are you likely to so continue? Yes No 🗆 No B 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 Address Occupation of father ... Istamant Buc. Race of father Wh Birthplace of father (State or foreign country) ____ (hinge anne Viterince (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) the linguistic Va Yes No No Occupation of mother Waltruss aurnhammer! Birthplace of mother (State or foreign country) Ismansullania Residence of father (if deceased so state) 736 N. Fatton Que Occupation of father Kettred State of Indiana, Birthplace of father (State or foreign country) Derlin County of HENDRICKS 12. Full maiden name of mother Wanda Katalala Residence of mother (if deceased so state) 736 m Pathn) Occupation of mother J Holl Show for Birthplace of mother (State or foreign country) CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent 19.76 Subscribed and sworn to before me this. J. 7. signs, state facts which render the consent of the other parent unnecessary. . Clerk HENDRICKS Den m. Marver 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. Mother County of HENDRICKS 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. HENDRICKS 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...... ..., 19.76., puthorizing the joining together as husband and wife I and Sylvia Sandra Fair of Indiana dated the 27 Be it further remembered, the following marriage certificate was filed in my office, to wit: hereby certify that on the 3/st day of at Bisunsburg y Kinsaid Smith aunhammer of Hendricks County, State of Dair of Hendricks 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. State of Indiana, Groom Kaymond County. Dated this. Official DesignatiClerk Filed and recorded in accordance with the laws of the State of Indiana thisCircuit Court Signed.

HENDRICKS.

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No. 268
File Bk 37
July 2, 1976

HENDRICK	County Date of Application
MALE	FEMALE Medical Examination Report Dated 7-2-76
Medical Examination Report Dated 7-2-76	
Name of Physician Joseph C. Kerlin	Name of Physician Joseph C. Arley
LL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False states 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
ame First Middle Last	Name First, Middle Last
ate of Birth Month Day Year	Date of Birth Month Pay Year 1947
lace of Birth (State or foreign country)	Place of Birth (State or foreign country)
Proctoc West Viginia Country State	Residence Address Street or R. R. City County State
5301 Falcon Lne maple. Manior Ind.	Maiden Name if Different
revious Marital Status: Never Married Number of Previous Marriages	
ast Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
olor or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
sual Occupation Tanna of his See knieum	Color or Race White Negro Other (specify)
ate of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Jona Lev
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 Unequal Mind? 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?	An Imbecile? Of Insound Mind? No Yes
If answer to 3 is "yes" has the cause of such condition been removed? No Yes No Yes No Yes No Yes	Of Unsound Mind? No Yes 2. Are you under guardianship as a person of unsound mind? No Yes Yes Yes
i. Are you related to the bride closer than second cousin?	2. Are you under guardianship as a person of dissolid limit. 3. Are you afflicted with a transmissible disease? No Yes
3. Are you now under the influence of intoxicating liquor? No Yes No Ye	4. Are you related to the groom closer than second cousin? No Yes
3. Are you able to support a family?	5. Are you now under the influence of intoxicating liquor? No Yes
O. Are you likely to so continue? O. 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 Wonald Leslie Honeas
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Buck Master Race of father W
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother flamenta fan fatons
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state) Manuelly Sho
1. Full name of father Robert W. & Swards	Occupation of mother Flourita Race of mother W
Residence of father (if deceased so state) Wellase	Birthplace of mother (State or foreign country)
Occupation of father Race of father Race of father	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.	Simult Donita O. Hogen
Residence of mother (if deceased so state) Thocha West Us. Occupation of mother Race of mother W.,	New Address 5301 FALCON LANT INL
Birthplace of mother (State or foreign country) West Viginia	Subscribed and sworn to before me this a day of July , 19.76
State of Indiana, lags. I depose and state the information given	Ha you (1)
County of HENDRICKS in this application is true and correct.	Clerk HENDRICKS Circuit Court
New Address 520 FALCON IN JINDPLS IND	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this. 2 day of 1976	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Alex M Nawes ClerkHENDRICKS 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	
gns, state facts which render the consent of the other parent unnecessary	
	State of Indiana, County ofHENDRICKS
tate of Indiana,	
Signed Father	SignedFather
Signed	Signed Mother
ubscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of
	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COLUMN	RT. A marriage license having been refused to the above named parties, the
HENDRICKS County Co	ourt by written order issued
authorizes and directs the issuance of	of a marriage license to the above named parties.
	SE AND MARRIAGE CERTIFICATE
We It Remembered, there was filed in my office a marriage licer	nse issued by the clerk of the HENDRICKS Circuit Court
f Indiana dated the	7/2
Be it further remembered the following	and forts for the joining together as husband and wife office, to-wit:
	hereby certify that on the 10th day of July , at Danville , County of Hendricks ,
dute of Indiana, Groom Outil wayile indivations	of Marion
nd, Bride Donita Joy Honey	Hendricks County, State of Indiana
vere by me united in marriage as authorized by a marriage license issued for	that purpose by the Clerk of the Circuit Court of HENDRICKS
County. 10th July 7	6
day of, 19,	Signed Dr. Joseph D. Stump
	Signed Dr. Joseph D. Stump Official Designation Pastor
'iled and recorded in accordance with the laws of the State of Indiana this	13th day of July ,1976
	Signed Ylen m Harvey Clerk
	Otto

Dated this.

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

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1906 HENDRICKS County ly 2, 1976 MALE Medical Examination Report Dated Date of Application FEMALE Medical Examination Report Dated_ Name of Physician Master 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 Martin FEMALE APPLICANT Paral Place of Birth (State Previous Marital Statuss Never Married D 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 Decupation White Negro | Other | (specify) Color or Race Date of birth vertified by: Defirth Cart. Dudicial Decree k-typist Usual Occupation Are you now or have you been adjudged, diagnosed or considered as: Date of birth verified by: Birth Cert. | Judicial Decree Yes 🗌 Of Unsound Mind? 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: 2. Are you now or have you been within five (5) years an immate of a home for indigent persons? An Imbecile? No Yes If answer to 1 is "yes" has the cause of such condition been removed? Yes [No 🗆 Of Unsound Mind? No Yes 4 Are you afflicted with a transmissible disease? No DY Yes 🗆 2. Are you under guardianship as a person of unsound mind? 1. Are you related to the bride closer than second cousin? No D Yes No Yes 4. Are you now under the influence of intexicating liquer? No B Yes 3. Are you afflicted with a transmissible disease? No 🛛 Yes 🗌 1. Are you now under the influence of a narcotle drug? No B Yes [4. Are you related to the groom closer than second cousin? No Yes I Are you able to support a family? Yes | No | 5. Are you now under the influence of intoxicating liquor? 3. Are you likely to so continue? Yes B No [No Yes 10. Do you have minor children from one or more former marriages? No Yes [Yes 🗆 Of yes, answer questions a, b, c) (a) List their full names, ages and addresses Residence of father (if deceased so state) Plann Age Address Occupation of father Meat Cutter Birthplace of father (State or foreign country). (b) Are you supporting or contributing to their support? Yes No No Residence of mother (if deceased so state) Planfield (c) Are you complying with any court order or orders issued for Yes | No | Occupation of mother Lester Birthplace of mother (State or foreign country) A lntucky State of Indiana, I depose and state the information given in this application is true and correct. County of HENDRICKS Residence of mother (if deceased so state) 1013 Jalleumenhy Occupation of mother Art Start A Sirthplace of mother (State or foreign country) West ... Clerk HENDRICKS State of Indiana, se: I depose and state the information given in this profication is true and correct. Lay I Basselos CONSENT OF PARENTS, PARENT OR GUARDIAN Now Address 1003 PALLEY VIEW DR #3 PLAINTIELD We, the parents, of this applicant hereby give consent for this marriage. If only one parent ___ 19/6 signs, state facts which render the consent of the other parent unnecessary. Mr /// Harvey Clark 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.-HENDRICKS County of ... State of Indiana. Signed. County of MENDRICKS Mother Father Signed. Mother Signed 19..... ibed 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 HENDRICKS Be It Remembered, there was filed in my office a marriage license issued by the clerk of the...., 1976, authorizing the joining together as husband and wife to wit: Jean Saskins of Indiana dated the Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the 2.3 at Glainfield , County of Hendries of Hundricks County, State of Ind Willow Laffin Gaskins of Gendricks County, State of And one thousand nine hundred and Official Designation Minister

day of

HENDRICKS.

Signed ...

.....Circuit Court

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

File. HENDRICKS County Date of Application

	Daye
ALE edical Examination Report Dated June 28/976 ame of Physician M-0. Scanaform	FEMALE Medical Examination Report Dated Name of Physician 7, Same

MALE Medical Examination Report Dated 28 1976	FEMALE Medical Examination Report Dated Jane 28, 1976
Name of Physician M - O. Sanaforn	Name of Physician M. J. Samoharn
	tatement—Whoever procures the issuance of a license to marry by any false statement, representa-
MALE APPLICANT	FEMALE APPLICANT
Name First Middle Last	Name Alisan Ann Manis
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 B. R. City County State	Residence Address Street or R. R. City County, State
R.R. 3 Box 129 Danville Hend. Ind.	Maiden Name if Different Drownsburg Hend. Ind.
Previous Marital Status: Never Married Marriages 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 Military	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Dudicial Decree	Usual Occupation Lales Clerk
1. Are you now or have you been adjudged, diagnosed or considered as:	Date of birth verified by: Birth Cert. Judicial Decree
An Imbecile? No ☐ Yes ☐	□ Other (Specify) 5 6 - 08 9 10 9
2. Are you under guardianship as a person of unsound mind? No Yes 3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No 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	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? Yes ☐ Yes ☐ 	3. Are you afflicted with a transmissible disease? No Yes
7. Are you now under the influence of a narcotic drug? No Yes S. Are you able to support a family? Yes No	4. Are you related to the groom closer than second cousin? No Yes
9. Are you likely to so continue? Yes No	5. Are you now under the influence of intoxicating liquor? 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)
The Tage Thurses	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 Sorothy M. Lawson
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for their support? Yes \Boxedow No \Boxedow	Residence of mother (if deceased so state)
11. Full name of father Francial Westrick	Occupation of mother Housivife A Race of mother w
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Penn Central Race of father W	State of Indiana.
Birthplace of father (State or foreign country) Mussauri 12. Full maiden name of mother Maria K. Stuemel	County ofHENDRICKS. Sa: I depose and state the information given in this application is true and correct.
Residence of mother (if deceased so state)	XSigned alison a Maxis
Occupation of mother Housewife Rage of mother w	
Birthplace of mother (State or foreign country). Osk.	New Address. Subscribed and sworn to before me this 2 day of July 1976.
State of Indiana, County of HENDRICKS Ses: I depose and state the information given in this application is true and correct.	
Signed anton or, westrich	Alex M. Harry Clerk HENDRICKS Circuit Court
New Address	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this. 2 day of July 176	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
ClerkHENDRICKS 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 other of the other parent unnecessary.	
	State of Indiana,
State of Indiana,	County ofHENDRICKS ss:
County of HENDRICKS	SignedFather
Signed Father Signed Mother	Signed
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 COLU	RT. A marriage license having been refused to the above named parties, the
County	ourt by written ander in and
in authorizes and directs the issuance	of a marriage license to the above named parties
RETURN OF MARRIAGE LICENS	E AND WARDLACK CERTIFICATION
to a filed the my office a marriage lice	nse issued by the clerk of the HENDRICKS Circuit Court
t any of fully	19.76 guthorizing the injuring together as his hand and wife
Be it further remembered, the following marriage certificate was filed in many	ind Mison Inn Manie
1, Jerry J. Rash	hands we see a see of
/ / /	
County.	that purpose by the Clerk of the Circuit Court of
Dated this 24 day of July , 197	6.
	Signed Jerref L. hash
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Minister
of Induced this	Signed Sless M. Harrier Seley , 19 76.
	Signed Silm III Harvey Clerk

HENDRICKS.

...Circuit Court

..Clerk

Circuit Court

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

MALE

Name of Physician___

Last Marriage Ended By:

Date of birth verified by : Other (Specify).

Of Unsound Mind?

8. Are you able to support a family? 9. Are you likely to so continue?

(If yes, answer questions a, b, c)

Color or Race

Medical Examination Report Dated_

Irving

MALE APPLICANT

Death Divorce Annulment

Birth Cert. Judicial Decree Vital State

Age

ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescrittion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500)

Previous Marital Status: Never Married W Number of Previous Marriages

1. Are you now or have you been adjudged, diagnosed or considered as:
An Imbecile?

3. 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 removed?

10. Do you have minor children from one or more former marriages?

(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for their support?

12. Full maiden name of mother Saphile Mesidence of mother (if deceased so state)

Residence of father (if deceased so state) Slainfield

Glen M. Harvey Clerk HENDRICKS

We, the parents, of this applicant hereby give consent for this marriage. If only signs, state facts which render the consent of the other parent unnecessary.

COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER

Be it further remembered, the following marriage certificate was Sev Dillon La

were by me united in marriage as authorized by a marriage license

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

9 day of

Be It Remembered, there was filed in my office a m

....authorizes and directs th RETURN OF MARRIAG

HENDRICKS County....

mark

State of Indiana, Groom Mark allen and, Bride Karen S.

one thousand nine hundred and.....

2. Are you under guardianship as a person of unsound mind?

4. Are you afflicted with a transmissible disease? 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?

(a) List their full names, ages and addresses

Occupation of father allesons Birthplace of father (State or foreign country).

Occupation of mother Sociality Birthplace of mother (State or foreign country)

CONSENT OF PARENTS, PARENT OR GUARDIAN

State of Indiana,

County of HENDRICKS.

of Indiana dated the

Dated this ...

Signed. Signed. Subscribed and sworn to before me this...

White Negro Other (specify)...

APPLICATION

TATE OF	INDIANA
FUR N	MARRIAGE LICENSE No. 27/
HENDRICK	County 7-2-76
HAT I	FEMALE Date of Application
	Medical Examination Report Dated 7-1-76
-	Name of Physician Irving Cohen
s "False stat	tement—Whoever procures the issuance of a license to marry by any false statement, representa-
HER	Division of a license to marry by any false statement, representa-
	Name First William
nero	Date of Birth Month See The A
	Place of Birth (State or foreign country) Day Year 22 1954
ate	Residence Address
d	R Clayfon State Maiden Name if Different Manual Clayfon State
	Traine if Different
Division of	Previous Marital Status: Never Married Marriage Number of Previous Marriages
	Last Marriage Ended By: Death Divorce Annulment
	Color or Race White V Negro Other (specify)
ties 8	(opens)
No could be	Usual Occupation Computer Date of birth verified by: Birth Cert. Judicial Decree Vital Statution
Yes Yes	Other (Specify)
Yes ylum or	1. Are you now or have you been adjudged, diagnosed or considered as:
Yes Yes	An Imbecile? No 1 Yes Of Unsound Mind?
Yes 🗆	2 Are you will be 1
Yes Yes	3. Are you afflicted with a transmissible disease?
Yes No	4. Are you related to the groom closer than second cousin?
No 🗆	5. Are you now under the influence of intoxicating liquor? No Yes
Yes 🗆	6. Are you now under the influence of a narcotic drug?
	7. Full name of father Sichard T. Kirk
	Residence of father (if deceased so state) and state and
	Occupation of father MANALAGA CAL Race of father S Birthplace of father (State or foreign country)
	8. Full maiden name of mother Lalyabeth M. Henshau
No 🗆	R 2 Bah 2 4 4 Residence of mother (if deceased so state) Sudplus, Ind.
No 🗆	Occupation of mother School Bus Race of mother 24
	Birthplace of mother (State or foreign country)
-	The same of the sa
	State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
entry	Signed X Karen Su Kirk
	DP1 Roy 69 Clauton In 4611
	New Address 2 day of July 1976
on given	Subscribed and sworn to before me this
correct.	- SIM Stury
	CONSENT OF PARENTS, PARENT OR GUARDIAN
19	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
19.7.6.	signs, state facts which render the consent of the other parent unnecessary
it Court	
e parent	
	Cut-of Indiana.
	State of Indiana, County of HENDRICKS ss:
	Signed
Father	Mother Signed
Mother	Subscribed and sworn to before me thisday of
19	Subscribed and sworn to be Clerk
Clerk	
F COUR	T. A marriage license having been refused to the above named parties, the
	. 'ttem onder ISSIEU
	of a marriage license to the above
LICENS	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court use issued by the clerk of the mental description of the count of th
riage licen	the AND MARKITACH HENDRICKS The see issued by the clerk of the HENDRICKS The see issued by the the HENDRICKS Th
ly	nd Karen Su Kerk
d in my	at Clainfield County, State of Indiana
	hereby certify that on the County of Jundrecks
	at Clainfield, County of Indiana of Nendricks County, State of Indiana,
200 M 20	of Chate of
of	that purpose by the Clerk of the Circuit Court of HENDRICKS
sued for	O Oil Lellin
, 19.76	Signed Sex Wellow aggist
The standards	Official Designation Minister July , 1976
	· · · · · · · · · · · · · · · · · · ·

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

NDRICKS County

No	2	72	
File			

...Circuit Court

HENDRICK	Date of Application
MALE Medical Examination Report Dated Qune 28, 1976	FEMALE Medical Examination Report Dated June 28, 1976
Name of Physician Robert Kirtley m. D.	Name of Physician Kobert W. Kirtley
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False statement of the company of th	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 live fluidied domain (FEMALE APPLICANT
Name First Middle Last	Name First Middle 14 Last
Date of Birth Months Day Year	Date of Birth Month Day Year
July 29 1953	Place of Birth (State or fopeign country)
Place of Birth (State or foreign country)	Gast Chicago and.
Residence Address Street or R. R. City County State	K = 2 Box 18 m. Warville, Ind
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different
Last Marriage Ended By: Death Divorce Annulment Jendrick	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 (0 + h and to 1)	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	- PD Al +
Other (Specify) Putnam Co. # 4/140-B.	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? No ☐ Yes ☐	Other (Specify) #1368
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?	An Imbecile? No Z 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 5	Of Unsound Mind? No Z Yes
5. Are you related to the bride closer than second cousin?	2. Are you under guardianship as a person of unsound mind? No 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 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 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 Arama, Esdward Stasek
Name Age Address	Residence of father (if deceased so state) 924 Main At Nyery
	Occupation of father attern To a Reflex 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 17 0mg when Blashy
(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 Wellert Burnett	Occupation of mother All Medical Race of mother
Residence of father (if deceased so state) Debadway Wan.	Birthplace of mother (State or foreign country)
Occupation of father MIMAN - Miss Race of father	State of Indiana, I depose and state the information given
Birthplace of father (State or foreign country) AMUCAGE 12. Full maiden name of mother Butha may ampheli	County ofHENDRICKS in this application is true and correct.
Residence of mother (if deceased so state)	Signed & Barbara a Stopet
Occupation of mother Housewell Race of mother	New Address 73 2 Boy 18 m Nandelle In
Birthplace of mother (State or foreign country) Kentucky	Subscribed and sworn to before me thisday of
State of Indiana, County of HENDRICKS Ss: I depose and state the information given in this application is true and correct.	Clerk HENDRICKS
Signedy Jun W. Durnett	
New Address RR Boy/8m Opnu, //e	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me thisday of	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
ClerkHENDRICKS 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	
signs, state the same trade to the same parent uniterestally	
	State of Indiana,
State of Indiana,	County ofHENDRICKS
County of HENDRICKS	Signed Fathe
Signed Father Signed Mother	SignedMothe
Subscribed and sworn to before me this	Subscribed and sworn to before me thisday of
Clerk	
COMPLETE IE MARRIAGE LICENSE ISSUED DY CORD	TDM A
HENDRICKS County OF COL	URT. A marriage license having been refused to the above named parties, the Court by written order issued
in authorizes and directs the issuance	e of a marriage license to the above named parties.
	ISE AND MARRIAGE CERTIFICATE
We It Remembered, there was filed in my office a marriage lie	cense issued by the clerk of the HENDRICKS Circuit Cour
of Indiana dated the day of the	, 19, authorizing the joining together as husband and wif
Be it further remembered, the following marriage certificate was filed in my	1 (7-4 64 - 1)
1, Sex Joseph Freak	hereby certify that on the 17th day of Cole
one thousand nine hundred and	at E get (bigger)
State of Indiana, Groom Jerrey W. Burnett	of Thendricks
and, Brute of of of	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 ofHENDRICKS
Dated this 17th day of July , 19 ,	76
, 19,	Signed Ser Jaseph Fleak
Filed and recorded in accordance with the	Official Designation Sastar
Filed and recorded in accordance with the laws of the State of Indiana this	
	Signed Sten M Starvell Clerk

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICK	County 7-1 7/
MALE 7 27	1-6-16
Medical Examination Report Dated 7-3-76	FEMALE Date of Application
Name of Physician way Haggard M. G.	Medical Examination Report Dated 7-3-76
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 of Physician Waved Haggard m. &
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
Name First Middle	PDMALD and false statement, representa-
Supplier pur Welson	Name First Middle
Date of Bitch 28 Year	Date of Birth Month Ann Scripment
Place of Birth (State or foreign country)	Place of Birth (State or (freign country)
Residence Address Street or R. R. City County State	Residence Address Street & Police In
Previous Marital Status: Never Married Number of Previous Marriages	27/9 / Call City County State
The state of the s	Maiden Name if Different That Andreanapolio, Sh.
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	To Market State of the State of
Usual Occupation Painter	Annument []
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)
Other (Specify)	Usual Occupation 7/01/
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?	1. Are you now or how one how added to
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? No Test
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 D
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 W 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? Yes No Yes	5. Are you now under the influence of intoxicating liquor? No D Yes D
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	6. Are you now under the influence of a narcotic drug? No D Yes D
Name Age Address	Residence of father (if deceased so state) Sedianapelio A
	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. P. Meyllis M. Folen
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if degeased so state) Indianapalis,
11. Full name of father Dichard de Willer	Occupation of mother Assertan aid Race of mother wh
Residence of father (if deceased so state) Lamfield In	Birthplace of mother (State or foreign country)
Occupation of father // Muck to Muse Race of father Wh	And the same of the latest the same of the
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS as: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother (but) Definite	Bilecca ann Scribner
Residence of mother (if deceased so state)	Signed tal Buchanan Plainlield
Occupation of mother Race of mother Race of mother	New Address 7 1 Land Outer 10 7/6
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of grand Subscribed and sworn to before me this day of grand Court
State of Indiana, County of HENDRICKS Ss: I depose and state the information given in this application is true and correct.	I sung con
Signed Stephen Jay Welver DI	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 491 Buckerign St. 1991.	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 1940.	signs, state facts which render the consent of the other parent unnecessary
Den III, Hand Clerk HENDRICKS Circuit Court	organic control of the control of th
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,	Councy of Father
County ofHENDRICKS.	Signed
Signed	Signed
Signed	Subscribed and sworn to before me this day of
Subscribed and sworn to before me this	
	on A marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT County Cou	of a marriage license to the above named parties.
in authorizes and directs	TARRIAGE CERTIFICATE
RETURN OF MARRIAGE LICENS.	use issued by the clerk of the
The state of the s	" authorizing the joining tog
of Indiana dated the	Keneccaa.
Be it further remembered the following marriage certificate was filed in my o	hereby certify that on the 10th day of July at Plainfield County, State of Indiana
I, Enoch S. Ralph	Plainfield , County of Hendricks
Be it further remembered, the following marriage certificate was filed in my of thousand nine hundred and the state of the	Hendricks County, State of Hulland
I, Enoch S. Ralph one thousand nine hundred and 76 State of Indiana, Groom Stephen Jay Weber and, Bride Rebecca Ann Scribner of were by many in the right by a marriage license issued for	Marion County, State of Indiana
State of Indiana, Groom Stephen Jay Weber and, Bride Rebecca Ann Scribner were by me united in marriage as authorized by a marriage license issued for County. 1024	that purpose by the Clerk of the Circuit Court of
were by me united in marriage as authorized by a marriage license issued for	76
County. 10th July , 19	76 Signed Fnoch S. Ralph
County. 10th July July 19	Official Designation 19 76
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation 13 day of July Clerk
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Alen M. Harvey Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No. 279
File 7/ 7/

Health under Authority Chap. 126, Ind. Acts 1905 HENDRIC		7-6-76
	DEM ALE	Date of Application
MALE (2-21-7/	FEMALE Medical Examination Report Dated	16-21-76
Medical Examination Report Dated	Name of Physician M. O.	Sramaking mo
Name of Physician // X Camaton // /		Civing and Million .
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False sta	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)".	FEMALE AI	PPLICANT
Name First Middle Last	Name First	Middle Last
Kay edward sedington	Date of Birth Month	Day Terree
Date of Birth Month Day	ane of Bitti	26 1957
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)	20
Residence Address D Street or R. R. City County State	Residence Address Street or R. R.	City County State
Rt. 1 Dex 1486, Pettsporo, In	Maiden Name if Different	y to a. Drownshurg
Previous Marital Status: Never Married Number of Previous Marriages		,
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married N	Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Di	ivorce Annulment
Color or Race White Negro Other (specify)		
Usual Occupation Carpet Installer	Color or Race White Negro Ot	ther (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation / One	The state of the s
Other (Specify)	Date of birth verified by: Birth Cert. Due	dicial Decree
An Imbecile?	Other (Specify)	
2. Are you under guardianship as a person of unsound mind?	1. Are you now or have you been adjudged, diag	gnosed or considered as:
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? Yes □	An Imbecile?	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? No Yes 5. Are you related to the bride closer than second cousin? No Yes	2. Are you under guardianship as a person of u	unsound mind? No 🗗 Yes 🗆
6. Are you now under the influence of intoxicating liquor? No Yes	3. Are you afflicted with a transmissible disease	e? No 🕒 Yes 🗆
7. Are you now under the influence of a narcotic drug?	4. Are you related to the groom closer than sec	cond 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 intoxical	ating 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 narco	
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father William	7. Flerres
Name Age Address	Residence of father (if deceased so state),	Brownslura
	Occupation of father Penn Centre	Race of father Col
	Birthplace of father (State or foreign count	. ///
	mas	y I Bruns
(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	1300
their support? Yes \(\) No \(\)	Residence of mother (if deceased so state)	Dumalling of
11. Full name of father AMD Ly Laurente	Occupation of mother Saltman	Race of mother Wh
Residence of father (if deceased so state)	Birthplace of mother (State or foreign count	ry) / laneale
Occupation of father ar fall Antally Race of father Wh		
Birthplace of father (State or foreign country), Blattickey	State of Indiana,	I depose and state the information given in this application is true and correct.
12. Full maiden name of mother July a Wass	County ofHENDRICKS	in this application is true and correct.
Residence of mother (if deceased so state) Littsbare	Signed Joan	ne d Ferrel
Occupation of mother Abu Race of mother all	New Address. Labora	of the fanterns, Indianap
Birthplace of mother (State or foreign country)	1/	day of Ouly 1976
State of Indiana, I depose and state the information given	Subscribed and sworn to before me this	day of 19
County of HENDRICKS ss: in this application is true and correct.	Slew M. Harvey	Clerk HENDRICKS Circuit Court
Signed Suy 2 Don't		and the first september of File
New Address & the de of the later	CONSENT OF PARENTS, PARENT OR GUAR	DIAN
Subscribed and sworn to before me/this	We, the parents, of this applicant hereby give co	onsent for this marriage. If only one parent
LI LLY M PANYLY ClerkHENDRICKS Circuit Court	signs, state facts which render the consent of th	he other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN		
We, the parents, of this applicant hereby give consent for this marriage. If only one parent		
igns, state facts which render the consent of the other parent unnecessary		
	State of Indiana,	
tate of Indiana,	County ofHENDRICKS	
ounty ofHENDRICKS	,	
SignedFather	Signed	Father
Signed	Signed	Mother
ubscribed and sworn to before me thisday of	Subscribed and sworn to before me this	day of
Clark		
Uler A		Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refuse	ed to the above named parties, the
County	ourt by written order issued	and filed
authorizes and directs the issuance o	of a marriage license to the above named no	arties
RETURN OF MARRIAGE LICENSI	E AND MADDIAGE CEDEVACE	
at a state of the was filed in my office a marriage licen	E AND MARRIAGE CERTIFICATE	DICKS
f Indiana dated the 13 d day of 4	(1) the clerk of the HEND	Circuit Court
Saif Edward Ledinston	, 19.12., authorizing the joi	ning together as husband and wife
e it further remembered, the following marriage certificate was filed in my o	fice to with	errel
	hand.	
10	1 1 7 D to 1 1 to 1	
tate of Indiana, Groom Lay Edward Ledington	of Sendanting	., County of Sundrusks
At the state of th	MINALANDIA	
ere by me united in marriage as authorized by a marriage li-	Al at Cour	ity, State of Indiana,
ounty.	that purpose by the Clerk of the Circuit Cou	ert ofHENDRICKS
Pated this 13 day of July , 19 76	6.	1
	Signed Sex Char	les noll
iled and recorded in second	Official Designation Catholic	Briest
iled and recorded in accordance with the laws of the State of Indiana this	20 day of	July 1076
	Signed Illen m Harr	Clerk

......HENDRICKS.....

MALE
Medical Examination Report Dated 6-22-76

Name of Physician William Elward M. D.

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

517 275 County Date of Application FEMALE Medical Examination Report Dated 6-33-76

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 William Edwars. The
MALE APPLICANT	tement—Whoever procures the issuance of a license to marry by any fel
Name Pirel Middle	FEMALE Appearance of any faise statement, representa-
My dean getter	Name First
Date of Birth Month Day	Date of Birth Month Due Last
Place of Birth (State of foreign quantry)	Day You
Egsidence Address Street or R. R. Ofity County	Place of Both (State or foreign county)
August Mark Park Planfield Hendrick las	Residence Address Street or R. R. City
Previous Marital Status : Never Married . Number of Previous Marriages	Maiden Name if Different A or a ville Margan In a
Last Marriage Ended By : Death Divorce Annulment D	Keren Due 7.1.
Total Communicat (1)	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White K Negro Other (specify)	Last Marriago P. J. I. D.
Usual Occupation Fachinal	Death Divorce Annulment 7 Train Co.
Date of birth verified by : PBirth 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:	Date of birth verified by: Birth Cert. Judicial Decree
Of Unsound Mind? No Yes Yes	Other (Specify)
1. Are you now or have you been within five (5) years an inmate of a south of	1. Are you now or have you been adjudged, diagnosed or considered as:
home for imagent persons: No Yes	An Imbecile? No 🖫 Yes 🗆
4. Are you afflicted with a transmissible disease? No Yes	Of Unsound Mind?
i. Are you related to the bride closer than second cousin? No P Yes -	2. Are you under guardianship as a person of unsound mind? No 🔲 Yes 🗆
6. Are you now under the influence of intextenting liquor? No BY 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
k Are you likely to so continue? Yes W No	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)	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 Royald & Ward
Name Age Address	Residence of father (if-deceased so state) Word care Masler Ct.
	Occupation of father with Race of father
	Birthplace of father (State or foreign country) Kendricks Co. Jack
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Barbura C. Winstel
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state) 126 7. Certagst
11. Poll name of father Richard & Serton .	Occupation of mother. Clerk - Revenue Race of mother Charles
	Birthplace of mother (State or foreign country) Handricks Co., Ind.
Occupation of father trachered Baco of father W	Diremplace of model: (State of Foreign Country)
Birtholace of father (State or foreign country) Due calle Int.	State of Indiana, Second State of Indiana, I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Parties 2. arrelly .	County of HENDRICKS In this application is true and correct.
Residence of mother (If dominant so state) & 30 Duffey, Chiful	Signed Karen Still King
Be to the	New Address 117 Hally more wills dut.
Occupation of mother	Subscribed and sworn to before me this
Birthplace of mother (State or foreign country).	Subscribed and sworn to best to the Starting Clerk HENDRICKS Circum Court
County of HENDRICKS as: I depose and state the information given n the polication is true and correct.	Clerk manufacture out
Signed Jussy N. Durton ,	CONSENT OF PARENTS, PARENT OR GUARDIAN
Now Address 117 Hadley. Morestelles	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 July 1976	We, the parents, of this applicant netery give concern parent unnecessary
Dle m Handy 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	
	A stations
	State of Indiana. County of HENDRICKS
State of Indiana,	Jather
County of HENDRICKS	Signed
Signed. Father Mother	Signed day of , 19
Signed.	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me thisday of	
THE RESIDENCE OF THE PARTY OF T	Near having heen 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 the and filed a marriage license to the above named parties.
HENDRICKS County Co	urt by written order issued
in authorizes and directs the issuance o	f a marriage license to the above named parties.
RETURN OF MARKET	se issued by the clerk of the HENDRICKS Create Course is sued by the clerk of the joining together as husband and wife nd Markens Sull Ting
Be It Remembered, there was filed in my July	nd Karen Such Hing the joining together as the 24 day of July
and dated the	nd Alderson
Be it further remembered the following marriage certificate was filed in my	and that on the day of Mendricks
1, lleh of Shiplus	County of
	Clainfield, Ondinna
one thousand nine bundred and 76	(a loinsellem
one thousand nine hundred and	of Jenaria State of Indiana,
one thousand nine hundred and	of Jenaria State of Indiana,
one thousand nine hundred and	of Jenaria State of Indiana,
State of Indiana, Groom Jury D. Hirton of and, Bride of Arth Ling 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 HENDRICKS
State of Indiana, Groom July D. Hirton of and, Bride Sales of Mariage as authorized by a marriage license issued for County.	of County, State of Indiana, Margan County, State of HENDRICKS that purpose by the Clerk of the Circuit Court of HENDRICKS a. Signed Oleky Y Shipliff
State of Indiana, Groom July D. Hirton of and, Bride Sales of Mariage as authorized by a marriage license issued for County.	of County, State of Indiana, Margan County, State of HENDRICKS that purpose by the Clerk of the Circuit Court of HENDRICKS a. Signed Oleky Y Shipliff
State of Indiana, Groom Jury D. Hirton of and, Bride of Market State of Market State of Indiana, Groom of the State of Indiana, Groom of Indiana	of County, State of Indiana, Margan County, State of HENDRICKS that purpose by the Clerk of the Circuit Court of HENDRICKS a. Signed Oleky Y Shipliff

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

Chap. 126, Ind. Acts 1905 HENDRICKS _County Date of Application 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 Date of Birth State Previous Marital Status: Never Married Number of Previous Marriages. Previous Marital Status: Never Married T 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 Date of birth verified by: Birth Cert. Dudicial Decree Usual Occupation Date of birth verified by: ABirth Cert. Judicial Decree Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes 🗆 # 41754 Other (Specify)... Yes 🗌 No D 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 E No Yes 3. Are you now or have you been within five (5) years an inmate of a home for indigent persons? An Imbecile? No Yes Of Unsound Mind? If answer to 3 is "yes" has the cause of such condition been removed? Yes 🗌 No 🗆 Yes 🗌 4. Are you afflicted with a transmissible disease? No D 2. Are you under guardianship as a person of unsound mind? No Yes No D Yes 🗌 5. Are you related to the bride closer than second cousin? 3. Are you afflicted with a transmissible disease? No 4 Yes No 🗆 Xes 🗌 6. Are you now under the influence of intoxicating liquor? Yes 🗌 4. Are you related to the groom closer than second cousin? No Yes 7. Are you now under the influence of a narcotic drug? No 🗗 No 🗌 Yes 🖸 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 A 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 🗌 Yes 🗌 (If yes, answer questions a, b, c) 7. Full name of father Gadil (a) List their full names, ages and addresses Residence of father (if deceased so state). Address Occupation of father Sallsman Birthplace of father (State or foreign country) 8. Full maiden name of mother 1. Massacra (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 state) Yes 🗌 No 🗆 Birthplace of mother (State or foreign country). Residence of father (if deceased so state) ... Occupation of father Anstruction State of Indiana, Birthplace of father (State or foreign country) ... County ofHENDRICKS place of mother (State or foreign country) ... I depose and state the information given in this application is true and correct. Clerk 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. ClerkHENDRICKS ENT OF PARENTS, PARENT OR GUARDIAN e parents, of this applicant hereby give consent for this marriage. If only one parent state facts which render the consent of the other parent unnecessary .. HENDRICKS. of Indiana, y of HENDRICKS Signed. Father Signed. Subscribed and sworn to before me this 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 Warren order issued 3 and warren 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. 19. ... authorizing the joining together as husband and wife of Indiana dated the. emembered, the following marriage certificate was filed in my office, to-wit: 1, William Charles me Graw hereby certify that, on the...... one thousand nine hundred and .. State of Indiana, Groom Jemathy & arl Mc Cowagof and, Bride Tay Prances Jarrett 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 ofHENDRICKS. County. Dated this. Official Designation Dinister, Filed and recorded in accordance with the laws of the State of Indiana thisClerk

HENDRICKS

... Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No.	276
110.	

HENDRICKS County

Date of Application

	// Date of Application
MALE	FEMALE 7-7-7/
Medical Examination Report Dated 7-7-76	Medical Examination Report Dated
Name of Physician and M. Scudder M.R.	Name of Physician U. T. Soudder MN
	Whenever pressures 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)".	tement-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 Mouth Day Year
15 19.56	Place of Birth/(State or foreign country)
Place of Birth (State of foreign country)	Hompfinoville Kentucky
Residence Address Street or R. R. City County State	Residence Address Street or R. R. # City County State
P 7 # 3 Bot 754	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 Previous Marriages
	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	
Usual Occupation Bus Back	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Undicial Decree	Usual Occupation
Other (Specify) # 9083	Date of birth verified by:
 Are you now or have you been adjudged, diagnosed or considered as: No ✓ Yes □ 	# 4/7.54
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes Yes	Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as:
3. Are you now or have you been within five (5) years an inmate of a county asylum or	An Imbecile?
home for indigent persons? No Yes If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind?
4. Are you afflicted with a transmissible disease?	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	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 P Yes	4. Are you related to the groom closer than second cousin? No Yes
8. Are you able to support a family? Yes No	4. Are you related to the groom closer than second cousin? 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 (If yes, answer questions a, b, c)	Codalia (Col)
(a) List their full names, ages and addresses	7. Full name of father of and 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Name Age Address	Residence of father (if deceased so state) A The Brownsburg
	Occupation of father and Sman Race of father
	Birthplace of father (State or foreign country) M. Dagan Co. Ind
(b) Are you supporting or contributing to their support? Yes □ No □	8. Full maiden name of mother Marylin ann Maglish
(c) Are you complying with any court order or orders issued for	Residence of mother (if deceased so state)
their support? Real Brief, M. C. Cowan	Occupation of mother Secretary Race of mother
11. Full name of father	Chadi la Car
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father MINICELIANA Race of father	State of Indiana, I denose and state the information given
Birthplace of father (State or foreign country) artiful Color (Awards	State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
I, MARY LIN A. JARRETT, he my Paughtee, KAY FRANCES JARRETT marry Timothy E. M. GWAN Marylin	reby give my consent for
Subscribed and sworn to before me this J	tary Public Father
	Mother Nov 29, 1979
Subscribed and sworn to before me thisday of	Subscribed and sworn w
Clerk	Llen M. Harvey Clerk
	RT. A marriage license having been refused to the above named parties, the
/1/ /2: 10 / / :	ourt by written order issued 3 aary warren and filed
in Cliffs authorizes and directs the issuance	of a marriage license to the above named parties.
RETURN OF MARRIAGE LICENS	SE AND MARRIAGE CERTIFICATE
	ense issued by the clerk of the HENDRICKS Circuit Court
of Indiana dated the day of July Limsthey Earl Mc Cowan Be it further remembered, the following marriage certificate was filed in my 1, Liellian Charles Mc Graw one thousand nine hundred and 76	and Hay Frances Jarrett
and, Bride Ray Brances Jarrett of	Hendricks County, State of Indiana,
	that purpose by the Clerk of the Circuit Court of HENDRICKS.
County.	
Dated this 26 day of July , 19 7	6. This of the of the way
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Minister, Christian Churc
	Signed Glen M. Harvey Clerk

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS County 6-23-16 Medical Examination Report Dated Date of Application FEMALE Medical Examination Report Dated. Name of Physician Won Name of Physician Wm Codwards ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False of a pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". ocures the issuance of a license to marry by any false statement, repres MALE APPLICANT FEMALE APPLICANT 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)... Last Marriage Ended By: Death | Divorce | Annulment | Color or Race White Negro Other (specify)... Date of birth verified by : | Birth Cert. | Judicial Decree Tother (Specity) Bruners Lucense \$357-16-1253 Usual Occupation Are you now or have you been adjudged, diagnosed or considered as:
 An Imbedie?
 Date of birth verified by: Birth Cert. Dudicial Decree Of Unsound Mind? Wrivers Luceuse 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? If answer to 3 is "yes" has the cause of such condition been removed? No Yes No [Yes 🗌 4. Are you afflicted with a transmissible disease? No Yes No I Yes [5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? No D Yes [No Yes 6. Are you now under the influence of intoxicating liquor! No P Yes 3. Are you afflicted with a transmissible disease? 7. Are you now under the influence of a narcotic drug? No Yes 🗆 Yes [4. Are you related to the groom closer than second cousin? 8. Are you able to support a family? Yes No 🗆 3. 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) (a) List their full names, ages and addresse 7. Full name of father William Ray Dewman Birthplace of father (State or foreign country) Matorn, 8. Full maiden name of mother Blancher Elizabeth Baker (b) Are you supporting or contributing to their support? Yes No 🗆 Residence of mother (if deceased so state) 100 Marion Matorial (c) Are you complying with any court order or orders issued for their support? Occupation of mother Hettered Birthplace of mother (State or foreign country) Matorn Jel State of Indiana, County of HENDRICKS leceased Residence of mother (If degensed so state). Occupation of mother Race of mother. State of Indiana, Clerk 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. Clerk 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... HENDRICKS State of Indiana. County of HENDRICKS Signed. 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. HENDRICKS County..... 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, 19.76, authorizing the joining together as husband and wife and Elizabeth Ann Roberts 13 day of of Indiana dated the hereby certify that on the 9 day of September, Ve4lie D. Roberts Be it further remembered, the following marriage certificate was filed in my office, to-wit: at Indianapolis , County of Marion , Myron Barnard State of Indiana, Groom Verlie D. Roberts of Hendricks County, State of Indiana and, Bride Elizabeth Ann Roberts of Hendricks County, State of Hendricks Signed Myron Barnard Septmeber , 19 76 Judge Dated this Sept. , 19 7.6 Official Designation 13 Glen m. Harvely Filed and recorded in accordance with the laws of the State of Indiana this Circuit Court Signed .. HENDRICKS.

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

File 37

HENDRICKS County

7-8-76

Date of Application

MALE	FEMALE Medical Examination Report Dated 7-7-76
Medical Examination Report Dated 7-7-76	Name of Physician Carl L. Heinlein
Name of Physician Carl 3. Steinlein	
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 Last,
Name First Middle Last	Judith a. Knight
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)
Beech Grove Indiana	Residence Address Street or R. R. City County State
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 Megro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation Armsh	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree State Bd. of Nealth	Usual Occupation Zamen of Same
□ Other (Specify) # 1/3 - 55 - 104720	State Bel al The
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes	-7-013747
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes Yes	
3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? 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	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 🗆	
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a parentia dwg? No Z. 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 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? 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 straff & Ansight
Name Age Address	Residence of father (if deceased so state). Coatesvelle, Sad.
	Occupation of father Freech Driver Race of father J
	Birthplace of father (State or foreign country) Indiana
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother. Margarile Capilland
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state) Condaville, Ind.
11. Full name of father Ceril C Davees	Occupation of mother Alla Little Race of mother 96
Residence of father (if deceased so state) Lizi Fazzl, Razla	Birthplace of mother (State or foreign country). Indiana
Occupation of father air Fares Race of father If	Dittiplace of motief (State of Foreign Country)
Birthplace of father (State or foreign country) Mussellil	State of Indiana, Sas: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother hylles C. Carpenter	County of
	Signed & Jardith ann Knight
Residence of mother (if deceased so state) Brundrydy, Ind	
Occupation of mother Alfbala Selected Barrier Race of mother 9	New Address HHB 2167 ADA APO New York
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of gally , 1976.
State of Indiana, County of HENDRICKS Ss: I depose and state the information given in this application is true and correct.	Glen M. Garvey Clerk HENDRICKS Circuit Court
Signed & Ceil Wayne Davies	
New Address HHB 2/67 ADA APO N.Y. 09086	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 July, 1976.	
Men Maruly ClerkHENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN	
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
igns, state facts which render the consent of the other parent unnecessary	
	State of Indiana,
State of Indiana,	County ofHENDRICKS
County ofHENDRICKS	SignedFather
SignedFather	
Signed	Signed Mother
subscribed and sworn to before me thisday of, 19,	Subscribed and sworn to before me thisday of
	Clerk
COMPLETE IE MADDIACE LICENSE ISSUED DY ORDER OF SOME	
HENDRICKS COURT ISSUED BY ORDER OF COUR	RT. A marriage license having been refused to the above named parties, the
County County	ourt by written order issued
n Clerks Office authorizes and directs the issuance of	of a marriage license to the above named parties.
RETURN OF MARRIAGE LICENS	E AND MARRIAGE CERTIFICATE
We It Remembered, there was filed in my office a marriage licen	ise issued by the clerk of the HENDRICKS Circuit Cour
f Indiana dated the day of July	
acce a removes	1 (kid the // F
)	/Hoo, 10-1011.
, Clas D. Maures	hereby certify that on the 11th day of July
ne thousand nine hundred and Devenus - Det	at New Winchester
State of Indiana, Groom Clark Wayne Davies	of Putnain County, State of Suglain
nd, Bride Judith ann Knight	Sindreks County, State of Indian
vere by me united in marriage as authorized by a marriage is	that many last of County, State of
county.	that purpose by the Clerk of the Circuit Court ofHENDRICKS
Pated this 11th day of July , 1976	
, 10.7.30	Signed Ker. Cecil & Davies
	Official Designation Minister (Baptist)
Filed and recorded in accordance with the laws of the State of Indiana this	13 day of July 10 7).
7, 2, 3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	
	Signed Ilin M Bandy Clerk

STATE OF INDIANA

Chap. 126, Ind. Acts 1905 APPLICATION FOR MARRIAGE LICENSE HENDRICKS File	
MALE	County 7-8-7/
Medical Examination Report Dated 6/28/76	FEMALE Date of Application
Name of Physician Nave Blasger	Medical Examination Report Dated 6/28/76
ALL QUESTIONS MUST BE ANSWERED, Chapter 126, Indiana	
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
Name First Middle	of a license to marry by any false statement, representa-
Wally Eugene mast	Name First
Date of Bridi	Date of Birth Month Asia Barantel
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) Day Year 1946
Residence Address Street or R. R. City County State	Paridon Mentapalis Herris 50
Previous Marital Status: Never Married Number of Previous Marriages	1007 County State
	Maiden Name if Different And Boundary College apt 2 Plainfie
1917 Pants	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage E. J. J. D.
Usual Occupation Plant analyst	Cal a Manufact 1 /973 Klenke
Date of birth verified by : Birth Cert. Judicial Decree	Negro Other (specify)
Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation Factory
An Imbecile? 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 country.	Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as:
Manager to 3 is "yes" has the same of such condition by	An Imbecile? No Ves
4. Are you afflicted with a transmissible disease? No Yes	Of Unsound Mind?
5. Are you related to the bride closer than second cousin? No. Yes	2. Are you under guardianship as a person of unsound mind? No Yes
7. Are you now under the influence of a narcotic drug? No Yes	3. Are you related to the groom sleam the sease?
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 P Yes 5. Are you now under the influence of intoxicating liquor? No P Yes
10. Do you have minor children from one or more former marriages? No Ves	6. Are you now under the influence of intoxicating liquor? No Yes No Yes No Yes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father & Sund Alle Lashbrook
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Alland Race of father Alland
	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? Yes No	Residence of mother (if deceased so state)
11. Full name of father Add Color Delication of the Color	Occupation of mother Race of mother A
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Mills Race of father White	State of Indiana, I depose and state the information given
Birthplace of father (State or foreign country) 12. Full maiden name of mother. PMANAUT Wasplust Bloss	County of HENDRICKS
Residence of mother (if deceased so state)	Signed Cherryl Our Paraett
Occupation of mother Factory Race of mother White	New Address 1007 Valley Veta Tolk
Birthplace of mother (State or foreign country) Ruspitte Class	Subscribed and sworn to before me this day of 19
State of Indiana, I depose and state the information given in this application is true and correct.	The Manuay Clerk HENDRICKS Circuit Court
County of HENDRICKS in this application is true and correct. Signed Wally Eugle Marke	
New Address 1007 Valley View Cott a Plainfiell for	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of Alley , 1976.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Glen M. Warney 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, ss:
	County of HENDRICKS Father
State of Indiana, County ofHENDRICKS.	Signed Mother
Signed Father	Signed
SignedMother	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me thisday of	Clerk
Clerk	having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been recorded and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR County Coun	urt by written order issued
authorizes and unices	The state of the s
RETURN OF MARRIAGE LICENSI Be It Remembered, there was filed in my office a marriage licen of Indian	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
Be It Remembered, there was filed in my office a marriage licen	19.76, authorizing the joining together as husbana and wife
Thatana dated the aay of	al Multinger
Be it further remembered, the following marriage certificate was filed in my of the standard o	fice, to-wit: day of July
Be it further remembered, the following marriage certificate was field to a sufficient one thousand nine hundred and the state of Indiana Grand The	at Clainfield County, State of Indiana
one thousand nine hundred and State of Indiana, Groom Walley Eugene Marks and Bride Alexander Barrett of	of Wendricks County, State of Indiana, Thendricks County, State of Indiana, Thendricks County, State of Indiana, that purpose by the Clerk of the Circuit Court of HENDRICKS
State of Indiana, Groom Wally Eugene Market of and, Bride Cheryl ann Barnett 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 waited in the work of the marriage license issued for	
County. Dated this	Signed Sex Dillong Suggestion
day of	ination Menurul
I Jigna this	21 day of Harvey Clerk
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Glen M Harvelf Circuit Court HENDRICKS

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

File 9 1976

280

Health under Authority Chap. 126, Ind. Acts 1905 HENDRICK	S County Date of Application
	FEMALE 7- 3-76
MALE Medical Examination Report Dated 7-3-76	Medical Examination Report Dated
(hamas /) alker M. D.	Name of Physician / Momas Walker, 11). 12.
1005 prescribes "False stat	tement—Whoever procures the issuance of a license to marry by any false statement, representa-
tion or pretense shan be med in any	FEMALE AFFLICANT
MALE APPLICANT Name First Middle California	Name Eirst Middle McClure
Date of Birth Month Day Year	Date of Birth Month 24 1948
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)
Indianapplis, in County State	Residence Address Street or R. R. City County State
Rt. 1 Box 38, Plainfield, In.	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)	
Usual Occupation I ruck to ruck	Color or Race White Negro Other (specify)
Date of birth verified by: Deirth Cert. Undicial Decree	Usual Occupation Sentant
☐ 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 asylum or home for indigent persons?	An Imbecile? No Yes No Yes No Yes
If answer to 3 is "yes" has the cause of such condition been removed?	Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes
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 discount of the second of t
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? No Ves
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 Ver
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 T Yes
(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 an Alleman Race of father Wh
	Birthplace of father (State or foreign country)
(1) A	8. Full maiden name of mother. Management of management 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 \[\] Yes \[\] No \[\]	Residence of mother (if deceased so state)
11. Full name of father Robert Paul feder	Occupation of mother Surstand Race of mother Who
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father MULE MILLER Race of father Will	State of Indiana, State of Indiana, State
Birthplace of father (State or foreign country) Malland 12. Full maiden name of mother Lana Malland Daume	County of HENDRICKS
Residence of mother (if deceased so state)	Signed Dax De Die Lile J.
Occupation of mother School Bush Race of mother WW	New Address 5 5 Company Filled April 19 7/
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of 1920
State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Olen M. PARMUS CIERLE COUR
Signed Coult and Louis	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address Value of July 1976.	We, the parents, of this applicant hereby give consent for this marriage. If only one paren
Subscribed and sworn to before the dis-	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OF 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 ofHENDRICKS
County of HENDRICKS Signed Father	Signed Father
Signed Mother	Signed Moth
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of19
Clerk	Cler
	URT. A marriage license having been refused to the above named parties, the
HENDRICKS County Wiscust	Court by written order issued 3 day wawes and file
in Clerk's Office authorizes and directs the issuance	
	NSE AND MARRIAGE CERTIFICATE cense issued by the clerk of the HENDRICKS Circuit Cou
of Indiana dated the 9th day of Tilly	10. 76 authorizing the joining together as hysband and wi
Joseph Paul Pedigo	and Lana Jo McClure y office, to-wit: hereby certify that on the 10th day of July
Be it further remembered, the following marriage certificate was filed in my Clifford L. Carmichael	hereby certify that on the 10th day of July
one thousand nine hundred and 76	at Brownsburg , County of Hendrick
State of Indiana, Groom Joseph Paul Pedigo	of Hendricks County, State of Indiana
and, Bride Lana Jo McClure of	Hendricks County, State of Indiana
Countai	or that purpose by the Clerk of the Circuit Court ofHENDRICKS
Dated this day of July , 19	76 Clifford L. Carmichael
	Official Designation United Methodist Minister
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Stilled Technodist Hillister 76
The second of th	Signed Glen m. Harrield Ch
	HENDRICKS Circuit Con

..Circuit Court

HENDRICKS

Indiana State Board of STATE OF Health under Authority APPLICATION FOR A	INDIANA
Indiana State Board of Health under Authority Chap. 126, Ind. Acts 1905	IARRIAGE LICENSE
HENDRICK	rile77
MALE	
Medical Examination Report Dated 7 - 7 - 76	FEMALE Date of Application
Name of Physician Joseph C. Kerlin	Medical Examination Report Dated 7-7-7/
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state tion of pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	most in section assessment in the section
MALE APPLICANT	-Whoever procures the issuance of a license to marry by any false of the
Name Name	FEMALE Apprent
Date of Birth Month Day Year	Name First Middle
Vicinale 12	Date of Birth Month B. Neg D. Last
Place of Birth (State or foreign country) 1933	Day Year
Residence Address Street of R. R. City County	(State of foreign country)
1018 There St. Glainfield, Ind.	Street or P D
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Differenty Wood Dr. Clarifield State
Last Marriage Ended By: Death Divorce Annulment	O The state of the
	Previous Marital Status: Never Married Number of Previous Marriages
Color or Rade White Megro Other (specify)	Test W
Usual Occupation Chenoing Clark	Death Divorce Annulment
Date of birth verified by Birth Cord Judicial Decree Beat of Bublic Health	Color or Race White Negro Other (specify)
Other (Specify)	Usual Occupation Madia 1 Q 4. L
1. Are you now or have you been adjudged, diagnosed or considered as:	Theresal Acceptionist
Of Unsound Mind?	Date of birth verified by: Birth Cert. Judicial Decree Dept. Sublic Health
2. Are you under guardianship as a person of unsound mind? No D 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? Yes
If answer to I is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind?
4. Are you afflicted with a transmissible disease? No 2 Yes 5. Are you related to the bride closer than second cousin? No 2 Yes	2. Are you under guardianship as a person of unsound mind? No P Yes
6. Are you now under the influence of intoxicating liquor? No W Yes -	3. Are you afflicted with a transmissible disease?
7. Are you now under the influence of a narcotic drug? No P Yes S & Are you able to support a family?	4. Are you related to the groom closer than second cousin? No P 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 P 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 a sliph Eugene neeley
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Carpenter Race of father 9
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother Janiel Jane Claywell
(b) Are you supporting or contributing to their support? Yes No (c) Are you complying with any court order or orders issued for	100 1 10 0 1:1
their support? Yes No	Residence of mother (if deceased so state) Sulpulveda, Sulf
11. Pull name of father STM Aschard Guch	Occupation of mother Wallettell The Race of mother W
Residence of father (It deceased so state) Slainfield, Ind.	Birthplace of mother (State or foreign country) Harrely Illenses
Occupation of father Astered Race of father 9	A STATE OF THE PARTY OF THE PAR
Birthplace of father (State or foreign country) Indiana	State of Indiana. County of HENDRICKS ss: I depose and state the information given in this application is true and correct.
12. Full maiden pame of mother Celia margaret Bass	County of Alas Co
Residence of mother (It deceased so state) Plainfield, Ind.	Signed A COL A COLOR
Occupation of mother Nausswife Race of mother Il	New Address 6230 Winnessage, Chayolo
Birthplace of mother (State or foreign country) Indiana	Subscribed and sworn to before me this. 9 day of July, 1976.
State of Indiana.	Ilen m. Harvey Gerk HENDRICKS Circuit Court
County of MENDRICKS as: In this application is true and correct.	Lalle for the control of the control
Signed Larry L. Kush , A	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 6030 Winneldgo, Indpla,	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworn to before me this 9 day of July 19.76	We, the parents, of this applicant nereby give consent unnecessary
Alex m Thomas Cont HENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
Line and the Management of the second of 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, State of HENDRICKSss:
State of Indiana.	County of HENDRILLAS Father
County ofHENDRICKS.	Signed
Father	Signed
Signed Mother	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me this. day of	Subscribed and Subscribed and Clerk
	the served parties the
COUD	The A marriage license having been refused to the above named parties, and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties. and filed a marriage license to the above named parties.
HENDRICKS County	art by written above named parties.
authorizes and dis-	Circuit Court
the It & amendered there was filed in my office a marriage licen	se issued by the clerk of the
of Indiana data to 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	nd Essa B. Rellef nd Essa B. Rellef
	m to mit:
1. The man and a second and the second	To dional
one thousand nine hundred and 76	Hendricks County, State of Indiana
State of Indiana, Groom Gazy & Gush of and, Bride of B. Neelley of were by me united in marriage as authorized by a marriage license issued for County.	the Clerk of the Circuit Court of
were here the state of the stat	that purpose of
County.	friedrich Jalschlaus
Dat 1	Signed Wildrich Sals in Exerciped Ch
	Official Designation Rectury, St. Mark & ages 19.76.

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

STATE OF INDIANA

Form Prescribed By Indiana State Board of Health under Authority APPLICATION FOR M	ARRIAGE LICENSE File
Health under Fluthers	1.
Chap. 126, Ind. Acts 1905 HENDRICKS	County Date of Application
	FEMALE 7-1. 7/
MALE Medical Examination Report Dated 7-6-76	Medical Examination Report Dated
I was my	Name of Physician Slo Dammer M. W.
Name of Physician All Rammen or no	Wheever progues the issuance of a 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)".	ment—whoever produces and locality
MALE APPLICANT	FEMALE APPLICANT
Name First Middle R Last	Name First Rose Steward
Date of Birth Month Day Year	Date of Birth Month Day Year
7/w. 21 1953 -	Place of Birth (State or foreign country)
Place of Birth (State or Jordign country)	Residence Address Street of R. R. City County . State
Residence Address Street or R. R. City County State	9607 Melody on marmapolis
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different
Annulment [Previous Marital Status: Never Married Number of Previous Marriages
Last marriage Ended by.	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	
Usual Occupation Standard Specific	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Standard Gracery
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? No Yes Yes Yes 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 asylum or home for indigent persons?	An Imbecile? No Yes No Yes No Yes
If answer to 3 is "yes" has the cause of such condition been removed? No Yes \(\) Yes \(\) 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	2. Are you under guardianship as a person of unsound mind: 3. Are you afflicted with a transmissible disease? No Yes
6. Are you now under the influence of intoxicating liquor? No ☐ 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? No E Yes
8. Are you able to support a family? Yes No	5. Are you now under the influence of intoxicating liquor? No Yes
9. Are you likely to so continue? Yes ₩ No □ 10. Do you have minor children from one or more former marriages? No □ Yes □	6. Are you now under the influence of a narcotic drug? No Yes
(If yes, answer questions a, b, c)	7. Full name of father harles Wayne Stoward
(a) List their full names, ages and addresses Name Age Address	Residence of father (if deceased so state)
	Occupation of father Laty la Co. Race of father Wh
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother Bluesley James Bullell
(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) Induanapplica, In
their support? Ves Wayne Bradley	Occupation of mother Mans Race of mother Wh
11. Full name of father (if deceased so state). I have a state of father (if deceased so state).	Birthplace of mother (State or foreign country)
Occupation of father	Dirthplace of mother (state of rottight country)
Birthplace of father (State or foreign country)	State of Indiana, Second State of Indiana,
12. Full maiden name of mother Magning A. Pottouff	County of
Residence of mother (if deceased so state)	Signed Brenda Steward
Occupation of mother Acretary, Race of mother Wh	New Address and canapoles
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me thisday of
State of Indiana, State of Indiana, I depose and state the information given in this application is true and correct.	Glerk HENDRICKS Circuit Court
County of Man A Clark	
Signed and an applie	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address. A.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Llen M. Hamus ClerkHENDRICKS 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 ofHENDRICKS
County of HENDRICKS.	SignedFather
Signed Father Signed Mother	SignedMother
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me thisday of
Clerk	Clerk
COMPLETE IN MARRIAGE LIGHTON DIV. ORDER	
	T. A marriage license having been refused to the above named parties, the
in authorizes and directs the issuance o	ourt by written order issued and filed
RETURN OF MARRIAGE LICENS	E AND MARRIAGE CERTIFICATE
of Indiana dated the	use issued by the clerk of the HENDRICKS Circuit Court
James Muchael Drawlay	, 1976, authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my o	ind Brenda Sose Steward office, to-wit:
1, Haved B. Hazelwood	hereby certify that on the 17 day of July
one thousand nine hundred and 76	at Centle Freends Church Country of Wendricks
State of Indiana, Groom James on Bradley	of Thendricks
and, Bride Survail Sale Selward of	Tendricks 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
Dated this /7 day of July , 1976	
Filed and neconded in	Official Designation Minister, Plainfield Baptist Ch.
Filed and recorded in accordance with the laws of the State of Indiana this.	21 day of Vile 10 76

Signed Glen M. Hars

HENDRICKS ..

....Clerk ..Circuit Court

APPLICATION FOR MARRIAGE LICENSE

NO. 283

NO. 283

ENDRICKS County

MALE	County 7-9-76
Medical Examination Report Dated 7-9-76	FEMALE Date of Application
Name of Physician Malcahm Scamaharn	Medical Examination Report Dated 7-9-76
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 of Physician Malcohm Scamaharn
MALE APPLICANT	ement—Whoever procures the issuance of a license to marry by any false statement
Name First Middle Last	News FEMALE APPLICANT
Date of Birth Month Day Roatman	Date of Birth Middle Last
Place of Birth (State or foreign country)	Day Day
Residence Address Street or R. R. City County State	Place of Birth (State or foreign country) 1953
Previous Marital Status: Never Married Number of Previous Marriages	Residence Address Street or R. R. City County State
	Maiden Name if Different Staenfeld Ind.
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 Mechanic Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White TV N
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:	Date of birth verified by: Birth Cert. Judicial Decree
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No P Yes Yes No P Yes Ye	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons?	Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind?
5. Are you related to the bride closer than second cousin? No 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 P 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 ☐ So 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, e) (a) List their full names, ages and addresses	7. Full name of father Jonald Sel Cherry 1. Full name of father Jonald Sel Cherry
Mame Age Address 4 marianna et.	Residence of father (if deceased so state) Aladara Milhay, Mid
In Il al said south marie Brownskiery, How	Occupation of father
	8. Full maiden name of mother January Lauran Surgustin
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for their support? Yes P No	R 3 Bot 39 RA Residence of mother (if deceased so state) Braumsburg, Ind.
their support? Yes P No 11. Full name of father Seddy Richard Boatman.	Occupation of mother
Residence of father (if deceased so state) deceased	Birthplace of mother (State or foreign country) Indiana
Occupation of father Race of father	State of Indiana, State of Indiana, 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 88: in this application is true and correct.
12. Full maiden name of mother with may fand Mc Callelly 425 June Residence of mother (If deceased so state) Birdunaburg Ind	Signed Synthea S. Cherry
Occupation of mother Sessetary Race of mother 9.	New Address 23/ aux Oue Alaufield
Birthplace of mother (State or foreign country) Indiana	Subscribed and sworn to before me this. 9th day of July 19.76
State of Indiana, County of HENDRICKS I depose and state the information given in this application is true and correct.	Glerk HENDRICKS Circuit Court
Signed Sel C. Boatman , and	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 231 AVON AVE Blankold	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworn to before me this g day of July 1976.	signs, state facts which render the consent of the other parent unnecessary
Slin M. Harvey 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, ss:
State of Indiana,	County of HENDRICKS Father
County of HENDRICKS	Signed
Signed Father Mother	Signed
Subscribed and sworn to before me this	Subscribed and sworn to before me this
Clark	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 and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County County and directs the issuance of	ourt by written order issued named parties.
in authorizes and directs the issuance of	ourt by written order issued above named parties. f a marriage license to the above named parties. Circuit Court
DETURN OF MARRIAGE LICENS.	E AND MARKET
RETURN OF MARRIAGE LICENS. The It Remembered, there was filed in my office a marriage licent of Indiana dated the day of July Be it further remembered, the following marriage certificate was filed in my of I, July Dennis & Dodson.	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court use issued by the clerk of the 19.76, authorizing the joining together as husband and wife Cherry
Indiana dated the	nd
Re it to	that on the day of the
1, Sex plennis & Dodson	at Corenth Church Drownsung County, State of Indiana
thousand nine hundred and	of State of State of
one thousand nine hundred and 76 State of Indiana, Groom Leddy 6 Boatman and, Bride Cynthia 9 Cherry of were by me united in marriage as authorized by a marriage license issued for County.	by the Clerk of the Circuit Court of
were by me united in marriage as authorized by a marriage license issued for	that purpose of
County	Car Dennes La Double
County. Dated this 13 day of July , 19.75	" Munisiles "
The standard this	Official Designation 20 day of Clerk Signed Hendricks Circuit Court
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Men M. Harrief Circuit Court HENDRICKS Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

r nea_				
4	uly	13	1976	
1	Date	of Appli	cation	
(1	. 17	1926	

HENDRICK	Date of Application
MALE (1.12.1976	FEMALE FEMALE 12 1976
Medical Examination Report Dated	Medical Examination Report Dated Name of Physician Cree Clark
Name of Physician rul Cark	
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 license to marry by
MALE APPLICANT	FEMALE APPLICANT First Middle
Nome O First Middle O Last	Name Pita Rochelle Craig
Date of Birth Month Day Year	Date of Birth Month Day Year 1958
Place of Birth (State oy foreign country)	Place of Birth (State or foreign country)
Indplo. Ind.	Residence Address / Street or R. R. City County State
Residence Address Street or R. R. City County State 123 North Rd 200 E Namville Herd. Draw 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
Color of Race White Negro State	Color or Race White Negro Other (specify)
Usual Occupation Date of birth verified by: Birth Cert. Judicial Decree	The second secon
112-54-244461	Usual Occupation
1. Are you now or have you been adjudged, diagnosed or considered as:	Date of birth verified by: Defirth Cert. Undicial Decree
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 asylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes
home for indigent persons?	Of Unsound Mind?
If answer to 3 is "yes" has the cause of such condition been removed? No 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? No Yes
6. Are you now under the influence of intoxicating liquor? 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 P Yes
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? Yes No Servey here minor children from one or more former marriages? No Servey here minor children from one or more former marriages?	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? No Yes (If yes, answer questions a, b, c)	7. Full name of father William & Craig
(a) List their full names, ages and addresses Name Age Address	Residence of father (if deceased so state) A time
Name Age Address	Occupation of father TV Rups and Race of father W
	Birthplace of father (State or foreign country) West of genta
	W/ M 1 The last
(b) Are you supporting or contributing to their support? Yes ☐ No ☐	8. Full maiden name of mother than Same
(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 Josephus Chamness	Occupation of mother Det flyger Race of mother to
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Return Race of father W	State of Indiana, I depose and state the information given
Birthplace of father (State or foreign country)	County of HENDRICKS as: in this application is true and correct.
12. Full maiden name of mother Helen While	+ Rita Pashollo Cagio
Residence of mother (if deceased so state) file and a state)	Signed
Occupation of mother Alderson Supply Race of mother	New Address
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me thisday of
State of Indiana, Sa: I depose and state the information given in this application is true and correct.	Clerk HENDRICKS Circuit Court
County of HENDRICKS Signed A suad Favore Transport	
New Address.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me thisday of	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
ClerkHENDRICKS	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 ofHENDRICKS
County of HENDRICKS	SignedFather
Signed	SignedMother
Signed Mother Subscribed and sworn to before me this day of 19	Subscribed and sworn to before me thisday of
	Clerk
The state of the s	The second secon
	RT. A marriage license having been refused to the above named parties, the
	court by written order issued and filed
in authorizes and directs the issuance	of a marriage license to the above named parties.
	SE AND MARRIAGE CERTIFICATE
10 1	ense issued by the clerk of the HENDRICKS Circuit Court 19.76, authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my	office, to-wit:
1, John G. Gorf	hereby certify that on the 25 day of July
	at slainfield, , county of Thendricks!,
	of Hendricks County, State of Ind
	Hendricks County, State of Ind.
	r that purpose by the Clerk of the Circuit Court of
County.	
Dated this 25 day of July , 197	Signed John & Good
	Official Designation & siscopal Greek
Filed and recorded in accordance with the laws of the State of Indiana this	
	Signed Ilen M. Thanver Clerk
	Signed School Count Count

Form Prescribed By Indiana State Board of Health under Authority APPLICATION FOR IN	INDIANA
Health under 126, Ind. Acts 1905 Chap. 126, Ind. Acts 1905	IARRIAGE LICENSE
HENDRICK:	S County 7 12 2/
MALE 2-0 7/	1-13-16 Pate 41-16
Medical Examination Report Dated 7-9-76	FEMALE Date of Application
Name of Physician Wm. Edwards M.R	Medical Examination Report Dated 7-9-76
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 of Physician Wm Adwards M. D.
MALE APPLICANT	ement—Whoever procures the issuance of a license to marry by any false statement, represents.
Name First Middle Middle Last	FEMALE APPLICANT
Date of Birth Month Day Year	Patricia Middle To Last
Place of Birth (State or foreign country)	Date of Birth Month pane Burralough
Residence Address Street or R. R. City County State	Place of Birth (State or foreigh country)
117 Beachween Wa, Indianapolis, S.	Residence Address Street or R. R. City County State
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Wn- Flainfield, An.
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 Factous Worker	Annument []
Date of birth verified by: Birth Crt. 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 Factory Worker
An Imbecile? No Yes	Date of birth verified by: Birth Cert. Didicial Decree
2. Are you now or dianship as a person of unsound mind? No Yes Yes 3. Are you now or dianship as a person of unsound mind? No Yes 1. 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	An Imbecile?
4. Are you afflicted with a transmissible disease? No \(\subsection \text{Yes} \square\$	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 P Yes
7. Are you now under the influence of a narcotic drug? No Wes	4. Are you related to the groom closer than second cousin?
9. Are you likely to so continue? Yes V 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?
(a) List their full names, ages and addresses Name Age Address	7. Full name of father (if deceased so state) Plainfield on
	Occupation of father. Businessman Race of father Wh
	Birthplace of father (State or foreign country)Punnsylvania
(b) Are you supporting or contributing to their support? Yes □ No □	8. Full maiden name of mother. Janua M. Bupp
(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 Richard Monrie	Occupation of mother Assistateper Race of mother wh
Residence of father (if deceased so state) Assull Annual	Birthplace of mother (State or foreign country)
Occupation of father Alleton Race of father WW	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)	County of HENDRICKS In this application is true and content
12. Full maiden name of mother families and filed Residence of mother (if deceased so state) Danville, San	Signed Patricia Jan Banacturg
Occupation of mother Punting Work Race of mother Wh	New Address 50 months and 5 towns his
Birthplace of mother (State or foreign country) Onchana	Subscribed and sworn to before me this
State of Indiana, County of HENDRICKS SS: I depose and state the information given in this application is true and correct.	Glen M. Harry Gerk HENDRICKS Circuit Court
Signed Down A. Monroe	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 50) ENDERLY AUE. #5 BROWNSBURG	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 July 19.76	signs, state facts which render the consent of the other parent unnecessary.
Den M. Harry Clerk HENDRICKS Circuit Court	olgas, 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	
said facts which render the consent of the said	State of Indiana.
	County of HENDRICKS
State of Indiana,	Signed
County of HENDRICKS Father	Signed
Signed Mother	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me thisday of	
	and a warwings license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT COUNTY COUN	ourt by written order issued
HENDRICKS County	of a marriage license to the asset
inauthorized	Circuit Court
RETURN OF MARRIAGE income lines	ase issued by the clerk of the same and wife
of Indiana dated the	and Catricia Jane Barraelough
manne I	fice to-wit:
Be it from how many to all the following marriage certification	hereby certify that on the Clainfield, County of Mendricks,
1, may look a light of the second	- I heard have
thousand nine hundred and	County State of State
and, Bride a lucia Jane Barraclough of	that purpose by the Clerk of the Circuit Court of
were by me united in a prize of guthorized by a marriage	1 / 2001/1
County. Dated this	6. Signed John S. Mandes W. Church
aug of the same of	Official Designation Ministers July 1976.
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Ilen M. Harvelf Circuit Court HENDRICKS
and recorded in accordance with the laws of the	HENDRICKS.

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No	286	
File_	37	
7-	13-76	

Date of Application Medical Examination Report Dated. MALE Medical Examination Report Dated____ arl 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 Date of Birth Place of Birth (State Residence Address 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 ☐ Birth Cert. ☐ Judicial Decree Date of birth verified by: Usual Occupation POther (Specify) Wir Farch J. Date of birth verified by: Birth Cert. _ Judicial Decree State Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes No D 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 3. Are you now or have you been within five (5) years an inmate of a home for indigent persons? An Imbecile? No Z Yes Of Unsound Mind? No Yes Yes 🗌 No 🗌 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? 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 No Yes 6. Are you now under the influence of intoxicating liquor No 🗗 Yes 🗌 4. Are you related to the groom closer than second cousin? 7. Are you now under the influence of a narcotic drug? No Z- Yes Yes No No No 8. Are you able to support a family? 5. Are you now under the influence of intoxicating liquor ! No 2- 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 Address Name Occupation of father Bess dresser (b) Are you supporting or contributing to their support? Yes 🗌 No 🗆 (c) Are you complying with any court order or orders issued for their support? Yes 🗍 No 🗆 Occupation of mother Credit Union 11. Full name of father All Wayne Mr. Residence of father (if deceased so state) Birthplace of mother (State or foreign country) I depose and state the information given in this application is true and correct. State of Indiana. Birthplace of father (State or foreign country). County of HENDRICKS 222 Warling
Residence of mother (if deceased so state) Birthplace of mother (State or foreign country) State of Indiana, Clerk .HENDRICKS. 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 Subscribed and sworn to before me this Glen m. Harvey . ClerkHENDRICKS 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, County ofHENDRICKS. State of Indiana, County of HENDRICKS ...Father Signed. Father Signed. .Mother Subscribed and sworn to before me this.... Subscribed and sworn to before me this ______day of _____ .Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the HENDRICKS 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 HENDRICKS Circuit Court Be it further remembered, the following marriage certificate was filed in my office, to-wit:

1. Bedford

Circuit Court

And Janen S. Compton Sabert M. Bedford hereby certify that on the 17th day of one thousand nine hundred and..... at Danville, County of Hendricks, State of Indiana, Groom David W. Walker of Hendricks County, State of Indiana and, Bride Karen & Compton of Hendricks County, State of Indiana Dated this 17th day of July , 19 76. Official Designation Minester Filed and recorded in accordance with the laws of the State of Indiana this 22 nd day of day of 19.76...

......HENDRICKS...

Form Prescribed By Indiana State Board of Health under Authority APPLICATION	TNDV
Indiana State OF Health under Authority Chap. 126, Ind. Acts 1905 APPLICATION FOR 1	MARRIAGE LIGHT No. 287
HENDRE	TARRIAGE LICENSE
HENDRICK	County
MALE Medical Examination Report Dated 7-7-76	1-14-16
11 0	FEMALE Date of Application
1118.(1).	Medical Examination Report Dated 7-7-76
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state tion of pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name First Middle	Name of Physician Wm. Idwards m. A.
MALE APPLICANT	tement—Whoever procures the issuance of a license to marry by
	FEMALE And a statement, representa-
Date of Birth Month Day Will	Name FEMALE APPLICANT Middle
Place of Birth (State or foreign country)	Date of Birth Month Seme Kalok to
Indianasasii. Da	Place of Birth (State or foreign country) Day Year 1958
Residence Address Street or R. R. City County State	Residence Address Street or P.
Previous Marital Status: Never Married Number of Previous Marriages	City County State
D. A. S. D. S. D. A. S. D. S. D. A. S. D. D. S. D. S. D. D. S. D.	Maiden Name if Different 219, North Salim An,
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Marital
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
Usual Occupation Parton Won 18:01	Death Divorce Annulment
Date of birth verified by : Birth Cegt. Judicial Decree	Color or Race White Negro Other (specify)
Other (Specify)	Usual Occupation
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes	Date of birth verified by: Birth Cert. Judicial Decree
Of Unsound Mind: No D Yes Yes	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county assign 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 Impecile?
4. Are you afflicted with a transmissible disease? No Ves	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 afflicted with a transition of unsound mind? No Ves
1. 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?
8. Are you able to support a family? 9. Are you likely to so continue? Yes No	5. Are you now under the industry
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
(a) List their full names, ages and addresses	7. Full name of father Pay T. Kalebyeke
Name Age Address	Residence of father (if deceased so state) North Salmo
	Occupation of father About Matally Make of father wh
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother. Suell I. Wilson
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state) North Adlesse In
11. Pull name of father Caude Profett	Occupation of mother Race of mother Wh
Residence of father (If deceased so state) Indianapolis, In.	Birthplace of mother (State or foreign country)
Occupation of father hapleton Race of father Wh	The second of the second of the second
Birthplace of father (State or foreign country) Sanfuckly	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 Party J. Welliste	(doloho b)
Residence of mother (If deceased so state) Hollanapolis, Sh.	Signed A Druge
Occupation of mother Supermore Race of mother UM	New Address. The Control of the Cont
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of 1966.
State of Indiana. County of HENDRICKS A sa: I depose and state the information given this application is true and correct.	Glerk HENDRICKS Circuit Court
Signed Parry Profeth	TARRIVA OR CUARDIAN
New Address 5221 Brack Price Indels	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn, to before me this 14 day of July , 1976.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Bless 711 Hazuret 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
State of Indiana,	SignedFather
County of HENDRICKS Father	SignedMother
Signed Mother	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me thisday of	Subscribed and Clerk
Clark	the chave named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	r. A marriage license having been refused to the above hamed parameters
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	art by written order issued
HENDRICKS County	f a marriage license to the above named parties.
authorizes and distributions.	Se issued by the clerk of the HENDRICKS Circuit Court of the general point of the se issued by the clerk of the Court of the Hendricks Circuit Court of the issued by the clerk of the School of the School of the Court of the Island of the Islan
RETURN OF MARKIAGE licens	se issued by the clerk of the
Be It Remembered, there was near it my surface.	, 19 th, authorizing to Halcheck
of Indiana dated the 20 day of Be it further remembered, the following marriage contificate was filed in my of the following marriage contificate was filed in my of the following marriage contificate was filed in my of the following marriage continues to the following marriage to the f	ereby certify that on the 24 day of Hendricks,
Be it further remembered, the following marriage cortificate was filed in my of the control of t	Country State Of Sporter
thousand nine hundred and	County State of Indiana,
and, Bride Jeldy Irline Tall Miller ingued for t	hat purpose by the Clerk of the Circuit Court of
and, Bride July Irense Talebeck of were by me united in marriage as authorized by a marriage license issued for to County.	signed norman L. Weaver
County. Dated this 24 day of July, 19 76	Signed Narman of acceptance of the Signed Designation Minister 1976.
day of	William Holling Hollin
Filed and recorded in accordance with the laws of the State of Indiana this	30 day of Jedgwey Clerk
Filed and recorded in accordance with the laws of the State of Indunt	Signed LLL M. Circuit Court HENDRICKS Circuit Court

HENDRICKS.

HENDRICKS Circuit Court

THE STATE OF

T / Wat, THE MINOR IN

Form Prescribed By Indiana State Board of		No. 288
Health under Authority APPLICATION FOR I	MARRIAGE LICENSE	FileBK. #37
Chap. 126, Ind. Acts 1905 HENDRICK	County	July 14, 1976
		Date of Application
MALE 7/12/76	FEMALE	7/12/76
Medical Examination Report Dated	Medical Examination Report Dated	Colored had
Name of Physician Um Callurds Ma	Name of Physician WM	awards 1112.
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 A	
Name Birst Middle Last	Name First	Middle // Last
Randy Jayre Bennett	Pam	R. Stuart
Date of Birth Month Property Year	Date of Birth Month	Day Year
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)	marie and.
Residence Address Street or R. R. City County State	Residence Address Street or R. R.	City County State
- 1003 Harmong MI Shaplo Shot.	Maiden Name if Different	ong Mr. maple.
Previous Marital Status: Never Married Number of Previous Marriages		1
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married	fumber of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Death	vorce Annulment
D. A. Abrah		
Date of birth verified by: PBirth Cert. Dudicial Decree	Color or Race White Negro O	ther (specify)
Date of birth verified by: Birth Cert. Dudicial Decree Other (Specify) 43 - 54 - 5458/6	Usual Occupation ambulan	Boat Company
1. Are you now or have you been adjudged, diagnosed or considered as:	Date of birth verified by: Birth Cert. Ju	dicial Decree
An Imbecile? Of Unsound Mind? No Yes Yes Yes	Other (Specify) St. Jan	ces May Buch St.
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, diag	
home for indigent persons?	An Imbecile?	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	Of Unsound Mind?	No Yes
5. Are you related to the bride closer than second cousin? No Ves	2. Are you under guardianship as a person of	
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 diseas	
8. Are you able to support a family?	4. Are you related to the groom closer than se	
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 intoxica 6. Are you now under the influence of a narco	
(If yes, answer questions a, b, c)	111 11 x 7	and the start
(a) List their full names, ages and addresses Name Age Address	7. Full name of father	DONO A - O
Age Autres	Residence of father (if deceased so state) Occupation of father	
	Birthplace of father (State or foreign coun	and and
	Minta	1160 11/11/1
(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	0-11-11-11-11-11-11-11-11-11-11-11-11-11
their support? Yes No	Residence of mother (if deceased so state).	and the state of t
11. Full name of father funds 4. Blantity	Occupation of mother	Race of mother Allt
Residence of father (if deceased so state) Affile Many May Mills	Birthplace of mother (State or foreign count	ry) Halling
Occupation of father Aldson Nu Rage of father Mill		
Birthplace of father (State or foreign country)	State of Indiana, County ofHENDRICKS	I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Tathelleng f. + orngy		R Stt
Residence of mother (if deceased so state)	Signed Carry	Molliage
Occupation of mother Lage Man Race of mother Addition	New Address 1.3	HURMONIO PRINC
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this	day of 1976.
State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Glen M Garrier	Clerk HENDRICKS Circuit Court
CALL DOWN BY		Olerk Hallands Sand
New Address 15 24 Harmong Prive	CONSENT OF PARENTS, PARENT OR GUAR	RDIAN
New Address.	We, the parents, of this applicant hereby give of	onsent for this marriage. If only one parent
Subscribed and sworn to before me this day of HAMA, ClerkHENDRICKS Circuit Court	signs, state facts which render the consent of t	
	signs, state facts which render the consent of t	ne 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 ofHENDRICKS	
County of HENDRICKS ss:	Signad	
Signed Father		Father
Signed	Signed	Mother
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me this	day of, 19
Clerk		Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR		
HENDRICKS County Co		
in authorizes and directs the issuance o	f a marriage license to the above named pa	arties.
RETURN OF MARRIAGE LICENSI		
Be It Remembered, there was filed in my office a marriage licen		
of Indiana dated the 1010 day of fully	, 19. authorizing the jo	ining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my o	nd tam & St	lart
Be it further remembered, the following marriage certificate was filed in my o	fice, to-wit:	
I, Aldelet S. Xetchen	received certify that on the	ay of filly
one thousand nine hundred and 76	at with the state of the state	, County of Marion,
State of Indiana, Groom Landy Jayle Bennett	of Cou	nty, State of Andlana
and, Bride Jam & Stuart of		
were by me united in marriage as authorized by a marriage license issued for County.	that purpose by the Clerk of the Circuit Co	urt ofHENDRICKS
Dated this day of July, 19.76	0 11 1 0	Add the state of
, 19.7.4	Signed Albert S.	Hitchen
A The same of the	Official Designation asst Sast	or
Filed and recorded in accordance with the laws of the State of Indiana this	28 day of	ely , 19 7 6.

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 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 1965 prescribes "False statement—Whoever procures the issuance of a license to marry by any false statement, representations of the statement of the sta MALE APPLICANT 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 (specify)... Color or Race Last Marriage Ended By: Death Divorce Annulment Usual Occupation Color or Race White Negro Other (specify). Birth Cert. Q Judicial Decree Date of birth verified by : raft Card Usual Occupation Other (Specify) Are you now or have you been adjudged, diagnosed or considered as:
 As imbettle?
 Date of birth verified by: Birth Cert. Judicial Decree Yes 🗆 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: No Yes 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 🗌 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 D Yes 🗌 3. Are you afflicted with a transmissible disease? No Yes 1. Are you now under the influence of a narcotic drug? No E Yes 🗌 NoF 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 🗆 No 🗆 9. Are you likely to so continue? Yes E 10. Do you have minor children from one or more former marriages? No Yes No Yes Of yes, answer questions a, b, c) (a) List their full names, ages and addresses Residence of father (if deceased so state) ... Address Birthplace of father (State or foreign country). Yes | No | (b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issue their support? Yes | No | Birthplace of mother (State or foreign country) Residence of father (if deceased so state): HENDRICKS Clerk HENDRICKS 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 render the consent of the other parent unnecessary... HATALY 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. County of HENDRICKS 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. HENDRICKS County..... RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE 19.6..., authorizing the joining together as husband and wife Be It Remembered, there was filed in my office a marriage license issued by the clerk of the.... I Usellan and day of July Be it further remembered, the following marriage certificate was filed in my office, to-wit: of Indiana dated the av haith Baptist Church, County of Hendricks, hereby certify that on the 24 Each of Lenghings County, State of Indiana 1, Stephen Gains and, Bride Belinda & Uselton of General the Circuit Court of HENDRICKS July 19 76. Official Designation..... Dated this Signed Illen M. Darvey Circuit Court Filed and recorded in accordance with the laws of the State of Indiana this

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE BK. 37 HENDRICKS

	County
MALE Medical Examination Report Dated 7/14/76	FEMALE Date of Application
Name of Physician Glenn W- Baker	Medical Examination Report Dated 7/14/76
	Name of Diagram
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	rement—Whoever procures the issuance of a license to many h
Name Middle Middle Cook	Name First Middle
Date of Birth Month Day Year 1956	Date of Birth Month Day Useltone
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 Halplo. Mury Jan
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Maiden Name if Different Maiden Name if Different
Last Marriage Ended By: Death Divorce Annulment D	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation Carpleton	Color or Race White Negro Other (specify)
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:	Date of birth verified by: Delirth Cert. Dudicial Decree
An Imbecile: No Diversity 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?
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
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	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)	7. Full name of father Willen Neutral Uselfton
(a) List their full names, ages and addresses Name Age Address	Residence of father (if deceased so state)
Name	Occupation of father Race of father
	Birthplace of father (State or foreign country)
ting or contributing to their support? Yes No	8. Full maiden name of mother Alle Mary David
(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. A sull English. Conf.	Occupation of mother Mildle 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 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
12. Full maiden name of mother while fall the little fall of the wills	Signed Selmola De Usaltax
Residence of mother (if deceased so state)	New Address P. R. P. BOO 40,9 VIII 45
Occupation of moth	A SECTION OF THE PROPERTY OF T
Birthplace of mothers. State of Indiana,	
County of HEND	
I (1000) Usell	, hereby give my consent for
New 1, Charles	1. 1. Sunto
Subscribed and sworn my daughler,	and the
CONSERVE OF PLANE MARRY Michael A	Cook.
We, the parents, of the	
signs, state facts which	llaron Usellon
	some me this 2/ stday of July 1976
Subscribed and sworn to be	efore me this your day of
State of Indiana, County of	III mm
Sig	Notary Public DONNA M. MUSICK
Sig	MY COMMISSION EXPIRES MAR 16 17 00 0
Subscribed and sworn	ssue The above named parties, the
- CD CD	URT. 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 CO	Court by written order issued chove named parties.
HENDRICKS County directs the issuance	ce of a marriage license to the above
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER HENDRICKS County authorizes and directs the issuance authorizes are also an authorizes and directs the issuance authorizes and directs the issuance authorizes and directs the issuance authorizes are also an authorizes and directs the issuance authorizes are also also also also also also also also	NSE AND MARRIAGE CERTIFICATE HENDRICKS icense issued by the clerk of the discense is
RETURN OF MARKIAGO	NSE AND MARRIAGE Of the HENDRICKS icense issued by the clerk of the joining together as husband and wife 19 6 , authorizing the joining together as husband and wife and Bellinks and day of July of Great of Lendricks
Be It Remembered, there was piece to the July	Belinka D. Spells
Michael A Coak was filed in m	my office, to-wit: 24 day of lendricks.
Be it further namembered the following marriage certification	hereby certify in 4 . f hurch, County of
of Indiana dated the day of partial of Indiana dated the day of partial of the following marriage certificate was filed in marriage.	at half Aricks County, State of Indiana,
Be it further remembered, the following marriage certificate was filed in m. I. Stephen Suns one thousand nine hundred and State of Indiana Groom Michael & Gook	at harth Backest Church, County of State of Indiana, of Lendricks County, State of Indiana, Of that purpose by the Clerk of the Circuit Court of HENDRICKS
one thousand nine hundred and State of Indiana, Groom Michael Gook and, Bride Belinda Statelton of were by me united in marriage as authorized by a marriage license issued County.	that murpose by the Clerk of the Circuit Court of
a marriage license issue	O at I - P Doland
County.	76. Signed All Stephenson
were by me united in marriage as authorized by a marriage as County. Dated this 24 day of July 19.	Official Designation august , 19 14.
a hi	Official Designation August , 19 Levels Glerk 8. January Circuit Court Signed HENDRICKS
County. Dated this 24 day of July Filed and recorded in accordance with the laws of the State of Indiana thi	8 9 day 01 Narweif Circuit Court Signed HENDRICKS Circuit Court

Form Prescribed By Indiana State Board of

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

File_

290

HENDRICKS Circuit Court

nap. 126, Ind. Acts 1905 HENDRICK	SCounty Date of Application
MALE 7/7/76	FEMALE Medical Examination Report Dated 7/7/76
Medical Examination Report Dated	Name of Physician William Van Osdal Md.
Name of Physician Warner 126 Indiana Acts 1905 prescribes "False state	tement-Whoever procures the issuance of a license to marry by any false statement, representa-
on or pretense shall be fined in any sum not exceeding in-	FEMALE APPLICANT
MALE APPLICANT ame First Middle F. Last	Name / First Middle Last
Bruce Lee Magers	Date of Birth Month Day Year
ate of Birth Month Day 1ear 932	Place of Birth (State or foreign, country)
lace of Birth (State or foreign country)	Buch Grand Murian Sed.
esidence Address Street or R. R. City County State	RR# Box 79AA Manuelle Sub.
revious Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different
To the state of th	Previous Marital Status: Never Married Number of Previous Marriages
	Last Marriage Ended By: Death Divorce Annulment Mattain a
olor or Race White Negro Other (specify)	Color or Page White Negro Other (specify)
sual Occupation Lay Black Dak	Color or Race White Negro Other (specify)
ate of birth verified by: Birth Cert. Judicial Deoree	Usual Occupation Mthys Irlacher - 1191.
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) 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	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?
. Are you afflicted with a transmissible disease?	2. Are you under guardianship as a person of unsound mind?
Are you now under the influence of intoxicating liquor?	3. Are you afflicted with a transmissible disease?
Are you she to support a family?	4. Are you related to the groom closer than second cousin? No Yes
Are you likely to so continue?	5. Are you now under the influence of intoxicating liquor? No Yes No Yes
. Do you have minor children from one or more former marriages? No Yes (If yes, answer questions a, b, c)	SILANDELL A. SUNNITED
(a) List their full names, ages and addresses	7. Full name of father
Name Age Address	Occupation of father As Afflict Alatting Race of father My Mitt
	Birthplace of father (State of foreign country)
	8. Full maiden name of mother flowthy 4. Jaurinch
(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 July Manual Race of mother Matte
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Fork Just apply Race of father Allast	
Birthplace of father (State or foreign country)	State of Indiana, County ofHENDRICKS
2. Full maiden name of mother Rh Mala Shouldflus	J. OC +
Residence of mother (if deceased so state)	Signed AND GREEN THE
Occupation of mother South The Many Race of mother Addition	New Address
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of 19
State of Indiana, Ounty of HENDRICKS I depose and state the information given in this application is true and correct.	THE DEMONSTRATE CIEVE CHERNDRICKS Circuit Court
Signed Bruse Lee Hodger	CONSTRUCT OF PARTY OF CHARDIAN
New Address A S S S S S S S S S S S S S S S S S S	CONSENT OF PARENTS, PARENT OR GUARDIAN
subscribed and sworn to before me this day of 19.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
DLA JJ MANGE ClerkHENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN	
We, the parents, of this applicant hereby give consent for this marriage. If only one parent igns, state facts which render the consent of the other parent unnecessary	
igns, state tacto miner relief the constitution of the other parent unnecessary	
	State of Indiana,
tate of Indiana,	County ofHENDRICKS
ounty ofHENDRICKS	Signed Father
Signed Father Signed	Signed Mother
Signed	Subscribed and sworn to before me thisday of
Clerk	Clerk
	RT. A marriage license having been refused to the above named parties, the
	ourt by written order issued 3 day warren and filed
	of a marriage license to the above named parties.
	SE AND MARRIAGE CERTIFICATE HENDRICKS Cinquit Count
	nse issued by the clerk of the HENDRICKS Circuit Court
There are party of	and And Jan Cullet
se it further remembered, the following marriage certificate was filed in my	office, to-wit:
Ser Talph & Wade	hereby certify that on the 24 day of July
ne thousand nine hundred and 76	at Friendswood , County of Marion
State of Indiana, Groom Duil & el Logigers	of Hendricks County, State of Indiana
na, Bride a senda film 6 verille of	Hendricks County, State of Indiana,
vere by me united in marriage as authorized by a marriage license issued for County.	that purpose by the Clerk of the Circuit Court of
Dated this 24 day of July , 197	6. 801051
	Signed Sex Salph S. Wadl
Filed and recorded in accordance with the laws of the State of Indiana	Official Designation Gastur, Friendswood Capi
Filed and recorded in accordance with the laws of the State of Indiana this	
	Signed Xlen M. Harvey Clerk

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No	291	Contract of the last	
File	37	Personal State of the	

MALE Medical Examination Report Dated 2-15-76	FEMALE Date of Application
Name of Physician Eric D. Clark	Medical Examination Report Dated 7-15-76
	N .
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "Palse station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	tement—Whoever procures the issuence of
Name Sylvester Middle Last	Name First FEMALE APPLICANT
Date of Birth Month Day Year	Date of Birth Month Modes
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) Day Year 1915
Residence Address Street or R. R. City County State	Residence & Somerwille man 1 44
Previous Marital Status: Never Married Number of Previous Marriages.	R*2 Bas 1/ 6 County State
	Maiden Name if Different Indianapales Ind.
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 Calio manager	Color or Rece White To
Date of birth verified by: Birth Cert. Undicial Decree Drivere Linease	Usual Occupation
Other (Specify) Let M. A. M. Ward. 53/0-10-0/28 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	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:
home for indigent persons? No Yes If answer to 3 is "yes" has the cause of such condition been removed? No Yes	An Imbecile? No Yes Of Unsound Mind?
4. Are you afflicted with a transmissible disease? No W Yes S. Are you related to the bride closer than second cousin?	2. Are you under guardianship as a person of unsound mind? No P 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? 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) (a) List their full names, ages and addresses	6. Are you now under the influence of a narcotic drug? 7. Full name of father Alkh A. Hall
(a) List their full names, ages and addresses Name Age Address	Residence of father (if deceased so state)
	Occupation of father
	Birthplace of father (State or foreign country) Salifat, Landa
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother. Beargianna Benner.
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state) Melloss, mass.
11. Full name of father Louis Linley Bay	Occupation of mother relieved Race of mother 9
Residence of father (if deceased so state) Dicessed	Birthplace of mother (State or foreign country) Charleston, Mass.
Occupation of father Race of father	State of Indiana, State of Indiana, I depose and state the information given in this application is true and correct.
Birthplace of father (State or foreign country) Indiana. 12. Full maiden name of mother Thursia Plive Wayman.	County of HENDRICKS
Residence of mother (if deceased so state) Deceased	Signed May & Middles
Occupation of mother Race of mother	New Address.V.I.C.I.
Birthplace of mother (State or foreign country) Indiana	Subscribed and sworn to before me this day of July, 1976.
State of Indiana. County of HENDRICKS as: I depose and state the information given in this application is true and correct.	Glerk HENDRICKS Circuit Court
Signed & Sylvester Bay	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address R. P. 2 BOX 160 Nudianopoly	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworn to before me this 15 day of July 1976.	signs, state facts which render the consent of the other parent unnecessary
Ilm m. Harriey 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, ss:
	County of HENDRICKS
State of Indiana,	Signed
County of HENDRICKS Father Signed Mother	Signed
0:	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me thisday of	- Ball No. of the Alexander of the Alexa
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUL	RT. A marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COULT	Court by written order issued
HENDRICKS County	of a marriage license to the
111	TO MA DRIAGE CERTIFICATE COURT
Be It Remembered, there was filed in my office a marriage lice	nse issued by the clerk of the herotoise issued by the clerk of the nse issued by the nse issued by the clerk of the nse issued by the nse
of Indiana dated the 20 th day of	may I medaris
of Indiana dated the Soth day of Sulfy Be it further remembered, the following marriage certificate was filed in my I. Sent alless One thousand size handed and	office, to-wit:
Be it further remembered, the following marriage certificate was filed in my I,	hereby certify that on the County of County of
76	· Johnston and Indiana,
State of L.	1/Sen Aricks County, State of HENDRICKS
one thousand nine hundred and State of Indiana, Groom Sylvester Bay and, Bride May Medaris of were by me united in marriage as authorized by a marriage license issued for County.	the Clerk of the Circuit Court
there is a marriage license issued for	1 + 011
County A	16. The state of t
day of	1076
	Official Designation
Gt to of Indiana this	Official Designation Minister , 1976. 26 day of July Clerk Signed Glen M. Jarvey Circuit Court HENDRICKS

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No		27	^		_
File					
0	0	. 2		1	

Chap. 126, Ind. Acts 1905 HENDRIC	County July 16 1976 Date of Application
WAYE	FEMALE
MALE Medical Examination Report Dated 7-12-16	Medical Examination Report Dated 7-12-76
Name of Physician M. O. Scama hom	Name of Physician M. O. Acamakow
	stement.—Whoever procures the issuance of a license to marry by any false statement, represents
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes raise station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	atement—Whoever procures the issuance of a license to marry by any false statement, representa-
MALE APPLICANT	FEMALE APPLICANT
Name First Middle Last	Name First Middle Share
Date of Birth Month Day Year	Date of Birth Month Day Year 1955
Place of Birth (State op 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
502 Marstella Nr. Brownsburg	Maiden Name if Different Maiden Name if Different
Previous Marital Status: Never Married [Number of Previous Marriages	Auden Aume is Districted
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	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	1
Other (Specify) # 8799	Usual Occupation Cypist
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes	Date of birth verified by Printh Cert. Undicial Decree
Of Unsound Mind? No Yes 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? No Yes	An Imbecile? No Ves
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 Ves \(\square\)	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 Very No Very	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?
(a) List their full names, ages and addresses Name Age Address	7. Full name of father
Name Age Address	Residence of father (if deceased so state) Same Occupation of father Salesman Race of father
	Birthplace of father (State or foreign country) Indianapoles
	8. Full maiden name of mother Hoberta ann yoraci
(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? Yes No	(A - b
Residence of father (if deceased so state) Same	Occupation of mother AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA
Occupation of father Salesman Race of father.	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country) Trawfords well	State of Indiana, County of HENDRICKS I depose and state the information given in this application is true and correct.
2. Full maiden name of mother Jan Louise Weingartner	County of
Residence of mother (if deceased so state) Same	Signed Volanda a Slow
Occupation of mother stacker Race of mother	New Address
Birthplace of mother (State or foreign country) Abc Afrid	Subscribed and sworn to before me this. day of July 196.
State of Indiana, I depose and state the information given in this application is true and correct.	Dlen M Harvey Clerk HENDRICKS Circuit Court
Signed A. Scott O. Manson	
New Address.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this. / de day of July 1976	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Glen M. Harvey ClerkHENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN	
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
igns, state facts which render the consent of the other parent unnecessary	
tate of Indiana,	State of Indiana, County of
County ofHENDRICKS	
SignedFather	Signed Father
SignedMother	Signed
ubscribed and sworn to before me thisday of, 19,	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
County Co	urt by written order issued
authorizes and directs the issuance o	f a marriage license to the above named parties.
RETURN OF MARRIAGE LICENSI	E AND MARRIAGE CERTIFICATE
The Di Artificitio, there was filed in my office a marriage licen	as issued by the state of the
f Indiana dated the day of	1076
Se it further remembered, the following marriage certificate was filed in my o	nd Solanda annette Shaw
Konneth Laylen Conson	pute, to fatt.
ne thousand hine number and	
cuto of thousand, droom-	· PND · · · · · · · · · · · · · · · · · · ·
of	Country State of the distance
least to the state of a state of a marriage license issued for the	that purpose by the Clerk of the Circuit Court of HENDRICKS
ounty. Dated this 7th day of August, 19.76	/
, 19	Signed Kenneth Jensen
	Official Designation. Pastor
iled and recorded in accordance with the laws of the State of Indiana this	24

Signed....

.....Circuit Court

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

No. 293 HENDRICKS County File 37 7-16.76

MALE	FEMALE Date of Application
Medical Examination Report Dated 7-9-76	FEMALE Date of Application
Name of Physician J. B. Warringr	Medical Examination Report Dated 7-9-76
ALL QUESTIONS MUST BE ANSWERED, Chapter 126, Indiana Acts 1905 prescribes "False station of pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT First Middle	Name of Physician G. B. Turana
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)"	tement—Whoever procures the
MALE APPLICANT	produces the issuance of a license to marry by any false statement, represents
Name Strat Middle Last	FEMALE APPLICANCE
Date of Birth Month Day Yell	Middle
Place of Birth (State of foreign country) 25 1938	Date of Birth Month Cast
Place of Birth Court of Cetter Mi-1:	Place of Birth (State or foreign country) Day Year 1951
Residence Address / Stdeet or R. R. City County State	the dea.
Ala Della Brownskurg Ind	5 3 2 M Street or R. R. City County
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name it/Different Indianapolis Ind
Last Marriage Ended By : Death Divorce Annulment	The same of the sa
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
Color or Rase White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation Colesman	Amnument [
Date of birth verified by : Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)
John (Specity) Marine Corp. Descharge Certificate	Usual Occupation So has 1 7 4 1
1. Are you now or have you been adjudged, diagnosed or considered as: An imbedia? No [2] Yes [Date of birth verified by: Birth Cert. Judicial Decree
No P Ves D	Other (Specify)
1 Are you now or have you been within five (5) years an inmate of	1. Are you now or have you been adjudged, diagnosed or considered as:
Manager to his "yes" has the cause of such condition has	An Imbecile? No Yes
Blood with a transmissible disease?	Of Unsound Mind?
5. Are you related to the bride closer than second cousin? No Yes Yes	2. Are you under guardianship as a person of unsound mind? No Yes
6. Are you now under the influence of intoxicating liquor? No P Yes	3. Are you afflicted with a transmissible disease? No → Yes □
7. Are you now under the influence of a marcotic drug? No Yes 8. Are you able to support a family?	4. Are you related to the groom closer than second cousin? No ✓ Yes □
9. Are you likely to so continue? Yes No	5. Are you now under the influence of intoxicating liquor? No Yes
10. Do you have minor children from one or more former marriages? No Yes (If yes, answer questions a, b, c)	6. Are you now under the influence of a narcotic drug? No 🗗 Yes 🗆
(a) List their full names, ages and addresses	7. Full name of father Charles L. Castle
Name Age Address	Residence of father (if deceased so state) Judicunage List, Jud
Lare Kalb 14 III Sincoln, St. Louis, min	
Lever talk y 12 " " " " "	Birthplace of father (State or foreign country) Indiana
Kristin Kelk 10 " " " " "	8. Full maiden name of mother margaret & Goole
(b) Are you supporting or contributing to their support? Yes P No (c) Are you complying with any court order or orders issued for	
their support? Yes P No [Residence of mother (if deceased so state) Indudus apalal
11. Pull name of father that lidern Talk	Occupation of mother Secretary Race of mother 91
Residence of father (1f deceased so state) dellaced	Birthplace of mother (State or foreign country) Indiana
Occupation of father Race of father 2	State of Indiana. I denote and state the information given
Birtholace of father (State or foreign country). Muchegan	State of Indiana, Sea: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Mary Letherine Luty	and a parles
Residence of mother (If deceased so state) Laginew, mich	Signed Si
Occupation of mother retired Race of mother It	New Address R. B. & Bax 177-1 Desunsburg, In
Birthplace of mother (State or foreign country) mich	Subscribed and sworn to before me this 16 day of July , 1976.
State of Indiana.	Glerk HENDRICKS Circuit Court
County of HENDRICKS as in the application is true and correct.	
Signed Harold Kolo	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address & R & Box 127-0 Brownsburg In	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworn to before me this 16 day of July , 1976.	signs, state facts which render the consent of the other parent unnecessary
Elen m. Harrey Gerk HENDRICKS Circuit Court	signs, state facts which render the consent
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 country and the contract of the country of	
the desired to the countries of the coun)
	State of Indiana, State of MENDRICKS ss:
	County of HENDRICKS Father
State of Indiana. County of HENDRICKS.	County of HENDRICKS
State of Indiana. County of HENDRICKS Signed Father	County of HENDRICKS Father Signed Mother
State of Indiana. County of HENDRICKS Signed Father Signed Mother	County of HENDRICKS Father Signed Mother Signed day of 19
State of Indiana. County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19	County of HENDRICKS Father Signed Mother
State of Indiana. County of HENDRICKS Signed Mother Signed Mother Subscribed and sworn to before me this day of Clerk	County of HENDRICKS Signed Mother Signed day of 19 Clerk Clerk
State of Indiana. County of HENDRICKS Signed Mother Signed Mother Subscribed and sworn to before me this day of Clerk	County of HENDRICKS Signed Mother Signed day of 19 Clerk Clerk
State of Indiana. County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19	County of HENDRICKS 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 and filed
State of Indiana. County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19	County of HENDRICKS 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 aurt by written order issued and filed a marriage license to the above named parties.
State of Indiana. County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19	Signed
State of Indiana. County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19	Signed
State of Indiana. County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT COUNTY HENDRICKS County County authorizes and directs the issuance of RETURN OF MARRIAGE LICENSE	Signed
State of Indiana. County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19	Signed
State of Indiana. County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19	Signed
State of Indiana. County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19	Signed
State of Indiana. County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19 COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT COUNTY In authorizes and directs the issuance of Indiana dated the 20 day of July Be it further remembered, the following marriage certificate was filed in my of I. M. Hieber	Signed
State of Indiana. County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT COUNTY In authorizes and directs the issuance of Indiana dated the day of day of July Be it further remembered, the following marriage certificate was filed in my of I. L. M. Hieber One thousand wire handred and 76	Signed Signed Signed Signed Signed Subscribed and sworn to before me this Clerk T. A marriage license having been refused to the above named parties, the and filed and sworn to the above named parties. E AND MARRIAGE CERTIFICATE HENDRICKS Signed Mother Clerk Clerk T. A marriage license having been refused to the above named parties, the and filed and filed with the series issued by the clerk of th
State of Indiana. County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT COUNTY In authorizes and directs the issuance of Indiana dated the day of day of July Be it further remembered, the following marriage certificate was filed in my of I. L. M. Hieber One thousand wire handred and 76	Signed Signed Signed Signed Signed Subscribed and sworn to before me this Clerk T. A marriage license having been refused to the above named parties, the and filed and sworn to the above named parties. E AND MARRIAGE CERTIFICATE HENDRICKS Signed Mother Clerk Clerk T. A marriage license having been refused to the above named parties, the and filed and filed with the series issued by the clerk of th
State of Indiana. County of HENDRICKS Signed Mother Subscribed and sworn to before me this day of 19	Signed 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 and filed surt by written order issued and filed a marriage license to the above named parties. E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court use issued by the clerk of the see issued by the clerk of the fice, to-wit fice,
State of Indiana. County of HENDRICKS Signed Mother Signed Mother Subscribed and sworn to before me this day of 19	Signed 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 nurt by written order issued and filed fa marriage license to the above named parties. E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court use issued by the clerk of the 19.76 authorizing the joining together as husband and wife fice, to-wit: The day of August hereby certify that on the 7th day of Marion at Indianapolis County, State of Indiana Marion County, State of Indiana Marion Hendricks County, State of Indiana Marion Hendricks H
State of Indiana. County of HENDRICKS Signed Signed Subscribed and sworn to before me this day of COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY HENDRICKS TO MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY IN authorizes and directs the issuance of Indiana dated the day of July Be it further remembered, the following marriage certificate was filed in my office a marriage license thousand nine hundred and 76 State of Indiana, Groom Harold J. Kolb and, Bride Joyce L. Poole were by me united in marriage as authorized by a marriage license issued for County. Dated this and 15 th August 15 th August 1976.	Signed Signed Signed Subscribed and sworn to before me this Clerk T. A marriage license having been refused to the above named parties, the and filed and suring license to the above named parties. E AND MARRIAGE CERTIFICATE HENDRICKS Lise issued by the clerk of the sissued by the clerk of the se issued by the clerk of the county of the second
State of Indiana. County of HENDRICKS Signed Signed Subscribed and sworn to before me this day of COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY HENDRICKS TO MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY IN authorizes and directs the issuance of Indiana dated the day of July Be it further remembered, the following marriage certificate was filed in my office a marriage license thousand nine hundred and 76 State of Indiana, Groom Harold J. Kolb and, Bride Joyce L. Poole were by me united in marriage as authorized by a marriage license issued for County. Dated this and 15 th August 15 th August 1976.	Signed Signed Signed Subscribed and sworn to before me this Clerk T. A marriage license having been refused to the above named parties, the and filed and suring license to the above named parties. E AND MARRIAGE CERTIFICATE HENDRICKS Lise issued by the clerk of the sissued by the clerk of the se issued by the clerk of the county of the second
State of Indiana. Country of HENDRICKS Signed. Subscribed and sworn to before me this day of 19 COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY. COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY. COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY. RETURN OF MARRIAGE LICENSE Of Indiana dated the 20 day of 20 Be it further remembered, there was filed in my office a marriage license Of Indiana dated the 20 day of 20 Be it further remembered, the following marriage certificate was filed in my office a marriage license I. I. M. Hieber One thousand nine hundred and 76 State of Indiana, Groom Harold J. Kolb and, Bride Joyce L. Poole were by me united in marriage as authorized by a marriage license issued for County. Dated this 15th day of August 19.76	Signed Signed Signed Signed Subscribed and sworn to before me this Clerk T. A marriage license having been refused to the above named parties, the and filed fa marriage license to the above named parties. E AND MARRIAGE CERTIFICATE Be issued by the clerk of the 19.76., authorizing the joining together as husband and wife fice, to-wit: August August Hendricks County, State of Indiana Marion County of Marion Hendricks Marion County, State of Indiana Marion County, State of Indiana Marion County of Marion Hendricks Marion County, State of Indiana Marion County of Marion Hendricks Marion August August Official Designation August August Clerk
State of Indiana. County of HENDRICKS Signed Signed Subscribed and sworn to before me this day of COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY HENDRICKS TO MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY IN authorizes and directs the issuance of Indiana dated the day of July Be it further remembered, the following marriage certificate was filed in my office a marriage license thousand nine hundred and 76 State of Indiana, Groom Harold J. Kolb and, Bride Joyce L. Poole were by me united in marriage as authorized by a marriage license issued for County. Dated this and 15 th August 15 th August 1976.	Signed Signed Signed Signed Subscribed and sworn to before me this Clerk T. A marriage license having been refused to the above named parties, the and filed fa marriage license to the above named parties. E AND MARRIAGE CERTIFICATE Be issued by the clerk of the 19.76., authorizing the joining together as husband and wife fice, to-wit: August August Hendricks County, State of Indiana Marion County of Marion Hendricks Marion County, State of Indiana Marion County, State of Indiana Marion County of Marion Hendricks Marion County, State of Indiana Marion County of Marion Hendricks Marion August August Official Designation August August Clerk

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

File.

HENDRICKS County

Date of Application

MALE 7 / 3 7/	FEMALE 7-13-7/	
Medical Examination Report Dated	Medical Examination Report Dated	
Name of Physician () Souddon () .	Name of Physician 4. // Schlager /// W	
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)".	tement—Whoever procures the issuance of a license to marry by any false statement, representa-	
MALE APPLICANT	Name First Middle Last	
Name First Middle Bushard	Linda Wirsene Hodge	
Date of Birth Month Day Year	Date of Birth Month Day Year 1956	
Place of Birth (State or foreign country).	Place of Birth (State or foreign country)	
Residence Address Street of R.R. Gity County State	Residence Address Street or R. R. Gity County State	
518 Industry Apt 1. Brownshing, In	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 Construction	Color or Race White Negro Other (specify)	
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation (lenk)	
Other (Specify) # 38.3 4	Date of birth verified by: Birth Cert. Judicial Decree	
An Imbecile? Of Unsound Mind? No Yes	Other (Specify) # 20359-B	
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	
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 6. Are you now under the influence of intoxicating liquor? 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	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	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 Handle Surfadige	
Name Age Address	Residence of father (if deceased so state) A Municipal Communication of the communication of	
	Occupation of father Aspulla Race of father 18th	
	Birthplace of father (State or foreign country)	
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Daniel	
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state) DAMA SUMMY STATES	
11. Full name of father frank J. Burkhard	Occupation of mother Race of mother Wh	
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)	
Occupation of father Julian Bace of father Wh	State of Indiana,	
Birthplace of father (State or foreign country)	County of	
12. Full maiden name of mother filled for the state of th	and a Hodge	
Residence of mother (if deceased so state)	Signed XIII A CONTROL (A) A THI	
Occupation of mother Bace of mother 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 day of 19	
County of HENDRICKS ss: in this application is true and correct.	Clerk HENDRICKS Circuit Court	
Signed Dell Sankar	CONSENT OF PARENTS, PARENT OR GUARDIAN	
New Address 5.18 CMCMA 14	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 19.		
Circuit Court	signs, state facts which render the consent of the other parent unnecessary	
CONSENT OF PARENTS, PARENT OR GUÁRDIAN 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 ofHENDRICKS	
County of HENDRICKS	SignedFather	
Signed Father	Signed	
Signed	Subscribed and sworn to before me thisday of	
	Clerk	
	RT. A marriage license having been refused to the above named parties, the	
	ourt by written order issued and filed	
inauthorizes and directs the issuance of		
RETURN OF MARRIAGE LICENS	E AND MARRIAGE CERTIFICATE	
of Indiana dated the 23 day of Mall	use issued by the clerk of the HENDRICKS Circuit Court	
Itilliam michael Burk bard	and Linda Dorsens Hodge	
Be it further remembered, the following marriage certificate was filed in my of	office, to-wit:	
1, See Fenneth & Vetters		
one thousand nine hundred and	at Drownsburg , County of Dendricks	
State of Indiana, Groom Milliam Trichnel Burkhard of Nendricks County, State of Indiana, and, Bride Sunda Dorsene Hodge of Hendricks County, State of Indiana,		
and, Bride (1) Medical Swill Of Of	Lendricks County, State of Indiana,	
	that purpose by the Clerk of the Circuit Court ofHENDRICKS	
Dated this 30 day of July , 19 76	2 P & 10 87 H	
	Signed Ser of entirely 6 between	
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Sastor Darlell Chapel 76, M. Ch	
The state of Thuman this	Signed Glen M. Harrief Clerk	
	HENDRICKS Circuit Court	
	Grown Court	

APPLICATION FOR MARRIAGE

Ame	MDIANA			
ATION	FOR MARRIAGE	LICENA	No. 29	5
		LICENSE		

HENDRIC	County File	
MALE Medical Examination Report Dated 7/16/2/	FEMALE Date of Application	
Name of Physician Carl L. Neinlein ma	FEMALE Medical Examination Report Dated 7/9/76	
, , , , ,	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. (France States)	tement When the B. Municia Dad.	
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, represents-	
Name First Wandle Middle	Name FEMALE APPLICANT	
Date of Birth Month Day Year	- Middle Middle	
Place of Birth (State or foreign country) (1928	Date of Birth Month Day Bradley	
Residence Address Street or R. R. City County	Place of Birth (State of foreign country)	
299 Cattorsburg Rf Meny State	Residence Address Street or R. R.	
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Alchie Manuer State	
Last Marriage Ended By: Death Divorce Annulment 1976 Alm	water Fields	
1110 72000	Previous Marital Status: Never Married Number of Previous Marriages	
(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	
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?	Man maple	
Of Unsound Mind?	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 and the state of a county and the county and the state of a county and the state of a county and t	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 Yes	Of Unsound Mind?	
 5. Are you related to the bride closer than second cousin? 6. Are you now under the influence of intoxicating liquor? No ☐ Yes ☐ Yes ☐ 	2. Are you under guardianship as a person of unsound mind? No. Yes No. Y	
7. Are you now under the influence of a narcotic drug? No Yes	A Are you related to the annual land	
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 influence of a narcotic drug?	
(a) List their full names, ages and addresses	7. Full name of father Addyl Fills	
Name Age Address	Residence of father (if deceased so state)	
	Occupation of father block block and Race of father block	
	Birthplace of father (State or foreign country)	
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother DANGARET Algel Control	
(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 Wally I. Walley I.	Occupation of mother All Race of mother	
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)	
Occupation of father Attach Race of father Attach	State of Indiana, State of Indiana, State	
Birthplace of father (State or foreign country)	County of HENDRICKS in this application is true and correct.	
12. Full maiden name of mother that the state of the stat	Signed Marzonie Carol Brokley	
Residence of mother (if deceased so state). Occupation of mother	New Address 373 M Richie In apro Ind	
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this	
State of Indiana.	Ill s M. Tallyselle Clerk HENDRICKS Circuit Court	
County of HENDRICKS in this application is true and correct.	- Market of the profit of the state of the s	
New Address 372 N. Richik INDIANA - his	CONSENT OF PARENTS, PARENT OR GUARDIAN	
	We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
Joseph Control of Delote He allowed	signs, state facts which render the consent of the other parent unnecessary	
All Manuely 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		
The state and which religion to the state of	State of Indiana,	
	County of HENDRICKS	
State of Indiana,	SignedFather	
County ofHENDRICKS	SignedMother	
Signed Father Signed Mother	Subscribed and sworn to before me thisday of	
Subscribed and sworn to before me thisday of	Subscribed and Section Clerk	
	found to the above named parties, the	
	T. A marriage license having been refused to the above and filed	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	ourt by written order issued	
in authorizes and directs the issuance of	of a marriage license to the above AME	
n authorizes and directs the issuance of RETURN OF MARRIAGE LICENS	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court	
Be It Remembered, there was filed in my office a marriage licen	19 16, authorizing the joining together as husband and wife	
of Indiana dated the	Manifelle	
A I I was a like the same of the man	tice, to-wit.	
Be it further remembered, the following marriage certificate was filed in my office, to-wit: I, John Modesitt at least County of Standards of County, State of State of Indiana. State of Indiana. State of Indiana.		
1, John J. Moderall	at Iron dricks County, State of Judianes	
thousand nine hundred and	County State of State of	
one thousand nine hundred and The County, State of State of Indiana, Groom Donald Harrison walker of Marion County, State of Indiana, Groom Donald Harrison walker of Marion County, State of Indiana, Bride Marion County Dradley of Marion Hendricks and, Bride Marion County 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 Marion County.		
were by		
Dated this 7th day of liegues	omial Designation Minister 19 76	
The second second second second	19th day of August Clerk	
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Slen M Harvely Circuit Court	
and recorded in accordance with the wife of	HENDRICKS	

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS

County

No. 36

File Bk37

Part of Application

HENDRICE	Date of Application	
	FEMALE	
MALE Medical Examination Report Dated 7-/5-76	Medical Examination Report Dated 7-15-76	
Name of Physician William Edwards M.D.	Name of Physician William Edwards	
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	tement-Whoever procures the issuance of a license to marry by any false statement, representa-	
MALE APPLICANT	FEMALE APPLICANT	
Name First Middle Last	Name First Middle Last	
James allen alejander	Date of Birth Month Day Year	
Date of Birth Month Day Fear	June . 24 1958	
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	
L#3 Box 466 Plainfuld Lendricks Ind	Maiden Name if Different Maiden Name if Different	
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name it Directors	
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages	
Last Marriage Ended By: Death Divorce Immanded	Last Marriage Ended By: Death Divorce Annulment	
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Division Division Death Deat	
Usual Occupation	Color or Race White Negro Other (specify)	
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation M. A. France	
Other (Specify) Reinlistment agreement	- Marinag	
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?	Other (Specify) Kelalistment agreement	
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 solum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes	
home for indigent persons?	N. 5/	
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		
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? 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? Yes No	5. Are you now under the influence of intoxicating liquor? No Yes	
10. Do you have minor children from one or more former marriages? No Yes (If yes, answer questions a, b, c)	6. Are you now under the influence of a narcotic drug? No P Yes	
(a) List their full names, ages and addresses	7. Full name of father Willy ght Melaw	
Name Age Address	Residence of father (if deceased so state)	
	Occupation of father Much Race of father W	
	Birthplace of father (State or foreign country)	
	8. Full maiden name of mother Sensia Mae Maynas	
(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) Danville, Shill	
their support? Yes No		
11. Full name of father Sonald & Alefandia	Occupation of mother Samuel Race of mother	
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)	
Occupation of father Machinist Market Market	State of Indiana,	
Birthplace of father (State or foreign country)	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 Mouth Usugunus Junto.	- Dobas B malow	
Residence of mother (if deceased so state)	Signed	
Occupation of mother & Race of mother Race of mother	New Address. // DONOCHUS THES	
Birthplace of mother (State or foreign country) Maple, Salar	Subscribed and sworn to before me this 19th day of July 1976	
State of Indiana, Security of HENDRICKS	Elen M Lawey Gerk HENDRICKS Circuit Court	
County of HENDRICKS in this application is true and correct.	OFFR HAMMAN CITEBUT COURT	
Signed All Holles All Holles	CONSENT OF PARENTS, PARENT OR GUARDIAN	
New Address JANASA AUGISTICS		
Subscribed and sworn to before me this day of 19.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
Mer // ClarkHENDRICKS 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 ofHENDRICKS	
County of HENDRICKS.	SignedFather	
Signed Father	SignedMother	
Signed		
Subscribed and sworn to before me thisday of, 19	Subscribed and sworn to before me thisday of	
Clerk	Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COLUM		
HENDRICKS County	RT. A marriage license having been refused to the above named parties, the	
inC	ourt by written order issued and filed	
	of a marriage license to the above named parties.	
RETURN OF MARRIAGE LICENS	E AND MARRIAGE CERTIFICATE	
We It Remembered, there was filed in my office a marriage licer	nse issued by the clerk of the HENDRICKS Circuit Court	
of Indiana dated the day of day	, 19.76., authorizing the joining together as husband and wife	
Be it further remembered, the following marriage certificate was filed in my	. (() 2 // // 722 //	
I Lead O'noil The arrange certificate was filed in my		
one thousand mine handward and M/	hereby certify that on the 24 day of July	
State of Indiana Communication	at dron Christian Church Country of Gendricks,	
State of Indiana, Groom James Wellen (Sepander)	of Kendricks)	
and, Brute of of	Mindricks Country 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	
Dated this 24 day of 24		
Dated this 24 day of July 197	6. Signed Teal O Thounce	
	Official Designation Minister	
Filed and recorded in accordance with the laws of the State of Indiana this	27 Janes Designation	
the same of the State of Indiana this		
	Signed Alln M. Sarveef Clerk	

...HENDRICKS

...Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE HENDRICKS County File_

MALE Medical Examination Report Dated 7-17-76	FEMALE Date of Application	
Name of Physician WM. Edwards m	Medical Examination Report Dated 7-17-76	
	1.1	
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	tement—Whoever procures the issues of the	
First	the assuance of a license to marry by any false statement, representa-	
Cohnny Ried William	Name (First	
Date of Birth Day Year	Date of Birth Month Marie Ochan	
Place of Birth (State or foreign country)	Place of Birth/(State or foreign country) Day Year / 957	
Residence Address Street or R.R. City County State	Residence Address Street and M. Car.	
Previous Marital Status: Never Married Number of Previous Marriages	10032 His County State	
The state of the s	Maiden Name if Different Cutch, Sulple Hind. On	
	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 Aufrond	Color or Resea	
Date of birth verified by: Sirth 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	
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 asylum or	1. Are you now or have you been adjudged, diagnosed or considered as:	
home for indigent persons? No Yes Yes If answer to 3 is "yes" has the cause of such condition been removed? No Yes	An Imbecile? No Yes Of Unsound Mind?	
4. Are you afflicted with a transmissible disease? No 🗹 Yes 🗆	2. Are you under guardianship as a person of unsound mind? 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? No Yes S. 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 Vo No	5. Are you now under the influence of intoxicating liquor? No W 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 Ves 7. Full name of father A ABA A ABANGE	
(a) List their full names, ages and addresses Name Age Address	7. Full name of father. F. W. W. Residence of father (if deceased so state)	
	Occupation of father Baskur Race of father Wh	
	Birthplace of father (State or foreign country)	
(b) Are you supporting or contributing to their support? Yes No □	8. Full maiden name of mother Ausley T. Prover	
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state) Suduanapolis. In.	
11. Full name of father grows M. Wilson	Occupation of mother	
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)	
Occupation of father Lilet Race of father Mines	State of Indiana, 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	
12. Full maiden name of mother	Signed Lamma (pliam)	
Occupation of mother The Race of mother Wh	New Address 191 Lareves A.D.	
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of 1926	
State of Indiana, I depose and state the information given in this application is true and correct.	The Manuay Clerk HENDRICKS Circuit Court	
County of HENDRICKS Signed AM Signed	CONSENT OF PARENTS, PARENT OR GUARDIAN	
New Address APT 147 Palaeview Prive	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 Julia 19.66	signs, state facts which render the consent of the other parent unnecessary	
Dun 11. Harung Clerk HENDRICKS Circuit Court	3.81.0	
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	State of Indiana, ss:	
	County of HENDRICKS	
State of Indiana,	Signed Mother	
County of HENDRICKS Father Signed Mother	Signed	
Signed	Subscribed and sworn to before me this	
Subscribed and sworn to before me thisday of		
OFFE	Il a corrigge license having been refused to the above named parties, the	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT COUNTY COUN	eart by written order issued	
HENDRICKS County	of a marriage license to the dist	
au a	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court	
RETURN OF MARKING	nee issued by the cierk of the state of the	
Be It Remembered, there was filed in my office a Desley	19.76, authorizing Osbarne	
of Indiana dated the and formula		
Be it that on the garriage certificate was fued to		
1. A Children to the state of t	1 A M Of A State Comments	
State of Indiana, Groom Johnny Seed Welson of and, Bride Donnes Marie Osborne of were by me united in marriage as authorized by a marriage license issued for County.	HENDRICKS HENDRICKS	
Were here a state of the state	0 0 4 1.	
Dated this 36 day of	- 1 Designation Minus Illa, Descript 19 7/2.	
tions this	Official Designation 2 day of Clerk Signed Signed HENDRICKS Circuit Court	
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Allen M. Handlicks Circuit Court	

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

File 7-19-76

HENDRICKS County

	Date of Application
MALE	FEMALE Medical Examination Report Dated 7-/3-76
Medical Examination Report Dated 7-13-76	0 1 4 4/ 1 1
Name of Physician Carl L. Heinlein	Name of Physician Carl S. Velinlein
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 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 live hundred domain (toosto)	FEMALE APPLICANT
MALE APPLICANT Name First Middle , Last	Name First Middle Last
Plase napier	Date of Birth Month Day Year
Date of Birth Month Day Year	Date of Birth Month Day Year Subrearch 9 1949
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)
Residence Address Street on R. City County State	Residence Address Street or R. R. City County State
251 mackey ad. Danville, and	Maiden Name if Different Clayton Ind.
Previous Marital Status: Never Married Number of Previous Marriages	Glenda Carol Mc Lamey
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
0 .	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Dudicial Decree Bur of Vilal Statistics	Color or Race White Negro Other (specify)
Other (Specify)	Usual Occupation Muerals Rich
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?	Other (Specify) At Francis Haspilal, Blick Drove
2. Are you under guardianship as a person of unsound mind? No Yes 3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No 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 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 2- Yes
7. Are you now under the influence of intoxicating fiquor? No Yes	4. Are you related to the groom closer than second cousin? No — Yes
8. Are you able to support a family? Yes No Ver West	5. Are you now under the influence of intoxicating liquor? No Yes
9. Are you likely to so continue? Yes Yes No \(\) 10. Do you have minor children from one or more former marriages? No \(\) Yes \(\)	6. Are you now under the influence of a narcotic drug? No Yes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father Glendon Charles me Kamey
Name Age Address	Residence of father (if deceased so state) Claufton, Ind.
Beverly ann napier 8 251 Markey Sd., Danve	le Occupation of father relieved Race of father g
michelle Deane napier 3 " " "	Birthplace of father (State or foreign country) Indiana
	8. Full maiden name of mother narma Juan Gannice
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for	35 W. Kentuckey Residence of mother (if deceased so state) Claryton Ind
their support? Yes No 11. Full name of father	Occupation of mother Lauselle Race of mother 2h
Residence of father (if deceased so state) Dansell, Ind.	Birthplace of mother (State or foreign country) Indiana
Occupation of father Self-employed Race of father W	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country) Klantus Reg	State of Indiana, I depose and state the information given
12. Full maiden name of mother. Lynce D. Radle	County of HENDRICKS in this application is true and correct.
Residence of mother (if deceased so state) Danville, Ind	Signed X Illerda C. Jane.
Occupation of mother hausewife Race of mother gr	New Address 25 / Mackey Rd. Nanue
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.	Glen M. Harvey Clerk HENDRICKS Circuit Court
0	Clerk Deliveries Court
New Address 251 Mackey Ra Januelle	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this. 19 day of July 1976	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Illin M. Harrief ClerkHENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
	signs, sales rates which tends the consent of the other parent uniteresting
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 ofHENDRICKS
County of HENDRICKS	SignedFather
Signed Father	Signed
Signed	Subscribed and sworn to before me this
CIETA	Cierk
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	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	se issued by the clerk of the HENDRICKS Circuit Court
of Indiana dated the day of July	, 19.76., authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my o	na Suria and and
i, but with the state of the st	hereby certify that on the
one thousand nine hundred and	at Bellvelle
State of Indiana, Groom	· · · · · · · · · · · · · · · · · · ·
and, Bride Glenda Carol Sane of	Gendricks 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 HENDRICKS
County.	HENDRICKS
Dated this 23 day of July, 19.7.	6. Signed august V. Huber
	Official Designation Minister
Filed and recorded in accordance with the laws of the State of Indiana this	2 M
THE PARTY OF THE P	day of
the state of the State of Thatana this	27 day of July, 1976. Signed Glen M. Garvey Clerk

Form Prescribed By Indiana State Board of Health under Authority

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 County HENDRICKS 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 00 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 Color or Race White ☑ Negro □ Other □ (specify)... Date of birth verified by: Birth Cert. Judicial Decree Other (Specify) JAL2 1. Are you now or have you been adjudged, diagnosed or considered as: Date of birth verified by: DBirth Cert. | Judicial Decree No Yes 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? No Yes 🗆 If answer to 3 is "yes" has the cause of such condition been removed? Yes 🗆 No 🗆 No Yes 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 Yes No Yes 🗌 6. Are you now under the influence of intoxicating liquor? 3. Are you afflicted with a transmissible disease? No D 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? Yes 🖾 No 🗆 5. Are you now under the influence of intoxicating liquor? No Yes 9. Are you likely to so continue? Yes No 🗆 10. Do you have minor children from one or more former marriages? No 🗆 Yes 🗌 6. Are you now under the influence of a parcotic drug? No Yes (If yes, answer questions a, b, c) 7. Full name of father Alland (a) List their full names, ages and addresses Residence of father (if deceased so state). Age Address Occupation of father Tolline Birthplace of father (State or foreign country). (b) Are you supporting or contributing to their support? Yes | No | (c) Are you complying with any court order or orders issued for their support? No 🗆 Yes 🗌 Birthplace of mother (State or foreign country) ... Residence of father (if deceased so state) .. Occupation of father Willes Birthplace of father (State or foreign country). HENDRICKS 12. Full maiden name of mother Mammue Residence of mother (if deceased so state) ... Occupation of mother... Birthplace of mother (State or foreign country) State of Indiana, County of HENDRICKS Late 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. Clerk HENDRICKS Alex M. Garaly 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, County of HENDRICKS Father Subscribed and sworn to before me this. COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the ..authorizes and directs the issuance of a marriage license to the above named parties. HENDRICKS County..... RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court Be It Remembered, there was filed in my office a marriage license issued by the clerk of the...... ..., 19.76, authorizing the joining together as husband and wife Janesose R Burgman 244 of Indiana dated the ..., Be it further remembered, the following marriage certificate was filed in my office, to-wit hereby certify that on the 24 Hates of Hendricks County, State of Indiana John C. mourer and, Bride Janysse L. Busgman of Sendricks Court of HENDRICKS uly , 19.76 ... Official Designation... Dated this 24 Filed and recorded in accordance with the laws of the State of Indiana thisCircuit Court Form Prescribed By Indiana State Board of Health under Authority

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No	300	
File_	37	
	~ ~	,

Chap. 126, Ind. Acts 1905 20-76 HENDRICKS County Date of Application FEMALE MALE Medical Examination Report Dated Medical Examination Report Dated. rung 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 Date of Birth Previous Marital Status: Never Married T Number of Previous Marriages Previous Marital Status: Never Married Marine 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 maintenance Date of birth verified by:

Birth Cert.

Judicial Decree Usual Occupation Other (Specify) Selective. Service ☐ Birth Cert. ☐ Judicial Decree Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Date of birth verified by: No Yes Yes Other (Specify) bally Seg. 8224 Of Unsound Mind? No 🗗 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? No Yes An Imbecile? No Z Yes Of Unsound Mind? 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? No Z 2. Are you under guardianship as a person of unsound mind? Yes 🗌 No 🖾 5. Are you related to the bride closer than second cousin? 3. Are you afflicted with a transmissible disease? No Yes No 🗷 Yes 🗌 6. Are you now under the influence of intoxicating liquor? 4. Are you related to the groom closer than second cousin? No Yes 7. Are you now under the influence of a narcotic drug? No Yes Yes 🗸 No 🗌 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? 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 walter (a) List their full names, ages and addresses 329 Hancock Residence of father (if deceased so state) Slain Address Name Occupation of father Suplantes Birthplace of father (State or foreign country). 8. Full maiden name of mother Margaret Eloise.
329 Lancock
Residence of mother (if deceased so state) Slainfield. (b) Are you supporting or contributing to their support? No 🗌 (c) Are you complying with any court order or orders issued for their support? No 🗆 Occupation of mother Jauselettele 11. Full name of father Birthplace of mother (State or foreign country) ... Occupation of father I depose and state the information given in this application is true and correct. State of Indiana, Birthplace of father (State or foreign country).... County ofHENDRICKS 12. Full maiden name of mother. Adapthe Residence of mother (if deceased so state) Brauns Occupation of mother Huesewife Birthplace of mother (State or foreign country). State of Indiana, I depose and state the information given in this application is true and correct. Clerk HENDRICKS County of HENDRICKS CONSENT OF PARENTS, PARENT OR GUARDIAN New Address 244 N. JEFFERSON We, the parents, of this applicant hereby give consent for this marriage. If only one parent Subscribed and sworn to before me this 26 Glen M. Harrief ClerkHENDRICKS 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 Signed. ..Father Mother Signed. .Mother Subscribed and sworn to before me this......day of...... 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 HENDRICKS 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, theze was filed in my office a marriage license issued by the clerk of the HENDRICKS Circuit Court dated the 28th day of July , 1976, authorizing the joining together as husband and wife Gilbert Gene Minton and Elaine Marie Seeder of Indiana dated the ... Be it further remembered, the following marriage certificate was filed in my office, to-wit: I, A Fent Wellen hereby certify that on the 3/ day of 76 at slainfield , Country of Hendricks one thousand nine hundred and..... State of Indiana, Groom Hilbert Lene Minton of Herdricks County, State of Indiana and, Bride Elaine Marie Geeder of Hendreiks County, State of Indiana, Dated this 3/ day of July, 19 76. Signed J. Fent allen Official Designation Minister Signed Llen M. Harrief Clerk HENDRICKS Circuit Court

Fori Indi Hea Cha

Form Preacribed By Indiana State Board of	STATE OF	INDIANA	
Health under Authority Chap. 126, Ind. Acts 1905 APPLIC	CATION FOR M	MARRIAGE LICENSE No. 30	
	HENDRICK	File File	THE ROOM PROPERTY.
	TIENDRICK	County	0-7/
MALE Medical Examination Report Dated 7-	12-76	FEMALE Date of App	plication
Name of Physician M. D. Acamahon	- 10	Media 1 D	
	v		
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts tion of pretense shall be fined in any sum not exceeding five hundred	1905 prescribes "False ste	Name of Physician M. D. Scamahov	n
MALE APPLICANT	dollars (\$500.00)".	Whoever procures the issuance of a license to marry by any false sto	Hemont
Name First Middle	P Last	FEMALE APPLICANT	tement, representa-
Date of Birth Month Day	Symmonds	Name First Middle	
Place of Birth (State or torugh country)	1938	Date of Birth Month Day	ruse
Warson, Del.		Place of Birth (State or foreign country)	Year 1940
Residence Address Street or R. R. City P. Co	unty State	Residence Add Dargerwille, 1	The state of the s
Previous Marital Status: Never Married Number of Previous Ma	spore, in.	Maiden Name & Dig. By 294 Maiden Name & Dig. By 294	ty State
	The state of the s	Page if Different	end, In.
1	0	Previous Marital Status: Never Married Number of Previous Marri	
Color or Race White Negro Other (specify)		Last Marriage Ended By: Death Divorce Annulment	ages
Usual Occupation factors		The state of the s	
Date of birth verified by : Birth Cert. Judicial Decree	STATE OF THE PERSON NAMED IN	Color or Race White Negro Other (specify)	
Other (Specify) 1. Are you now or have you been adjudged, diagraphed or considered as		Usual Occupation K-Mast	Company of the last
An Imbedia? Of Unnound Mind?	No P Yes	Date of birth verified by: Birth Cert. Judicial Decree	
2. Are you under guardianship as a person of unsound mind?	No Yes	Other (Specify)	
 Are you now or have you been within five (5) years an inmate home for indigent persons? 	of a county asylum or	Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?	No. T.
If answer to 3 is "yes" has the cause of such condition been remove 4. Are you afflicted with a transmissible disease?	d? No Yes	Of Unsound Mind?	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
4. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a narcotic drug?	No V Yes	3. Are you afflicted with a transmissible disease?	No Ves
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? 19. Do you have minor children from one or more former marriages?	Yes D No 🗆	5. Are you now under the influence of intoxicating liquor?	No 🔽 Yes 🗆
(If yes, answer questions a, b, c)	No Yes	6. Are you now under the influence of a narcotic drug?	No Yes 🗆
(a) List their full names, ages and addresses Name, Age	Mreas	7. Full name of father Wayne Co. Full	11)
Ricci Summondo 17 P	itsboro	Residence of father (if deceased so state)	and what is
Robins 16	11	Birthplace of father (State or foreign country).	ina
Yamila 12	"	8. Full maiden name of mother . Lua Mae	Com
 (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)	ed
their support?	Yes No W	Occupation of mother	
11. Pull name of father The Marie Ma	000.	Birthplace of mother (State or foreign country)	,
Ranidance of father (If deceased so state)	we wh	Birthplace of mother (State of lovely) County)	
Occupation of father	Pinais	State of Indiana, ss: I depose and state the in this application is	ie information given is true and correct.
12. Pull maiden name of mother Orpha M.	Leininger	County of HENDRICKS	
Residence of mother (if deceased so state) Naus	100, Del.	Signed Allthe	eselle 1
Ormpation of mother Maid Bace of	mother Wh	New Address K. 7 Por 129	Tillaboro Ind
Birthplace of mother (State or foreign country)	nois	Subscribed and sworn to before me this day of day of	19.16
State of Indiana, I depose and state	e the information given m is true and correct.	Glen M. Flawugterk HENDRICKS	Circuit Court
County of HENDRICKS	1)	-	
Signed Java dester Dyn	here	CONSENT OF PARENTS, PARENT OR GUARDIAN	If only one parent
New Address. Rate 120	Valer 1976	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	Circuit Court	signs, state facts which render the consent of the other parent unnecess	Jary
Sell of the fill the first of the self			
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marri-	age. If only one parent		a material leading to the
signs, state facts which render the consent of the other parent unne			
		State of Indiana, ss:	
		County of HENDRICKS	AND DESCRIPTION OF THE PARTY OF
State of Indiana.		Signed	Father
County of HENDRICKS	Father	Signed	Mother
Signed.	Mother	Subscribed and sworn to before me thisday ofday	
Subscribed and sworn to before me this day of	, 19	Subscribed and and and and and and and and and an	Clerk
and and it of defer int missing the	Clerk	the above na	med parties, the
2011 A 41 B 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2	ODDER OF COUR	T. A marriage license having been refused to the above na purt by written order issued	and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY	ORDER OF COS	T. A marriage license having been refused to the above named parties.	
HENDRICKS County	The second second	a marriage license to the above	THE RESERVE OF THE PARTY OF THE
inauthorizes and	THE LICENS	E AND MARRIAGE CERTIFICATE HENDRICKS	Circuit Court
RETURN OF	MARKIAGE LICEN	nse issued by the clerk of the the joining together as I	usband and wife
Be It Remembered, there was filed in my	ally	E AND MARRIAGE CERTIFICATE the se issued by the clerk of the series is issued by the clerk of the series is in the pointing together as to series to wit:	
Indiana dated the	1	and still the first to wit:	le ,
Be it further remembered, the following marriage certifi	cate was filed in my	hereby certify that on the 12th Church	Johnson
1, July Carde It Hickel			diana
one thousand wine to be and	7	t Lienten of	Old Sold Hell Comment
State of Indiana, Groom David Lestly	yman. man.	that purpose by the Clerk of the Circuit Court of HEND	RICKS
and, Bride Shirley Charlend Crush	Warner is sued for	that purpose by the Clerk of the Circuit Continue	
were by me united in marriage as authorized by a marri	age license issued 75.	that purpose of Signed Rew Carl & Hicks	
County. Dated this 24 day of July	, 19.7.	Signed Add Signed	# /
day of day		Official Designation Quequet	, 19
halves the collection	to of Indiana this	Official Designation August Gay of Designed Signed Hendricks HENDRICKS	Circuit Court
Filed and recorded in accordance with the laws of the St	are of	Official Designation General day of August Signed Glen M Darvey HENDRICKS	Constitution of the consti

STATE OF INDIANA

D = -			
APPLICATION I	FOR MAR	RIAGE L	ICENSE

Form Prescribed By Indiana State Board of Health under Authority APPLICATION FOR M	
Health under Authority Chap. 126, Ind. Acts 1905 HENDRICK	1 1, 1/100/
MALE 7/4/76	FEMALE 7/15/76
Medical Examination Report Dated	Medical Examination Report Dated
Name of Physician R. W. Williams 118	Name of Physician
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False states 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-
MALE APPLICANT	FEMALE APPLICANT
Name Refuse First Assept Middle Palma	Name Carolyn A. Middle Kuster
Date of Birth Month Day Year	Date of Birth Month Day 8 Year 1947
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. City County State
417 S. Grant St. Drawing one	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 Divorce	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	
Date of birth verified by: Birth Cert. Dudicial Decree	1
Other (Specify) # 369	Usual Occupation 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	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?	An Imbedie? 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	Of Unsound Mind? No Yes 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	2. Are you under guardianship as a person of unsound mind: 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 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? No Yes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father If Aury Deal Austra
Name Age Address	Residence of father (if deceased so state)
	Occupation of father (State or Species country) Rechard Ind.
	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 with the state of the state
their support?	Residence of mother (if deceased so state)
11. Full name of father Allman Sungary	Allow a Character
Occupation of father	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country)	State of Indiana, Sa: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Alice Mr Clentock	County ofHENDRICKS
Residence of mother (if deceased so state)	Signed and June 5
Occupation of mother Alle Race of mother Alle	New Address 17 3 Congress Francisco
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of 19
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	JUN M- MULLY Clerk HENDRICKS Circuit Court
Signed tobert Joseph talina	
New Address 417 South Grant St. Brownshing	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of 19	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, South of HENDRICKS 88:
State of Indiana, County of HENDRICKS	County ofHENDRICKS
Signed Father	SignedFather
SignedMother	Signed
Subscribed and sworn to before me thisday of, 19,	Subscribed and sworn to before me thisday of
Clerk	Clerk
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUL	RT. A marriage license having been refused to the above named parties, the
HENDRICKS County C	ourt by written order issued
inauthorizes and directs the issuance	of a marriage license to the above named parties.
RETURN OF MARRIAGE LICENS	SE AND MARRIAGE CERTIFICATE
The Di Kemembereo, there was filed in my office a marriage lice	nse issued by the clerk of the HENDRICKS Circuit Court
Robert Oseph Palma	, 19. W., authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my	and Carolign a Kuster
I, Ji Januara Smus	hereby certify that on the 3/St day of held
one thousand nine hundred and Seventif Dis	at Bendricks, County of Headricks,
State of Indiana, Groom. And Talma	of Then do 10 by
were by me united in marriage as authorized by	Marian County, State of Mariana,
County.	that purpose by the Clerk of the Circuit Court of
Dated this 3/ot day of July , 197	a Sind W ' 1 1
	Official Designation Party March Smith
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Pasta, Messeal Luthersa Church
	Signed Alex M Harries Clerk
	HENDRICKS Circuit Court

APPI ICAME	TE OF INDI	ANA
LICATION	FOR MAD	ANA RIAGE LIGHNON
	- OIL MAR	RIACE LICENSE

HENDRIC	CKS County File
MALE Medical Examination Report Dated 7-14-76	July 21 1976
Name of Physician (Um. Oduma & Ma	FEMALE Vate of Application
	Medical Examination Report Dated 7- 14-76
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	Name of Physician Um. Edwards ml
MALE APPLICANT	tatement—Whoever procures the issuance of a license to
Name First Middle	Dinas as to marry by any false statement, representa-
Date of Birth Month Bayward Clemons	Name First APPLICANT
Place of Birth (State or foreign country)	Date of Birth Month Month Month Last
Residence Address Street or R. R. City	Place of Birth (State or foreign country), Day Year 1947
Resident Augusta County State	Residence Add Mark Wash
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Street or R. R. City County State Maiden Name if Different
Last Marriage Ended By: Death Divorce Annulment	Hame it Different Sulf.
White Ed Nove E	Previous Marital Status: Never Married Number of Previous Marriages
(specify)	Last Marriage Ended By: Death Divorce Annulment All Marriages
Date of birth verified by: Birth Cert. Judicial Decree	Minute
Other (Specify)	Negro Other (specify)
1. Are you now or have you been adjudged, diagnosed or considered as:	Date of high world II
Of Unsound Mind?	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 sylum or home for indigent persons?	1. Are you now or have you been aliced.
If answer to 3 is "yes" has the cause of such condition been recorded.	1. 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?
6. Are you now under the influence of interleating ligner? No V Yes	2. Are you under guardianship as a person of unsound mind?
7. Are you now under the influence of a narcotic drug? No M / Yes	3. Are you afflicted with a transmissible disease?
8. Are you able to support a family? 9. Are you likely to so continue?	4. Are you related to the groom closer than second cousin? No Ves 5. Are you pow under the influence of the latest power of
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 Ves C
(a) List their full names, ages and addresses	7. Full name of father Couldst Ward 4.
Maria Age Address	Residence of father (if deceased so state) Rossmill St. Planslill
for the best of the second of	Occupation of father MANULY - Ullun Race of father Whilf In
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother. Benery Jane Parker
(c) Are you complying with any court order or orders issued for their support? Yes \(\text{No } \text{V} \)	Residence of mother (if deceased so state)
11. Full name of father Albert A: Clemons	Occupation of mother
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Race of father Wh	State of Indiana, I depose and state the information given
Birthplace of father (State or foreign country) Alabama 12. Full maiden name of mother Mysa N. Chanelling	County of HENDRICKS 88: In this application is true and correct.
Residence of mother (if decoased so state) Bus Sandis Tissue	Signed Ja Synne Hoop
Occupation of mother Amsunga Race of mother Wh	New Address Dy Box 433 Clayton Ch.
Birthplace of mother (State or foreign country) alohama	Subscribed and sworn to before me, this
State of Indiana, I depose and state the information given	Glen M. Harry Clerk HENDRICKS Circuit Court
County of HENDRICKS Marion I lemon and correct.	
St # 0 B- 423 Blanton for	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 2 day of July 19.76.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Then M. Hannes 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, ss:
24-1	County of HENDRICKS
State of Indiana, County ofHENDRICKS	SignedFather
Signed Father	Signed
SignedMother	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me thisday of	Clerk
Clerk	heen refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County County directs the issuance of	urt by written order issued
n authorizes and directs the issuance of	t a marriage needs to the control of
RETURN OF MARRIAGE LICENSE	Se issued by the clerk of the HENDRICKS Circuit Court , 19, authorizing the joining together as husband and wife
Be It Remembered, there was filed in my office a marriage licens	, 19 16., authorizing the joining together as husband and wife
Indiana dated the day of day	1 Co Sunn Conf
Indiana dated the day of an arriage certificate was filed in my of arriage certificate was filed	fice, towit:
the following guarring the fallowing guarrings	ereby certify that on the Country of Hendricks,
ne thousand nine hundred and 76 dward Clemons of tate of Indiana, Groom Marion Edward Clemons of the Bride of Lynn Hoop street is sued for the street of the	Hen dricks County, State of Suddentil
nd, Bride Lynn Hoop of were by me united in marriage as authorized by a marriage license issued for to county.	hat surpose by the Clerk of the Circuit Court of HENDRILLS
oy me united in marriage as authorized by a marriage	424
ated this 28th day of July	Official Designation Ministry 1976.
	1st day of Clerk
iled and recorded in accordance with the laws of the State of Indiana this	Signed Blen M Named Circuit Court HENDRICKS
	HERUKICAV

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No.	304	
File		
July	22	1976

..Circuit Court

HENDRICKS County Date of Application		
MALE	FEMALE Medical Examination Report Dated 7-12-76	
Medical Examination Report Dated 7-12-76	Name of Physician Joseph C. Hurlin	
Name of Physician Reph C. Results "False ste	atement—Whoever procures the issuance of a license to marry by any false statement, representa-	
or precense shall be fined in any sum not exceeding into numerous	FEMALE APPLICANT	
MALE APPLICANT Middle Last	Name First Middle Last	
Courette T. Van Winkle	Date of Birth Month Day Year	
ate of Birth Month Day Year 9	July 12 1955	
ace of Birth (State or foreign country)	Place of Birth (State of foreign country)	
sidence Address Street or R. R. City County State	Residence Address Street or R. R., City County State	
4.0. Bop 243 Clayton, Sond.	Maiden Name if Different	
evious Marital Status: Never Married Number of Previous Marriages Marvin	Previous Marital Status: Never Married Number of Previous Marriages	
st Marriage Ended By: Death Divorce Annulment 1916	West Virgin	
lor or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment 1976	
sual Occupation Junt Driver	Color or Race White Negro Other (specify)	
ate of birth verified by: Birth Cert. Judicial Decree	Usual Occupation —	
□ Other (Specify) # 1/3-48- 205/6	Date of birth verified by:	
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Of Unsound Mind? Yes	Other (Specify) State of Virginia Book 16 p 97-A	
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 as fum or home for indigent persons? Yes	An Imbecile?	
If answer to 3 is "yes" has the cause of such condition been removed? No Yes Are you afflicted with a transmissible disease?	Of Unsound Mind? No Yes	
6. 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 ☐	
Are you now under the influence of intoxicating liquor? No Ves Yes No Ves Yes Yes No Ves Yes Yes No Ves No Ves	4. Are you related to the groom closer than second cousin?	
3. Are you able to support a family?	5. Are you now under the influence of intoxicating liquor? No Yes	
O. Are you likely to so continue? No □ No □ Yes □ Yes □ 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 & 1sther Washington How	
Name Age Address	Residence of father (if deceased so state) Lame	
michael Lu Van Vinkle -6-	Occupation of father Kuria Race of father	
5/37 Ida Jt.	Birthplace of father (State or foreign country)	
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Nina Anglesson Wilson	
(c) Are you complying with any court order or orders issued for their support? Yes ☑ No ☐	Residence of mother (if deceased so state) Lame	
1. Full name of father Colomer M. Wan Winkle	Occupation of mother Sst. Cook Race of mother	
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country) West Vesquina	
Occupation of father Kittled Race of father		
Birthplace of father (State or foreign country)	State of Indiana, County ofHENDRICKS	
12. Full maiden name of mother CANNA Ly Umpleton		
Residence of mother (if deceased so state) CAVIABLE, CA. Occupation of mother AMBLING Race of mother.	New Address RR 8 Box 217 Andranapolis	
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this 2 day of July 19.70.	
Distribute of money (State of Totals)		
State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Den M. Hanry Clerk HENDRICKS Circuit Court	
Signed & west & Cambigath	CONSENT OF PARENTS, PARENT OR GUARDIAN	
New Address RR 8 Bux 217 Judianapolis Ind.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
Subscribed and sworn to before me this and day of the property of the state of the	signs, state facts which render the consent of the other parent unnecessary	
ClerkHENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary	
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent		
igns, state facts which render the consent of the other parent unnecessary		
	State of Indiana,	
tate of Indiana,	County ofHENDRICKS	
ounty of HENDRICKS.	SignedFather	
Signed Father	Signed	
Signed	Subscribed and sworn to before me thisday of	
Clerk	Clerk	
	RT. A marriage license having been refused to the above named parties, the	
	Court by written order issued and filed	
nauthorizes and directs the issuance	of a marriage license to the above named parties.	
RETURN OF MARRIAGE LICENS	SE AND MARRIAGE CERTIFICATE	
	ense issued by the clerk of the HENDRICKS Circuit Court	
f Indiana dated the day of day of uly	, 1976, authorizing the joining together as husband and wife	
se it further remembered, the following marriage certificate was filed in my	and Telen Kay Ward office, to-wit:	
Mirel J. Frost	hereby certify that on the 3/ day of July,	
ne thousand nine hundred and 76	at Maresville County of Margan,	
State of Indiana, Groom Grynette & Van Urnkle	of Tendricks County State of Indiana	
and, Bride Selen Ray Ward of	Sutnam County, State of west bringing	
vere by me united in marriage as authorized by a marriage license issued for County.	r that purpose by the Clerk of the Circuit Court of	
Dated this 3/ day of July, 19.7		
, 19,	Signed Will D. C. Mark	
	Official Designation Ordained Minister	
Filed and recorded in accordance with the laws of the State of Indiana this	3 day of leegest, 19.76.	
	Signed Glen M. Harriey Clerk	

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

No	305
File_	The state of the s
-	uly 22 1976
-0	Date of Application

HENDRICK	County
MALE Medical Examination Report Dated 7/19 /76	July 22 1976
	FEMALE Medical Examination Report Dated 7/19 /76
Name of Layout 1	
ALL QUESTIONS MUST BE ANSWERED, Chapter 126, Indiana Acts 1905 prescribes "False states or pretense shall be fined in any sum not exceeding five hundred della prescribes "False states."	mant we mysician with awards and
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False stated on 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 1 Last	FEMALE APPLICANCE
Date of Birth Month Day Rear	Name Carrollar Middle Last
Place of Birth (State or foreign country)	Date of Birth Day Peng
Defort Favelace	Place of Birth (State or foreign country)
Residence Address North Cast St. City County State Out of the County State of the Co	Residence Address Street or R. R. Oity Court
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Plusheld Sud.
Last Marriage Ended By: Death Divorce Annulment 1976 - Mon	Edwarde 1
Color or Race White Negro Other (specify)	WPRevious Marital Status: Never Married Number of Previous Marriages.
Color of American	Last Marriage Ended By: Death Divorce Annulment 1976 - Mindled
Date of birth verified by: Birth Cert. Dudicial Decree	Color or Race White Negro Other (specify)
Other (Specify)	Usual Occupation Microphetomach 1.
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes	Date of birth verified by: Birth Cert. Dudicial Decree
Of Unsound Mind? No Ves Yes Yes No Yes Yes	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons?	Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unecound Minds
4. Are you afflicted with a transmissible disease? No Yes S. Are you related to the bride closer than second cousin? No Yes	2. Are you under guardianship as a person of unsound mind? No E Yes
6. Are you now under the influence of intoxicating liquor? No Ves	3. Are you afflicted with a transmissible disease? No No Yes
7. Are you now under the influence of a narcotic drug? No Yes S. 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? (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.
(a) List their run names, ages and addresses Name Age Address A	Residence of father (if deceased so state)
Chaptere Tenel Taylor 54. Plainfield	In Occupation of father Retailed 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 Mullill Mull france
(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 Saymond augent Jaylon	Occupation of mother
Residence of father (if deceased so state)	. Birthplace of mother (State or foreign country)
Occupation of father All Race of father Race of father	State of Indiana, 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
Residence of mother (if deceased so state) Mill WMthada and	Signed Check S. Fine DI 100
Occupation of mother Africa Marken Race of mother Aller	New Address 21
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of
State of Indiana, I depose and state the information given this application is true and correct.	La Manualy Clerk HENDRICKS Circuit Court
County of the Manager of and of	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 115 North ERST Planted	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworn to before me this 22 day of July 19.76.	we, the parents, of this approach signs, state facts which render the consent of the other parent unnecessary
Men Marshy Clerk HENDRICKS Circuit Court	signs, state facts which relact
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
County of HENDRICKS	Signed
SignedMother	Subscribed and sworn to before me thisday of
Signed Mother Signed , 19 Subscribed and sworn to before me this day of	Subscribed and sworn to Clerk
	fixed to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COULD HENDRICKS County authorizes and directs the issuance	RT. A marriage license having been refused to the and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY GREEN	Court by written order issued
THE MARRIAGE LICEN	the clerk of the
We It Remembered, there was filed in my office a marriage lice	, 19.76 , authorizing the joining together as husband
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage lice of Indiana dated the	and Carelyn and horizing the joining together as husband and by of griffice, to-wit: and careful that on the 3/st day of July
in an continuate was for	ister that on the
be it further remembered, the following maintage	hereog cerus lield , County of Indiana
one thousand nine hundred and State of Indiana, Groom and The Garalyn Sing of and, Bride Garalyn Sing were by me writed in marriage as authorized by a marriage license issued for	of Tentrucks County, State of Indiana,
State of Indiana Groom Sarry & Taylor	Hendricks HENDRICKS
State of Indiana, Groom and Jaylor of and, Bride acting of were by me united in marriage as authorized by a marriage license issued for County.	16 10 Non Laffin
Dated this 28 day of Dully, 19.	Signed Minister 7 + 1076
and, Bride. Saralyn. S. Ging were by me united in marriage as authorized by a marriage license issued for County. Dated this. 28. day of July Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation day of Clerk
of the State of Indiana this	Signed Allen M. Harrely Circuit Court
rued and recorded in accordance with the laws of the	HENDRICKS

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No. 308

File 37

Date of Application

HENDRICKS Circuit Court

FEMALE MALE Medical Examination Report Dated_ Medical Examination Report Dated____ Name of Physician Malealm Name of Physician Malcolm O. 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 Middle Date of Birth Previous Marital Status: Never Married P Number of Previous Marriag Previous Marital Status: Never Married Marriages. Death Divorce Annulment Death Divorce Annulment Last Marriage Ended By: Color or Race White Negro Other (specify).... White P Negro Other (specify). Color or Race Usual Occupation Date of birth verified by: Birth Cert. Judicial Decree Usual Occupation Sorthamoutha Virginia Haspetal Other (Specify).... Date of birth verified by: Birth Cert. Judicial Decree No P Yes Yes Yes Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Of Unsound Mind? No 🗵 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? county asylum or No Yes No Yes 3. Are you now or have you been within five (5) years an inmate of a home for indigent persons? An Imbecile? No Yes Yes 🗌 No 🗌 Of Unsound Mind? If answer to 3 is "yes" has the cause of such condition been removed? No Z Yes 4. Are you afflicted with a transmissible disease? 2. Are you under guardianship as a person of unsound mind? No Yes No Yes 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 Z 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? Yes 🗷 No 🗌 No 🗗 Yes 🗌 5. Are you now under the influence of intoxicating liquor? Yes No 🗆 9. Are you likely to so continue? 6. Are you now under the influence of a narcotic drug No Yes 🗌 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) Branch Name Address Age 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) Brauens Yes 🗌 No 🗆 Occupation of mother Casheer 11. Full name of father Wet QL Birthplace of mother (State or foreign country). Occupation of father Sallsman State of Indiana, I depose and state the information given in this application is true and correct. Birthplace of father (State or foreign country) Tukelleng County of..... 12. Full maiden name of mother. Occupation of mother Self employed. Race of mothe Birthplace of mother (State or foreign country) N. Caralina State of Indiana, I depose and state the information given in this application is true and correct. Clerk HENDRICKS CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent 19.76. Glen m Harrey ClerkHENDRICKS 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. State of Indiana, County of HENDRICKS .. 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 HENDRICKS 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 HENDRICKS Circuit Court 26. the day of July , 19. 76, authorizing the joining together as husband and wife of Indiana dated the and Jeanette L. Buffo Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the _______ day of _______duys one thousand nine hundred and 76 at Brownsburg, County of Hendricks State of Indiana, Groom Mark a Case of Tendricks County, State of Indiana and, Bride Janette & Buffo of Thendricks County, State of Indiana, Dated this 7 day of Sugust , 19 76. , welson Official Designation Minester Filed and recorded in accordance with the laws of the State of Indiana this day of day of leaguest , 19 76. Signed Slan M Harvelf Clerk

APPLICATION FOR MADDIAGE

Chap. 126, Ind. Acts 1905 HENDRICKS HENDRICKS File 37			
HENDRICK	Country		
MALE Medical Examination Report Dated 7-20-7/	7-23-76		
1			
Name of Physician Grveng Cohen.	Medical Examination Report Dated 7-20-76		
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 of Physician Irving Cohen		
MALE APPLICANT	whent-Whoever procures the issuance of a license to marry by any false statement		
Name Muddle	Name FEMALE APPLICANT		
Date of Birth Month Day Year ter	First Middle		
Place of Birth (State or foreign country), 1949	Date of Birth Brenda Carol Trent		
Ersin Knob 4 + 1	Place of Birth (State or foreign country) Year 19 1949		
Residence Address Street or R. B. City County State	Paid andranapalis		
Previous Marital Status: Never Married Number of Previous Marriages	620 4 # County State		
Date of the second	Maiden Name if Different Slaunfield Ind.		
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		
Usual Occupation Lacher	Annulment		
Date of birth verified by : Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)		
Other (Specify)	Usual Occupation Leacher		
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No P 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 P 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:		
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	An Imbecile? No F Yes Of Unsound Mind?		
4. Are you afflicted with a transmissible disease? No Yes	2 Are you under granding bit		
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 the s		
1. 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 F 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 Wendall Trent		
Name Age Address	Residence of father (if deceased so state) Solding fields Ind.		
	Occupation of father Aink Bult Race of father W		
	Birthplace of father (State or foreign country)		
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother marcist marie Blaire		
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state) Mainfuld, and		
11. Full name of father Freeman a. Carter	Occupation of mother Subse Survey Race of mother M.		
Residence of father (if deceased so state) Gittshora, Ind.	Birthplace of mother (State or foreign country)		
Occupation of father Allisons Race of father It	The state of the s		
Birthplace of father (State or foreign country) Jennessee	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 Bernsdine Collins	Branda Carol Treat		
Residence of mother (if deceased go state) Settslisto, Ind.	Signed At Authority Planakeld 1818		
Occupation of mother Cook Race of mother	New Address 620 Hentucky Plainfeld & A		
Birthplace of mother (State or foreign country) Rentuckey	Subscribed and sworn to before me this 23 day of July 1976.		
State of Indiana. I depose and state the information given in this application is true and correct.	Glerk HENDRICKS Circuit Court		
V Kenth upon Tales	DADENT OF CHARDIAN		
New Address 620 Kentucky, Planfield Ind.	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 23 day of July 1976.	We, the parents, of this applicant hereby give consent to		
Sun M. Harries Gerk 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, ss:		
	County of HENDRICKS		
State of Indiana.	SignedFather		
County of HENDRICKS Father	SignedMother		
Signed Mother	Subscribed and sworn to before me thisday of		
Subscribed and sworn to before me thisday of	Subscribed and sworn to belove and Clerk		
Subscribed and sworn to before me this			
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUL	RT. A marriage license having been refused to the above hamed partial		
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COULD COUNTY COUN	ourt by written order issued		
HENDRICKS County	6 - marriage license to the day		
RETURN OF MARRIAGE LICENS	nse issued by the clerk of the hendricks the historizing the joining together as husband and wife and Brencha authorizing the joining together as husband and wife and Brencha authorizing the joining together as husband and wife		
Be It Remembered, there was filed in my office a marriage	, 19 th, authorizing the forting to		
of Indiana dated the 28 day of Things	and Brenda Carel Frence		
Re it is much was filed in my	office, to-wil. day of filly dricks		
Be it further remembered, the following marriage certificate was filed in my 1, One thousand via a hand of the following marriage of the following marriage certificate was filed in my One thousand via a hand of the following marriage of the following marriage certificate was filed in my One thousand via a hand of the following marriage of the following marriage certificate was filed in my	hereoy certification of Country of Indiana		
one thousand is the both of the Thomas of the thousand the the thousand the thousand the thousand the thousand the thousan	at Hendricks County, State of Indianas		
Be it further remembered, the following marriage certificate was filed in my 1,	HENDRICKS County, State of HENDRICKS		
and Roids By A Comment of the Street from of	of Hendricks County, State of Indiana, of Hendricks County, State of HENDRICKS that purpose by the Clerk of the Circuit Court of HENDRICKS		
Were by a marriage license issued for	O at & Robert		
County.	a. Signed I Alend William		
County. Dated this 3/ day of July	Official Designation Minister 19.76.		
Piled and recorded in accordance with the laws of the State of Indiana this	Official Designation day of Clerk Slen M. Slanger Circuit Court		
Filed and recorded in the laws of the State of Indiana this	Signed Alen M. Sarvilly Circuit Court		
recorded in accordance with the	HENURGO		

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No	306
File_	
	7-92-76

......HENDRICKS

Chap. 126, Ind. Acts 1905 HENDRICKS County Date of Application FEMALE Medical Examination Report Dated MALE Medical Examination Report Dated. Name of Physician Wm Name of Physician Um 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 Last Middle Name First Date of Birth Place of Birth (State or foreign country) Place of Birth (State or County Residence Address Maiden Name if Different Previous Marital Status: Never Married Number of Previous Marriages. Previous Marital Status: Never Married Y 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 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 🗌 No I 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 🗌 3. Are you now or have you been within five (5) years an inmate of a home for indigent persons? No 4 Yes An Imbecile? No Yes Of Unsound Mind? If answer to 3 is "yes" has the cause of such condition been removed? Yes 🗌 Yes 🗌 No D 4. Are you afflicted with a transmissible disease? No 4 Yes 2. Are you under guardianship as a person of unsound mind? Yes 🗌 No 🗹 5. Are you related to the bride closer than second cousin? 3. Are you afflicted with a transmissible disease? No Yes Yes 🗌 No 🛛 6. Are you now under the influence of intoxicating liquor? Yes 🗌 4. Are you related to the groom closer than second cousin? No Yes 7. Are you now under the influence of a narcotic drug? No D Yes 🗗 No 🗆 8. Are you able to support a family? No FY Yes 5. Are you now under the influence of intoxicating liquor? No 🗆 Yes Z 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 Name Occupation of father Birthplace of father (State or foreign country). 8. Full maiden name of mother.......... 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? Residence of mother (if deceased so state). Yes 🗌 No 🗆 Birthplace of mother (State or foreign country). State of Indiana, depose and state the information given n this application is true and correct. HENDRICKS malanapoles I depose and state the information given in this application is true and 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 Subscribed and sworn to before me this. Harve ClerkHENDRICKS 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, County ofHENDRICKS State of Indiana, County of HENDRICKS Father Signed Mother Signed. 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 3 day wawer 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 HENDRICKS Circuit Court of Indiana dated the Carwell Be it further remembered, the following martiage certificate was filed in my office, to-wit: hereby certify that on the 23 day of July one thousand nine hundred and. , County of Thendrecks State of Indiana, Groom Mark of Nendricks County, State of Ind. and, Bride Melissa & suge Carwill of Hendricks County, State of Ind. were by me united in marriage as authorized by a marriage license issued for that purpose by the Clerk of the Circuit Court ofHENDRICKS.... County. Dated this ... Official Designation Quality - Nendrucks (o Filed and recorded in accordance with the laws of the State of Indiana this..... 23

STATE OF INDIANA

Chap. 126, Ind. Acts 1905 HENDRICKS No. 307 HENDRICKS File		
MALE	County Cully 23 1971	
Medical Examination Report Dated 7/19 /76	FEMALE Date of Application	
Name of Physician Eric Clark	Medical Examination Report Dated 7/19/76	
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	Name of Physician Churk	
MALE APPLICANT.	ement—Whoever procures the issuance of a license to marry by	
Name First Middle	DDM Avy	
ester A. Fillaget	Name // Figst Print Applicant	
lugust 6 Year	Date of Birth Month Ellen Laset	
Place of Birth (State or foreign country)	Day Vans	
Residence Address Street or R. R. City County State	Place of Birth (State or foreign country)	
Dox 11 Bainbudge Ind.	Residence Address Street or R. R. City	
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different 53 Continues State	
Last Marriage Ended By: Death Divorce Annulment	THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	
	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 (mylogical	Colon on P.	
Date of birth verified by: Birth Cert. Dudicial Decree	aregro Uther (specify)	
Other (Specify)	Usual Occupation Attribute	
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No (2) Yes (1)	Date of birth verified by: Birth Cert. Dudicial Decree	
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes Yes	Other (Specify) CA 12 PA 52	
3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as:	
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	An Imbecile?	
4. Are you afflicted with a transmissible disease? No Ves U	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 D Yes D	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	5. Are you now under the influence of intoxicating liquor? No No Yes	
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father.	
Name Age Address	1 01 1 - 0 1	
	Residence of father (if deceased so state) Occupation of father All Collins Reco of father	
	1 Fut ak	
	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? Yes No	Residence of mother (if deceased so state)	
11. Full name of father Alth Talek	Occupation of mother	
Residence of father (if deceased so state) Bullully	Birthplace of mother (State or foreign country)	
Occupation of father Alland Alland Race of father Allasta		
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	
12. Full maiden name of mother Authir Sul Scott	A1. 6811. 18 to	
Residence of mother (if deceased so state)	Signed Alexander Control	
Occupation of mother Shall state of mother with the	New Address A 2 102 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of	
State of Indiana.	Ellen M. HANNIA Clerk HENDRICKS Circuit Court	
County of HENDRICKS ss: in this application is true and correct.		
Signed topen A toler	CONSENT OF PARENTS, PARENT OR GUARDIAN	
New Address R 2 Box 53 Contespulle	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 19/	signs, state facts which render the consent of the other parent unnecessary	
The Manual Clerk HENDRICKS Circuit Court	signs, state facts which was sole custody	
CONSENT OF PARENTS, PARENT OR GUARDIAN	N. C.	
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	
State of Indiana,	Signed 1/A0	
County of HENDRICKS 885:	Signed Wordthick Olden Mother	
Signed Mother Mother	day of 18	
Signed Julia Lab Tarana 19.76	Subscribed and sworn to before me this	
Subscribed and sworn to before me this day of Clerk		
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	license having been refused to the above named parties, the	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage interpretation order issued 3 day a may warmen and men	
HENDRICKS County Circuit Co	T. A marriage license having been returned and filed our by written order issued. 3 days 2 aays warriage and filed our by written order issued. 3 days 2 aays warriage license to the above named parties.	
in Clarks Office authorizes and directs the issuance of	AND MARRIAGE CERTIFICATE	
in Clarko authorizes and directs the issuance of RETURN OF MARRIAGE LICENS	E AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court	
Be It Remembered, there was filed in my office a marriage licen	authorizing the joining together as husband and wife	
RETURN OF MARRIAGE LICENSIA Be It Remembered, there was filed in my office a marriage licen of Indiana dated the day of a	Nelvorah Ellen Extre	
a see the A Lilah	fice, to-wit: 1st day of Duguet	
Be it further remembered, the following marriage certificate was filed in my o	hereby certify that on the 1st day of Gendricks,	
Be it further remembered, the following marriage certificate was filed in my of the following marriage	at Danville K. L. State of Indianas	
one thousand nine hundred and	of State of State of	
one thousand nine hundred and State of Indiana, Groom Juseph and, Bride Debriah Ellen Estles of and, Bride Debriah Ellen Estles	Hendricks HENDRICKS	
and, Bride Dehrah & elen Estes of	that purpose by the Clerk of the Circuit Court of	
in ac license tootter		
were by me united in marriage as authorized by a marriage technical County. Dated this first day of leaguest, 19.76	Signed a Addiffmantible	
Dated this first day of linguist	a mind Designation Municipality Quart 18 7/2	
	Official Design	
Filed and recorded in accordance with the laws of the State of Indiana this	Great Glens M. Harriey Circuit Court	
and recorded in accordance with the laws of the	Signed HENDRICKS	

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County 7-23

No	310	
File.	37	
	7-23-76	

Date of Application FEMALE Medical Examination Report Dated_ Medical Examination Report Dated Name of Physician Steven M. 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 Number of Previous Marriages Previous Marital Status: Never Married Number of Previous Marriages. Death Divorce Annulment Last Marriage Ended By: Death Divorce Annulment Color or Race White Negro Other (specify). Other (specify). 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? No Z Yes No P Yes No P Yes Other (Specify)... 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: 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? No 🗆 Yes 🗌 If answer to 3 is "yes" has the cause of such condition been removed? Of Unsound Mind? No Z Yes 4. Are you afflicted with a transmissible disease? No Yes 🗌 2. Are you under guardianship as a person of unsound mind? No Yes No Yes No Yes 5. Are you related to the bride closer than second cousin? 3. Are you afflicted with a transmissible disease? No Z 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 Z 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? 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? (If yes, answer questions a, b, c) 7. Full name of father. (a) List their full names, ages and addresses 219 Wallack Residence of father (if deceased so state) Dale Indiana Address Age Occupation of father Banker Birthplace of father (State or foreign country) 8. Full maiden name of mother Algorit (b) Are you supporting or contributing to their support? Yes 🗆 No 🗌 219 Wallack Residence of mother (if deceased so state). Dalk (c) Are you complying with any court order or orders issued for their support? Yes No No Occupation of mother Hausewife 11. Full name of father A Reel Residence of father (if deceased so state) Birthplace of mother (State or foreign country) Carpenter 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 ofHENDRICKS Residence of mother (if deceased so state) Alaum Occupation of mother ... Hauseriele Birthplace of mother (State or foreign country). Indiana State of Indiana, ss: I depose and state the information given in this application is true and correct. County of HENDRICKS Harrey New Address 157/ S/6 ST Nobelsville INO 76060 CONSENT OF PARENTS, PARENT OR GUARDIAN Subscribed and sworn to before me this 23 We, the parents, of this applicant hereby give consent for this marriage. If only one parentday of... Ilen M. Harvey . ClerkHENDRICKS 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 Father Mother Subscribed and sworn to before me this.... Subscribed and sworn to before me this......day of..... COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the HENDRICKS 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 HENDRICKS Circuit Court .,..day of , 19...76., authorizing the joining together as husband and wife Be it further remembered, the following marriage certificate was filed in my office, to-wit: 1, Samuel Chanian hereby certify that on the 3/ day of one thousand nine hundred and...... at Dale , County of Spincer Brittingham of Flendricks County, State of Indiana State of Indiana, Groom 5 harles and, Bride Latricia L. Lovell of Marion County, State of Indiana, 3/ day of July , 19 76. Dated this Official Designation Minister Filed and recorded in accordance with the laws of the State of Indiana this. # day of day of

.....HENDRICKS...

..Circuit Court

APPLICATION FOR MARRIAGE LICENSE HENDRIGHTS No. 3 //	
HENDRICK	CS FILE_
MALE	County 44/1, 73 1076
Medical Examination Report Dated ///3 / 76	FEMALE Date of Application
Name of Physician A allowance A. Reits ml.	Medical Examination Report Dated 7//3/7/
ALL QUESTIONS MUST BE ANSWERED, Chapter 126, Indiana Acts 1905 present	Name of Physician Lauritage A. Rit
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False statement of pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name First, Middle	tement—Whoever procures the issuance of a license to marry.
Alan P	FEMALE, Appropriate to marry by any false statement, representa-
Date of Birth Month Day	Name FEMALE APPLICANT Middle
Place of Bigth (State or torging country) 17 1953	Date of Birth Month Hynn Stephene
Residence Address / Street or R. R. Leppecarul Inl.	Place of Birth (State or foreign country)
1103 Illa View Dr. Apt & Pul State of	Residence Address Street on R. P. Maries O. A.
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Manager of Different State
ast Marriage Ended By: Death Divorce Annulment	Just or
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
0 1:4 1	Last Marriage Ended By: Death Divorce Annulment Divorce Annulment Divorce
Date of birth verified by : Print Cert. Judicial Decree	Color or Race White Negro Other (specify)
Other (Specify) # 113-59-038249	Usual Occupation
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?	Date of birth verified by: Birth Cert. Judicial Decree
2. Are you under guardianship as a person of unsound mind?	Other (Specify)
J. Are you now or have you been within five (5) years an inmate of a county assign on	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
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
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	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
0. Do you have minor children from one or more former marriages? No Yes Of 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 AMA M. ACPURE
	Residence of father (if deceased so state)
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother Vilma L. Wille
(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)
1. Pull name of tather pelph F. Brichlin	Occupation of mother All Assistant Race of mother White
Residence of father (16 deceased so state) Brownstury Dest	Birthplace of mother (State or foreign country)
Occupation of father Duce - Bully ist pace of father White	
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS as: I depose and state the information given in this application is true and correct.
2. Full maiden name of mother flan & Flank	Wippe Sunx Stephens
Residence of mother (if deceased so state)	signed 1931/2000 View De apt #4
Occupation of mother Additional Medical Race of mother Additional Race of Mother Race of Mo	New Address 3 day of 4464 , 1976
tate of Indiana. I depose and state the information given	Subscribed and sworn to before me this. 23 day of July 19
County of HENDRICKS as: in this application is true and correct.	and be the state of the state o
Signed Dancel Thomas Brickles	CONSENT OF PARENTS, PARENT OR GUARDIAN
Now Address 1/03 Valley View Br. apt #4 Harrifeld	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 July 19.	signs, state facts which render the consent of the other parent unnecessary
The state of the s	
ONSENT OF PARENTS, PARENT OF GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
gns, state facts which render the consent of the other parent unnecessary	
	State of Indiana, ss:
	County of HENDRICKS Father
tate of Indiana.	Signed
Signed Father	Signed
Signed	Subscribed and sworn to before me thisday of
ubscribed and sworn to before me thisday of	
	The marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County directs the issuance of	urt by written order issued
HENDRICKS County	f a marriage license to the above named p
authorizes and a	Circuit Court
RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court The It Remembered, there was filed in my office a marriage license issued by the clerk of the joining together as husband and wife Indiana dated the 28 day of and Trikke Agam Stephens	
Indiana databath the 28 day of	7. bi Sunn Stephens
maiana dated the Shickler and	nd Miller to-wit:
The it further remembered, the following marriage certificate was filed in my of the standard	hereby certify that on the County of Sendreska,
David B. Nageliwood	at Slainfield County, State of Indiana of Hendricks County, State of Indiana,
ne thousand nine hundred and Thomas Brickler tate of Indiana, Groom Randle Thomas Brickler of Sind, Bride Tikkle Lagran Stephens of Stephens of the series by me united in marriage as authorized by a marriage license issued for thousand.	LENARICKS HENDRICKS
tere by a marriage license issued for t	hat purpose of the state of the
ounty	havid Bo Harek
ounty. ated this 6th day of August, 1976	Official Designation Minuster, Glufel Bapuse
	11111

Signed....

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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No. 3/2

File Bk3/

Quly 23 1976

Date of Application

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CONSENT OF

MALE 2 2/	FEMALE Medical Examination Report Dated 7-12-76
Medical Examination Report Dated 7-12-76	
Name of Physician Carl S. Thereleen	Name of Physician Carl & Alexlur
	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
Date of Birth Month Day Year	Date of Birth Month Day Year
March 24 1958	Place of Birth (State or Greign country)
Place of Birth (State or foreign country),	Sugarcastle have
Residence Address Street or R. R. City County . State	Residence Address Street or R. R. City County State
R#1 BN 2884 Shugton Hendricks And.	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
	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	Auto Marines and Automotive and Auto
Usual Occupation	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Yl and an Olay As Q
Other (Specify) Local no. 3496	W. C.
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes	V/ + 0 # 58122
Of Unsound Mind?	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes 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 Ves \(\square\)
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 parcotic drug? No Yes	3. Are you afflicted with a transmissible disease? No Yes No Y
7. Are you now under the influence of a narcotic drug? 8. Are you able to support a family? Yes \int No \int Yes \int No \int 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?
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 V Yes
(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 Body Mechanic Race of father W
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother that Shules
(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) Claufter,
their support? Yes No	7
11. Full name of father Minneth Rhea Ryling	Occupation of mother Race of mother
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father Unemployed - Race of father W	Charles of Tables
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS. Ss: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Doubthy Clurch Clastian	
Residence of mother (if deceased so state). Indeploy, Ind.	Signed Weblie leaves
Occupation of mother House fee Race of mother	New Address Carton
other (State or foreign country) Indiplay, Indiana	Subscribed and sworn to before me this 23 day of July 19.76
I depose and state the information given	
DRICKS ss: in this application is true and correct.	Dlen TY Hawey Clerk HENDRICKS Circuit Court
Signed Your Turney	
ew Address. Clayton	CONSENT OF PARENTS, PARENT OR GUARDIAN
n to before me this 23 day of July 1976	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
ClerkHENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
LENTS, PARENT OR GUARDIAN	<u> </u>
this applicant hereby give consent for this marriage. If only one parent	
hich render the consent of the other parent unnecessary	
	State of Indiana,
	County ofHENDRICKS
DRICKS	SignedFather
ignedFather	y May Vouse
igned	Signed. Mother 7(
n to before me thisday of, 19,	Subscribed and sworn to before me this 23 day of July 19/4
Clerk	Den m Lawey Clerk
	0
	T. A marriage license having been refused to the above named parties, the
County	ourt by written order issuedand filed
authorizes and directs the issuance of	of a marriage license to the above named parties.
	E AND MARRIAGE CERTIFICATE
	use issued by the clerk of the HENDRICKS Circuit Court
9.0	, 19.74., authorizing the joining together as husband and wife
membered, the following marriage certificate was filed in my of	office, to-wit:
	hereby certify that on the 3/ day of Jelef,
one thousand nine hundred and	marker wills.
State of Indiana, Groom Michael P Giles	of Tendricks County, State of Indiana
and Bride Debra Lynn Little	Jendricks County, State of Indiana,
were by me united in marriage as a set live of	County, State of Standard
were by me united in marriage as authorized by a marriage license issued for County.	that purpose by the Clerk of the Circuit Court ofHENDRICKS
Dated this 3/ day of July , 19.76	
, 19	Signed Gastor Charles Forton
	Official Designation Minister
Filed and recorded in accordance with the laws of the State of Indiana this	3 day of accust 19.76
	Signed Illen M Planney Clerk
	HENDRICKS Circuit Court

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No. 3/2
File Bk31
Ouly 23, 1976
Date of Application

MALE Medical Examination Report Dated 7-12-76	FEMALE Medical Examination Report Dated 7-12-76	
Name of Physician Cal L. Herslein	Name of Physician Carl L. Hunlin	
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 license to marry by any false statement, representa-	
MALE APPLICANT	FEMALE APPLICANT	
Name First Middle Last Man A A O R Regard	Name First Middle Last	
Date of Birth Month Day Year 7	Date of Birth Month Pay Year 1959	
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 R # By 2884 Chapter Hendrals Ad.	R + 1 Box 288A Clayton Hendricks 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	
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment	
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)	
Other (Specify) Local No. 3496	Date of birth verified by: Birth Cert. Judicial Decree	
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes \ No Yes \	Other (Specify) Saspetal # 58032	
2. Are you under guardianship as a person of unsound mind? No Yes _ 3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? 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 Yes	Of Unsound Mind?	
4. Are you afflicted with a transmissible disease? No ▼ Yes □ No ▼ Yes □ Yes □ 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 Yes Yes Yes Yes Yes Yes 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 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)	6. Are you now under the influence of a narcotic drug? No Ves	
(a) List their full names, ages and addresses	7. Full name of father (if decessed so state)	
Name Age Address	Occupation of father Body Mechanic Race of father W	
	Birthplace of father (State or foreign country)	
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother. May Shules	
(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	Occupation of mother Hause Ple Ple Race of mother W Birthplace of mother (State or foreign country) Kentucky	
Occupation of father Unemployed - Perbuty Race of figher W	0	
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS Ss: I depose and state the information given in this application is true and correct.	
12. Full maiden name of mother Doubthy Cleve Sheatham. Residence of mother (if deceased so state) Indolo Indo	Signed Deblie Levis	
Occupation of mother Therefore Race of mother The	New Address Clayton	
in hold Indian	Subscribed and sworn to before me this 3 day of July , 19.76	
	Circuit Court	
19 July 1976		
	nly one parent	
To Whom it May Concern:		
July Concern:	\	
I, Joseph Lewis do hereby		
I, Joseph Lewis do hereby give my for my daughter, Debra Lewis to ma	permission and consent	
Dewis to ma	arry Michael Riley.	
	Father	
	Mother	
State of Indiana	, 19.762	
Marion County	Clerk	
On this 19 day of July 1074		
me, a Notary Public, in and for said County and State, and he made oath that the foregoing state.		
he made oath that the foregoing st	stement by Mi	
is true in substance and in fact		
	band and wife	
De w juring remeMy commission expired 19 March 103		
I, Salve Marie Correlation 191	market	
one thousand nine hundred and 76 at Mooresville , County of Margan, State of Indiana, Groom Michael & Filey of Hendricks County, State of Indiana		
and, Bride Albre Aspor Alwas of	Hendricks County, State of Indiana,	
were by me united in marriage as authorized by a marriage license issued for a County.	that purpose by the Clerk of the Circuit Court of	
Dated this 3/ day of July , 1976	Signed Castor Charles Horton	
	Official Designation Minister	
Filed and recorded in accordance with the laws of the State of Indiana this		
	Signed Hen M Narvey Clerk	
	HENDRICKS Circuit Court	

Form Prescribed By STATE OF STATE OF APPLICATION	INDVANA
Indiana State Buffer of APPLICATION FOR M	IARRIAGE TO No. 3/3
HENDRICK	File Plk 3 2
MALE	County - July 23 197/
Medical Examination Report Dated 7/19/76	FEMALE Date of Application
Name of Physician To Ramman mo	Medical Examination Report Dated 7/19/76
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1907	Name of Physician Sto Banener mil
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state ion 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
Name Middle	FEMALE APPLICANT
Date of Birth Month Day West act	Name First Middle
Place of Birth (State or foreign country) Place of Birth (State or foreign country)	Date of Birth Month Day
Street or R. R. City Mynny Il	Place of Birth (State or foreign country)
Residence Adultess La Fayttte County State State	Residence Address Street or R. R. City Court
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different B 02 593 Plansfull Be
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married C.
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages. Last Marriage Ended By: Death Divorce Date of Previous Marriages.
Usual Occupation Student	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 Student
An Imbecile? Of Unsound Mind? No D Yes D Yes D	Date of birth verified by: Birth Cert. Judicial Decree
2. Are you under guardianship as a person of unsound mind? No 🗍 Yes 🗆	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? No Yes	An Imbecile? 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	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 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 No	4. Are you related to the groom closer than second cousin? No No Yes
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 narcotic drug? No Yes
(a) List their full names, ages and addresses Name Age Address	7. Full name of father Additional Control of the Co
Traine 1100	Residence of father (if deceased so state) Occupation of father
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother Phyllis and Allen
(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? Advis Personal Alludia	Occupation of mother. PANSULC SUM Race of mother. White
11. Full name of father the fathe	Birthplace of mother (State or foreign country)
Residence of father (if deceased so state)	Birthplace of mother (State of foleign country)
Occupation of father Race of father Race of father	State of Indiana, State
Birthplace of father (State or foreign country)	County of HENDRICKS
Residence of mother (if deceased so state)	Signed Signed All All All All All All All All All Al
Occupation of mother. And All Market Market of mother.	New Address
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this 23 day of 18
State of Indiana	Gerk HENDRICKS Circuit Court
County of HENDRICKS ss: I depose and state and correct.	
Signed Curk Selection James	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address () (B) La + again () (1)	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 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, ss:
	County of HENDRICKS
State of Indiana,	Signed
County of HENDRICKS Father Signed Mother	Signed
Signed	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me thisday of	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	Varies having been refused to the above named parties, the
COMPLETE IN MARRIAGE LIGENSE ISSUED BY ORDER OF COUR	RT. A marriage license having been relused and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT HENDRICKS County authorizes and directs the issuance of the county authorizes are considered as a county authorize and directs the issuance of the county authorizes are considered as a county authorize and directs the issuance of the county authorize aut	ourt by written order license to the above named parties.
IIIautilotiza	THE CE CERTIFICATE CONTRACTOR CON
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage licent day of the literature.	E AND MARKINGS
Be It Remembered, there was filed in my office a marriage live	192 (e., authorizing the joining together
Indiana dated the	and
1 11 11 11/4 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Can to-wat:
Be it further remembered, the following marriage certificate was filed in my in the state of the	hereby certify methodist Church County of Milionis
Be it further remembered, the following marriage certificate was filed in my of the following marriage certificate was filed in my of the following marriage certificate was filed in my of the file of the file of Indiana Green Auf State of Indiana Green Indian	at Iron 4. Methodist Church County of Illinois of Stark County, State of Indiana, County, State of Indiana, HENDRICKS
and Bridge Canal Sillmane of	of Stark County, State of Indiana, Of Stark County, State of Indiana, that purpose by the Clerk of the Circuit Court of HENDRICKS
Many I	- p / Im. deally
County.	Signed John & Mount
Dated this	- in Milliand 1976
	19 day of Cherk
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Illen M. Hannely Circuit Court
and the accordance with	

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

No. 3/4
File 37

HEN	DD	ICKS	
LICIA	DK	CILO	

7-26-76

TIENSKE	Date of Application
MALE MALE	FEMALE Modical Examination Report Dated 7-16-76
Medical Examination Report Dated 7-16-76	Medical Examination Report Dated 7-16-76
Name of Physician Maurice. V. Kahler	Name of Thysician 7 September 1
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	tement-Whoever procures the issuance of a license to marry by any false statement, representa-
MALE APPLICANT	FEMALE APPLICANT
Name First Middle Last	Name First Middle Last
Date of Birth Month Day Year	Date of Birth Month Day Rear
Place of Birth (State or foreign dountry)	Place of Birth (State or foreign country)
New Winchester, Marion Jag. Indiana Residence Address Street or R. R. City County State	Residence Address Street or R. R. City County State
Box / Clayton Indiana	2715 W. Jackson Indeanapoles, In
Previous Marital Status: Never Married UNumber of Previous Marriages	Maiden Name if Different Betty L majewell
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages.
Color or Race White V Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation James & Daniella	Color or Race White ☑ Negro □ Other □ (specify)
Date of birth verified by: Birth Cert. Judicial Decree Hendricks Co. Dept.	Usual Occupation & Continue Trust Rose
Other (Specify) JNLall Bk 5, 41	Date of birth verified by: Birth Cert. Dudicial Decree Div. Sueblic Neall
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Of Unsound Mind? Yes □ No ② Yes □	Other (Specify)#998
2. Are you under guardianship as a person of unsound mind? No Z Yes	1. Are you now or have you been adjudged, diagnosed or considered as:
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons?	An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed? No Yes 4. Are you afflicted with a transmissible disease? No Yes	Of Unsound Mind?
5. Are you related to the bride closer than second cousin? No Yes	2. Are you under guardianship as a person of unsound mind? No Yes
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a narcotic drug? No Yes	3. Are you afflicted with a transmissible disease? No Yes
8. Are you able to support a family? Yes V 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? 11. Ves Volume Volu	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 manwell
Name Age Address	Residence of father (if deceased so state) Saland, Ind.
	Occupation of father astrica Race of father W.
	Birthplace of father (State or foreign country)
(b) Are you supporting or contributing to their support? Yes ☐ No ☐	8. Full maiden name of mother addie white
(c) Are you complying with any court order or orders issued for their support? Yes \sum No \sum	Residence of mother (if deceased so state) Saland, Ind.
11. Full name of father Kern Ellett	Occupation of mother Castered Race of mother W.
Residence of father (if deceased so state) Declared	Birthplace of mother (State or foreign country) Kentercky
Occupation of father	
Birthplace of father (State or foreign country) Indiana	State of Indiana, County of HENDRICKS in this application is true and correct.
12. Full maiden name of mother Sallen Montgomers	South of the state
11 20 4 W. Washington Residence of mother (if deceased so state) Bridglewort Ind.	Signed Belty X Waght
Occupation of mother Office Warker Race of mother	New Address 25 4 Clay Av 200
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this 26 day of July 1976.
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Glerk HENDRICKS Circuit Court
Signed XXXIII & Ellett	
New Address BOX I Clay to June	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this 2 day of July , 1976.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Me Marself ClerkHENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR GUARDIAN	
We, the parents, of this applicant hereby give consent for this marriage. If only one parent igns, state facts which render the consent of the other parent unnecessary	
igns, state facts which render the consent of the other parent unnecessary	
	State of Indiana,
state of Indiana,	County ofHENDRICKS
County of HENDRICKS ss:	SignedFather
Signed Father	SignedMother
Signed Mother	Subscribed and sworn to before me thisday of
ubscribed and sworn to before me thisday of, 19	Clark
	Cierk
	T. A marriage license having been refused to the above named parties, the
	urt by written order issued
nauthorizes and directs the issuance o	
RETURN OF MARRIAGE LICENS	
of Indiana dated the 30 day of	se issued by the clerk of the HENDRICKS Circuit Court
Conald D 6 Clett	nd Botter of the graft
Be it further remembered, the following marriage certificate was filed in my o	fice, to-wit: 0
Illenn Samsley, Ju	
ne thousand nine hundred and	
tate of Indiana, Groom A sonald To flett	- O TOTAL OF THE PARTY OF THE P
nd, Bride of of the marriage as outhering the	marion County, State of Indiana,
	that purpose by the Clerk of the Circuit Court of
Pated this 30 day of July , 1976	
	Signed XIENN A Samily &
	Official Designation Treslegterian Tastor
iled and recorded in accordance with the laws of the State of Indiana this	~ · · · · · · · · · · · · · · · · · · ·
	Signed Allen M. Harvey Clerk

...Circuit Court

Health under Authority Chap. 126, Ind. Acts 1905 APPLICATION FOR	INDIANA
Health under Authority Chap. 126, Ind. Acts 1905 APPLICATION FOR 1	MARRIAGE LICENSE
HENDRICE	rile
MALE	County 7-26-76
Medical Examination Report Dated 7-17-76	FEMALE Date of Application
Name of Physician Barbara Q. Beeler	Medical Examination Report Dated 7-17-76
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name First Middle	Name of Physician Barbara A Barl
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	tement—Whoever procures the issues to
Name First Middle	the issuance of a license to marry by any false statement, representa-
Farry Land In Last	FEMALE APPLICANT
Date of Birth Month Day Year Year	Middle Middle
Place of Birth (State or foreign country) 1955	Date of Birth Month to Day Me Colton
Residence Address Street or R. R. City Indiana	Place of Birth (State or fgreign, country) 30 1957
Brownsheera State	Residence Address Street or R. R. Chio
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different State Oits County State
Last Marriage Ended By: Death Divorce Annulment	Sma.
	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Maurice T 1 1 1
Usual Occupation Janetor - Student	Annulment
Date of birth verified by Birth Cert. Judicial Decree Ind . Bd . of Health	Color or Race White Negro Other (specify)
Other (Specify)	Usual Occupation Steedent
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 Okio Dept of Health
No F Yes	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons?	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 Ves	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 W 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 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	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) Brauens lusta Ind
	Occupation of father Claums Manager Race of father W
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother Jellen Elizabeth Seiffenstein
(b) Are you supporting or contributing to their support? Yes No	Residence of mother (if deceased so state) Brauens July Jond
their support? Yes No	Occupation of mother Medical Querds Race of mother 2
11. Full name of father Marge of Marries	100.
Residence of father (if deceased so state) AZALLING MILLEY, SING.	Birthplace of mother (State or foreign country)
Occupation of father Competites Specialistiace 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 HENDRICKS in this application is true and correct.
12. Full maiden name of mother Darbara 6 Glaklif	Signed Muta ann M. Gilton
Residence of mother (if deceased so state) Drawn Surg , India	New Address # 5 Shermans Traile Ct. atlanta, Oll
Occupation of mother Sales Alp. Race of mother Manual Race of Manual	Subscribed and sworn to before me this. 2 6 day of July 1976.
Birthplace of mother (State or foreign country)	
County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Glen M. Harvey Clerk HENDRICKS Circuit Court
Signed Larry ta Mar Morres	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address #15 TS hermans Inally Ct. attanta, ell.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworn to before me this 26 day of July , 19.6.	
Gerk 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, ss:
	County of HENDRICKS
State of Indiana,	Signed
County of HENDRICKS Father	Signed
SignedMother	Subscribed and sworn to before me thisday of
Signed	Subscribed and sworn to before me this
ot-de	
	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 COUR CO	1. A marriage and med
HENDRICKS County	f a marriage license to the above named parties.
inauthorizes and direct	MARRIAGE CERTIFICATE Circuit Court
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage licen of Indiana dated the 30 day of 32 marriage and 32	19.76, authorizing the joining together as husbana and wife
of Indiana dated the 30 day of	- Marsa Wille
of Indiana dated the 30 day of findiana and are Markes was filed in my o	fice, to-wit: 1st day of Ougust
Be it further remembered, the following marriage certificate was filed in my o	thereby certify that on the see day of the drieks at Brusses Surg County, State of Indiana, Sendricks County, State of Indiana,
1, July Made Mandella Mala	at Drulle State of Indiana
the thousand nine hundred and	of State of Indiana,
State of Indiana, Groom Lagrage Man Manage County. State of Indiana, Groom Lagrage Manage Manage County. State of Indiana, Groom Lagrage Manage Man	Lendricks Hendricks
and, Bride Marta umma Mile Jelastic issued for	that purpose by the Clerk of the Otto
were by me united in marriage as authorized by a marriage account.	6 Ource & nash
Dated at:	nental de
any of	Official Designation Quesust, 19.76.

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

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

File_

HENDRICKS	County

7-26-76
Date of Application

MALE 7-21-76	FEMALE Medical Examination Report Dated 7-21-76
Medical Examination Report Dated 721-16	Name of Physician Wm. Edwards m.D.
Name of Physician Wm. Gaward And 1905 prescribes "False state. ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state" 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 flatter	FEMALE APPLICANT
MALE APPLICANT Name (First Middle Last	Name First Middle Last
Wavid U. Bryant	Date of Birth Month Day Year
Date of Birth Month Day 1 tear 1953	Place of Birth (State of 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	405-B Ridgewood Wr. Flfd.
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different
Last Marriage Ended By: Death Divorce Annulment 799	Previous Marital Status: Never Married Number of Previous Marriages
	Last Marriage Ended By: Death Divorce Annulment Hend.
	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Dudicial Decree	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Other (Specify) # 1/3 - 53 - 23/060	Usual Occupation
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Yes	Other (Specify) # 109-56-055592
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes \tag{Yes} \tag{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? No Ves No Ves No Ves
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?	2. Are you under guardianship as a person of dissease? 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 Yes Yes	4. Are you related to the groom closer than second cousin? No Yes
8. Are you able to support a family? Yes No	5. Are you now under the influence of intoxicating liquor? No Yes
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? Yes No Yes No Yes No Yes No	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 a dward Shelton Haylers
Name Age Address	Residence of father (if deceased so state) 727 The Roug In Flg d
	Occupation of father Tho 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 State Calpine Male
(c) Are you complying with any court order or orders issued for their support? Yes No	Residence of mother (if deceased so state) R. Box 194-Wellborn
11. Full name of father Ralph Leroy Brigant	Occupation of mother Accessing Race of mother.
Residence of father (if deceased so state) 837 Walton NA Flavy	Birthplace of mother (State or foreign country) - louda)
Occupation of father all Wistributor Race of father	
Birthplace of father (State or foreign country) Tlaungueld	State of Indiana, County ofHENDRICKS
12. Full maiden name of mother / atthor (clothen besger)	Melofy Barley
Residence of mother (if deceased so state) Admil	Signed 10/8 Dess Street
Occupation of mother Alleman Race of mother	New Address.
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this. 26 day of July, 19.76
State of Indiana, County of HENDRICKS SS: I depose and state the information given in this application is true and correct.	Allen In Harvey Clerk HENDRICKS Circuit Court
Signed Middle Signed	
New Address 1018 1211 St. Manual 1911	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of July , 19.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Slen 71 Thorney ClerkHENDRICKS 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	
signs, state facts which render the consent of the other parent differences.	
	State of Indiana,
State of Indiana,	County ofHENDRICKS
County of HENDRICKS ss:	SignedFather
Signed Father Mother	Signed
Signed	Subscribed and sworn to before me this
Clerk	Clerk
	RT. A marriage license having been refused to the above named parties, the ourt by written order issued
inauthorizes and directs the issuance of	
	SE AND MARRIAGE CERTIFICATE
	nse issued by the clerk of the HENDRICKS Circuit Court
7.0	, 19.7.2, authorizing the joining together as husband and wife
David a Brijant	and Melody Berlin
Be it further remembered, the following marriage certificate was filed in my	office, to-wit:
1, John S. Arollinger	
one thousand nine hundred and 76	01 11 1
	of Hendricks County, State of Indiana,
	that purpose by the Clerk of the Circuit Court of HENDRICKS
County	
Dated this st day of Sugust, 19.7.	6. Simul Jahr of De Oliver
	Signed for the first the signed
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Manually
and and and of the State of Indiana this	Signed Glen M. Harvey Clerk
	HENDRICKS Circuit Court

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, representa-FEMALE APPLICANT Previous Marital Status: Never Married | Number of Previous Marriages. Death | Divorce & Annulment | 1976 Boon Last Marriage Ended By : Previous Marital Status: Never Married | Number of Previous Marriages | Dil White Negro | Other | (specify). Color or Race Last Marriage Ended By: Death Divorce Annulment D 1976 Color or Race C'Birth Cert. | Judicial Decree White Negro Other (specify). # 8129 Usual Occupation Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile?
 Date of birth verified by: Birth Cert. Dudicial Decree No W Yes | No W Yes | 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: No Yes An Imbecile? If answer to I is "yes" has the cause of such condition been removed? No Yes No Yes Of Unsound Mind? 4. Are you afflicted with a transmissible disease? No Yes No I Yes 🗌 5. Are you related to the bride closer than second cousin? 2. Are you under guardianship as a person of unsound mind? Yes 🗌 No Yes 6. Are you now under the influence of intoxicating liquor? No D Yes 3. Are you afflicted with a transmissible disease? 1. Are you now under the influence of a narcotic drug? No Yes Yes 🗆 4. Are you related to the groom closer than second cousin? 8. Are you able to support a family? No 🗆 No Yes Yes D 9. Are you likely to so continue? 5. Are you now under the influence of intoxicating liquor? Yes [] No 🗆 No Yes 10. Do you have minor children from one or more former marriages? No Yes Z 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 Garries monra Birthplace of father (State or foreign country)..... 411 warrum Yes D 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 D State of Indiana, Birthplace of father (State or foreign country). County of HENDRICKS mennie Buch Signed Phyllis V. Landwie 12. Full maiden name of mother Residence of mother (if deceased so state)____ Occupation of mother ... 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... MINNEY CHER HENORICKS 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 Father Signed. 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, theCourt by written order issued... authorizes and directs the issuance of a marriage license to the above named parties.County... HENDRICKS 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.... ..., 19.76., authorizing the joining together as husband and wife ahyllis V. Goodnigh 30 of Indiana dated the ... Be it further remembered, the following marriage certificate was filed in my office, to-with hereby certify that on the 3/st day ofat M. Salem Christian Che, County of Hendricks County, State of arl a Nava __of______County, State of Judiana, one thousand nine hundred and .. wayne State of Indiana, Groom Jobeth Dated this. Official Designation .. Filed and recorded in accordance with the laws of the State of Indiana this... .. Circuit Court HENDRICKS

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

File

Chap. 126, Ind. Acts 1905 HENDRICKS _County Date of Application FEMALE Medical Examination Report Dated MALE Medical Examination Report Dated Name of Physician. agono 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 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 wollian Usual Occupation Date of birth verified by: Deffth Cert. Judicial Decree Other (Specify). Are you now or have you been adjudged, diagnosed or considered as: An Imhecile? No Yes Other (Specify). No D 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? Are you now or have you been within five (5) years an inmate of a home for indigent persons? No Yes No Yes An Imbecile? No Yes Of Unsound Mind? If answer to 3 is "yes" has the cause of such condition been removed? No [Yes 🗌 No Yes Yes 🗌 2. Are you under guardianship as a person of unsound mind? 4. Are you afflicted with a transmissible disease? No [2 Yes 🗌 No D Yes D No D 5. Are you related to the bride closer than second cousin? No Yes 3. Are you afflicted with a transmissible disease? 4. Are you now under the influence of intoxicating liquor? 4. Are you related to the groom closer than second cousin? No D Yes 7. Are you now under the influence of a narcotic drug? Yes No No No Ves 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 D Yes No 🖸 Yes 🗆 19. Do you have minor children from one or more former marriages? Charles (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 Alle Walley Race of father Alle 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 court order or orders issued for their support? Yes No Occupation of mother / DMA 11. Full name of father. sullana Birthplace of mother (State or foreign country) .. Residence of father (if deceased so state) Race of father. My Occupation of father. I depose and state the information given in this application is true and correct. State of Indiana, Birthplace of father (State or fopelga country) ... County of HENDRICKS Residence of mother (if deceased so state) Occupation of mother. Birthplace of mother (State or foreign country) Ridiana I depose and state the information given in this application is true and correct. Clerk HENDRICKS State of Indiana, ...Circuit Court 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 1976. signs, state facts which render the consent of the other parent unnecessary Silen III Harvy derMENDRICKS 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... County of HENDRICKS State of Indiana. County of HENDRICKS Father Signed. Mother Signed. 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 Superior Court by written order issued 3 day wave 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 HENDRICKS Circuit Court, 19 76., authorizing the joining together as husband and wife and nancy Law ames Cleathon Be it further remembered, the following marriage certificate was filed in my office, to-wit: Jara & Harad at Mooresville County of Trendricks one thousand nine hundred and State of Indiana, Groom James Cleathon arthur of Hendricks County, State of Indiana and, Bride Mances Sou Shrake of Margan County, State of Indiana, County. July , 19 76. Dated this ... Official Designation Jawn JudgeCircuit Court HENDRICKS.

Of Unsound Mind

Are you under guardianishis Hanswel to S is "yes" has the , are you afflicted with a transn I Are you related to the bride close Are you now under the influent Are you now under the influen à Are you able to support a fami 3. Are you likely to so continue M. Do you have minor children from If yes, snawer questions a. i. (a) List their full names ages

Jaa (b) Are you supporting or co (t) Are you complying with an their support "

II. Full name of father Residence of father (if decess

Occupation of father Birthplace of father State of I Full maiden name of mother

State of Indiana, County of HENDRICKS

New Address Subscribed and sworn to before Della 11 CONSENT OF PARENTS, PA igns, state facts which render

State of Indiana, County of HENDRICKS Signed

Subscribed and sworn to befor COMPLETE IF MARI

Be It Ret of Indiagra dated the Beit further remember

Circuit Court

HENDRICKS

Form Prescribed By Indiana State Board of Health under Authority Chap. 126, Ind. Acts 1905 STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE HENDRIGGE		
HENDRICK	(S)	
MALE Medical Examination Report Dated 7- 26-76	County 1-27-16 Date of Application	
Name of Physician Wm. Idwards	Medical Examination Report Dated 7- 22	
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False stated and the fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name First Middle	Name of Physician Wm. Saurana	
MALE APPLICANT	tement—Whoever procures the issuance of a license to marry by any false statement	
Name Pirst Middle V Last	Name FEMALE APPLICANT	
Date of Birth Month Day Year	O Middle	
Place of Birth (State or foreign country)	Date of Birth Month Day Tony	
Residence Address Street or R. R. City County State	Place of Birth (State or foreign country)	
Previous Marital Status: Never Married Number of Previous Marriages	Residence Address Street or R. R. City State	
Last Marriage Ended By: Death Divorce Annulment	Maiden Name if Different	
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages.	
Usual Occupation Mach: L	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 Labratura	
Of Unsound Mind?	Date of birth verified by: Birth Cert. Judicial Derec	
2. Are you under guardianship as a person of unsound mind? No Yes Yes No Ye	Other (Specify)	
If answer to 3 is "yes" has the cause of such condition by	An Imbecile?	
4. Are you afflicted with a transmissible disease? 5. Are you related to the bride closer than second cousin?	Of Unsound Mind?	
6. Are you now under the influence of intoxicating liquor?	Are you under guardianship as a person of unsound mind: No Yes 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 O Yes O	
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	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)	
Chris Munglotin 3 Mouswelle	Occupation of father Retteries Race of tather 18th	
Chaa '''	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.	
their support? Yes No 11. Full name of father Asl Q. Managestix	Occupation of mother (if deceased so state)	
Residence of father (if deceased so state) Mequation in	Birthplace of mother (State or foreign country)	
Occupation of father Carpenter Race of father Wh		
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS Is this application is true and correct.	
12. Full maiden name of mother of May Company of mother	Signed The F. Junley	
Occupation of mother Additional Race of mother Miles	New Address 145 R.2 Indplb Ind 4623	
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this 27 day of July 10.76	
State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Dleso M. Harvely Gerk HONDERCKS Carrent Court	
Signed Vickoud Rungeston	CONSENT OF PARENTS, PARENT OR GUARDIAN	
New Address RR2 Box 145 Indiango lis and	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 1946.	signs, state facts which render the consent of the other parent unberensary	
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	
County ofHENDRICKS	Signed	
Signed Father Signed Mother	Subscribed and sworn to before me this day of	
Subscribed and sworn to before me thisday of		
	mings license having been refused to the above named parties, the	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	r. A marriage license having been refused to accept and filed art by written order issued and filed a marriage license to the above named parties.	
HENDRICKS County	a marriage license to the above hame	
authorizes and disconnections are disconnections and disconnections and disconnections and disconnections are disconnections an	AND MARRIAGE CERTIFICATE PROPERTY Circuit Court	
Be It Remembered, there was filed in my office a marriage licens	se issued by the clerk of the her issued by the clerk of the sauthorizing the joining together as husband and wife at the Ray Finley	
I Indiana dated the day of	a 6 thelamin my	
Dichard Lee nungister was filed in my of	fice, to-wit: 30 day of July	
se it further remembered, the following marriage certificate was filed in my of by Bryan and The analysis of the following marriage certificate was filed in my of the following marriage certificate was filed in	Mooresville County of Indiana	
thousand nine hundred and	I Little Stage of Chata of Chata of	
ne thousand nine hundred and 76 Rungusters of Indiana, Groom sichard Lee Mungusters of	Hendricks Court of HESDECKS	
na, Bride 6 thel A set William	hat purpose by the contract	
county.	Signed Sold Talmin Dregant	
County. Dated this 30 day of July 0	Gricial Designation Ministers 1974	

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

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

File____

.....Circuit Court

HENDRICKS

Chap. 126, Ind. Acts 1905 HENDRICK	County July 27, 1976 Date of Application
MALE	FEMALE 7- 23-7/
Medical Examination Report Dated 7-33-76	Medical Examination Report Dated 7-23-76
Name of Physician pupil Kerlen	Name of Physician flotph Asken
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	tement—Whoever procures the issuance of a license to marry by any false statement, representa-
MALE APPLICANT	FEMALE APPLICANT
Name First Middle Walter	Name First Middle Vest
Date of Birth Month Day Year	Date of Birth Month Day Year 2 1956
Place of Birth (State or foneign country)	Place of Birth (State or Toreign gountry)
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 Physical Distriction of the Company of the Compan	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation
Gother (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 No Yes	Other (Specify) Military I. D.
2. Are you under guardianship as a person of unsound mind? No ☐ Yes ☐ 3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No 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? Of Unsound Mind? No Wes Yes
4. Are you afflicted with a transmissible disease?	2. Are you under guardianship as a person of unsound mind? No W 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? No 📝 Yes 🗆
7. Are you now under the influence of a narcotic drug? No Yes \(\begin{array}{cccccccccccccccccccccccccccccccccccc	4. Are you related to the groom closer than second cousin? No Yes Yes No Yes Yes No Yes Yes No Yes Yes Yes Yes Yes Yes Yes Yes
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? 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 Williams F. West
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Jas Mand g. Race of father Wh
	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.
their support? Research 11 110 Att.	Residence of mother (if deceased so state)
Residence of father (if deceased so state)	Occupation of mother Race of mother Birthplace of mother (State or foreign country)
Occupation of father All Shift Shift Race of father WA	Dirthplace of mother (State of Toreign Country)
Birthplace of father (State or foreign country).	State of Indiana, County ofHENDRICKS
12. Full maiden name of mother Marlene Haylon	7/26.8.41
Residence of mother (if deceased so state)	New Address Line Ville (1997)
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this. 2.7 day of 19.76
State of Indiana, I depose and state the information given	Subscribed and sworn to before the this Land Clerk HENDRICKS Circuit Court
County of HENDRICKS Signed Lephon Wayne Watter	- William Court
New Address Princevilla Oregon	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this 27 day of July 19.76	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
GlerkHENDRICKS 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 ofHENDRICKS
State of Indiana, County ofHENDRICKS	Signed. Father
SignedFather	Signed
Signed	Signed
Subscribed and sworn to before me this	
	Clerk
	RT. A marriage license having been refused to the above named parties, the
County	ourt by written order issued
	E AND MARRIAGE CERTIFICATE
	nse issued by the clerk of the HENDRICKS Circuit Court
of Indiana dayed the day of day	, 1976, 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 21 day of August,
one thousand nine hundred and 76	at First Baptist Ch, Plainfield, County of New dricks,
State of Indiana, Groom Alephen Wayne Walton	
and, Bride VacRi S. Vest of	New State of Andrana,
were by me united in marriage as authorized by a marriage license issued for County.	
Dated this 21 day of August , 19.7	Signed Robert L. Buris
	Official Designation Paster, Plfs Baptist Church.
Filed and recorded in accordance with the laws of the State of Indiana this	
	Signed My Housey Clerk

STATE OF

APPI ICAME		FINDIANA	
LICATION	FOR	MARRIAGE LICENST	
	- 016	MARRIAGE LIGHTON	ij

Chap. 126, Ind. Acts 1905 HENDRICK	File
MALE	County
Medical Examination Report Dated 7-14-76	FEMALE Pate of Application
Name of Physician Juring Cohen	Medical Examination Report Dated 7-14-7/
ALL QUESTIONS MUST BE ANSWERED, Chapter 126, Indiana	Name of Physician Prysica Cul.
ALL QUESTIONS MUST BE ANSWERED, Chapter 126, Indiana Acts 1905 prescribes "False state tion of pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name First Middle	tement—Whoever procures the issuance of a line
Name First Middle	and an incense to marry by any false statement, representa-
Afrew Olan Blast	Name First
Date of Birth Month Day Year	Date of Birth Month Jean Middle
Place of Birth (State or foreign country) Indiana	Place of Birth (State or foreign country) Place of Birth (State or foreign country)
Residence Address Street or R. R. City County State	Residence Add.
Previous Marital Status: Never Married D Number of Previous Marriages	Kf 2 B
The state of the s	Maiden Name if Different . Carfon.
	Previous Marital Status: Never Married V Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation Lispatcher	Colon on B
Date of birth verified by: Birth Cerf. Judicial Decree	Negro Other (specify)
Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation Sales Clarke
Of Unsound Mind?	Date of birth verified by: Birth Cert. Judicial Decree
2. Are you now or have you been within five (5) years an inmate of a county follows.	1. Are you now or have you been adjudged, diagnosed or considered as:
Manager to 3 is "yes" has the cause of such and size have	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 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
7. Are you now under the influence of a narcotic drug? No Ves	4. Are you related to the groom closer than second cousin? No Ves
9. Are you likely to so continue? Yes 🗹 No 🗆	5. Are you now under the influence of intoxicating liquor? No Ves
10. Do you have minor children from one or more former marriages? No V Yes \(\square\) (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 flming 5
Name Age Address	Residence of father (if deceased so state)
	Occupation of father State or foreign country) Assistables
	8. Full maiden name of mother Winified L. Morris
(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) Clautton, In
their support? Charles T. Brown	Occupation of mother Nan Race of mother wh
Residence of father (if deceased so state) Plainfield In	Birthplace of mother (State or foreign country)
Occupation of father Supervish Race of father Wh	- That do not be sell to the state of the state of the selection of
Birthplace of father (State or foreign country) Kuntucky	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 I hilmay J. Hart	Dita (Muse
Residence of mother (if deceased so state) Lainfills In	New Address 2002 Kinduchy Planticle
Occupation of mother Substitution Race of mother Substitution of mot	n 2 () ()
State of Indiana. I depose and state the information given	Subscribed and sworn to before me this day of day of July 1970. Subscribed and sworn to before me this day of HENDRICKS Circuit Court
County of HENDRICKS In this application is true and correct.	- Sellin file from the file of the selling from the file of the selling from the selling fr
Signed Esteen Court	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 200 Kenthuckey Causage	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 the sworn to be sworn to b	signs, state facts which render the consent of the other parent unnecessary
A LATO Andread And All Market from Creek and Andread A	
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
State of Indiana.	Signed Father
County of HENDRICKS	Signed
Signed Mother	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me thisday of, 19	
VIELA	l'area having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County authorizes and directs the issuance of	T. A marriage license having been refused to the above named parties, the
HENDRICKS County Co	ourt by written order issued parties.
in authorizes and directs the issuance of	a marriage resistance CERTIFICATE
DETURN OF MARRIAGE LICE	. 1 L. the clerk of the
Be It Remembered, there was filed in my office a marriage licent of Indiana dated the Brouter Brouter Sted in my office a marriage licent and the Brouter Brouter Sted in my of the sted in my o	, 19.76, authorizing the joining together as
of Indiana dated the day ofa	nd Onita Jan 1 centre
Be it fruit A A Life the sping marriage certificate was field in the	. I gendries,
1, Marc I Down	at a lainfield, County of Indiana
one thousand in body and 76	Hendricks County, State of Indiana,
I, Marc Stays one thousand nine hundred and State of Indiana, Groom Jeffrey Alan Brown and, Bride Inita Jan Meck of were by me united in marriage as authorized by a marriage license issued for County. 1, 19.74	Quandricks Court of HENDRICKS
and, Bride anita Blan meece of	that purpose by the Clerk of the Circuit Court
were by me united in marriage as authorized by a marriage license issued jo.	Official Designation Baptist Castor 1976.
Dated this 716 Quartet, 1976	Signed Malle Tist Castor
County. Dated this The day of Designate, 19.74	Official Designation August , 19 76.
Dated thisday of	Official Designation August , 19 Technology Clerk Signed Glen Marself Circuit Court HENDRICKS Circuit Court
Filed and recorded in accordance with the laws of the State of	Signed Slin M. Warning Circuit Court HENDRICKS

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No	322
File_	37
	7-29-76

I to the have mine considered

Sale of Indiana. Detto of HENDRICKS

CALTE IN MYTHERATION

by he kemember of Indiana dates the

HENDRICKS	County Date of Application
MALE 7-71-76	FEMALE Medical Examination Report Dated 7-19-76
Medical Examination Report Dated 7-27-76	Name of Physician D. Kete Cochrell
Name of Physician Crue Caract ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False states of the construction of the	
tion or pretense shall be lined in any sum not exceeding in any	FEMALE APPLICANT
MALE APPLICANT Name First Middle Last	Name First Middle Last
Harald E. Jones	Date of Birth Month Day Year
January 4 1912	Place of Birth (State ordoreign country)
Place of Birth (State of foreign country)	Greenfield and Granty State
Residence Address Street or R. R. City County State	Residence Address Street or R. R. Judeanapalis, Ind.
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Ans. M. Skite
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White P Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
Usual Occupation To a a harr	Color or Race White Megro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Secretary
Other (Specify) Social Security 316-09-2006	Date of birth verified by: Birth Cert. Judicial Decree
1. Are you now or have you been adjudged, diagnosed or considered as: No Yes	Pother (Specify) Social Successful 303-26-9136
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes 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? No Z Yes No Z Yes No Z Yes
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 ☐ 3. Are you afflicted with a transmissible disease? No ☐ Yes ☐
6. Are you now under the influence of intoxicating liquor? No Yes 7. Are you now under the influence of a narcotic drug? No Yes 7.	4. Are you related to the groom closer than second cousin? No Yes
8. Are you able to support a family? Yes No	5. Are you now under the influence of intoxicating liquor? No ☐ Yes ☐
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? Yes No Ves No Ves	6. Are you now under the influence of a narcotic drug? No Yes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father James h. W. Rule
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 Paris L. Milliams
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state) Stella filld, Ind.
11. Full name of father Elmer Jones	Occupation of mother relieved Race of mother of
Residence of father (if deceased so state) Allegald	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. ss: In this application is true and correct.
12. Full maiden name of mother Megdala gordana. Residence of mother (if deceased so state) hold and the state of the stat	Signed Town M. On Remeros
Occupation of mother	New Address 758 W. Clinton Sanvellerand
Birthplace of mother (State or foreign country). Indiana	Subscribed and sworn to before me this 27 day of July, 19.76.
State of Indiana, I depose and state the information given	Slen M. Harvey Clerk HENDRICKS Circuit Court
County of HENDRICKS ss: I depose and sale the in this application is true and correct.	The state of the s
New Address / S W. Chinton & Danville &	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 2 day of July 1976.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworn to before the classification of the court 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,
	County ofHENDRICKS
State of Indiana, County ofHENDRICKS	SignedFather
SignedFather	Signed
SignedMother	Subscribed and sworn to before me this
Subscribed and sworn to before me thisday of	Subscribed and sworth to before the case
Clerk	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	RT. A marriage license having been refused to the above named parties, the
HENDRICKS County C	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
Be It Remembered, there was filed in my office a marriage lice	ense issued by the clerk of the HENDRICKS Circuit Cour
of Indiana dated the day of July	, 1976, authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my	and Lois M. Backemeyer office, to-wit:
1 Norman & Weaver	hereby certify that on the SIRL day of
and thousand nine hundred and 7 (e	at hanvelle County of Vendricks
State of Indiana, Groom Haruld & Janes	of Randricks County, State of Indiana
	marion County, State of Indiana
	r that purpose by the Clerk of the Circuit Court ofHENDRICKS
County. Dated this 3/st day of July , 19	76. 7
The state of the s	Signed all officers
	Official Designation Minister
Filed and recorded in accordance with the laws of the State of Indiana this	day of Ullight , 19 7/a
	Signed Hen M. Harvlef Cler
	HENDRICKS Circuit Cour

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

MALE	County	
Medical Examination Report Dated 7/24/76	FEMALE Date of Application	
Name of Physician & Thomas This	Medical Examination Report Dated 17/24/76	
The think I like a	Name of Phase :	
ALL QUESTIONS MUST BE ANSWERED. Chapter 126. Indiana Acts 1905 prescribes "Palse station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name	Alamae Wien	
MALE APPLICANT	Whoever procures the issuance of a license to marry by	
Name Lighter Miffly	FEMALE Appropriate Statement, representa-	
Date of Birth Monthy Day Crawford	Name First Middle	
Place of Birth (State up togetion bountry)	Date of Birth Month Plan notes	
Teromo Thrend o	Place of Birth (State or foreign country) Day Year 1955	
Residence Address Street or R. R. City, County State	Residence Address Castlo D+	
Previous Marital Status: Never Married D Number of Previous Marriages	City County Services	
	Maiden Name if Different Box 32 Couteswille Sand.	
Last Marriage Ended By: Death Divorce Annulment D	Previous Marital Status: Never Mansi	
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages	
Usual Occupation Steeph Barnis	Death Divorce Annulment	
Date of birth vertified by : Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)	
2 Other (Specify) Ship # 1232 55 543	Usual Occupation State Pen 100	
1. Are you now or have you been adjudged, diagnosed or considered as: An imbedia? No 22 Yes	Date of birth verified by: Birth Cert. Judicial Decree	
2. Are you under guardianship as a person of unsound mind?	Other (Specify) # 1/3-55-105527	
1. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons?	Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?	
If answer to 1 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind?	
4. Are you afflicted with a transmissible disease? 5. Are you related to the bride closer than second cousin? No D Yes	2. Are you under guardianship as a person of uncound winds	
6. Are you now under the influence of intextesting liquor? No Yes	3. Are you afflicted with a transmissible discours	
1. Are you now under the influence of a narcotic drug? No D Yes D Are you able to support a family?	4. Are you related to the groom closer than second cousin? No Yes	
1. Are you likely to so continue? Yes No	5. Are you now under the influence of intoxicating liquor? No Yes	
10. Do you have minor children from one or more former marriages? No Yes (If yes, answer questions a, b, c)	6. Are you now under the influence of a narcotic drug? No Yes	
(a) List their full names, ages and addresses	7. Full name of father Rolland L. Nelle	
Name Age Address	Residence of father (if deceased so state)	
	Occupation of father The State And Race of father	
	Birthplace of father (State or foreign country)	
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for	8. Full maiden name of mother	
their support?	Residence of mother (if deceased so state)	
11. Pull name of father fall for the Chilly Milly 12	Occupation of mother both and the Race of mother Ra	
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)	
Occupation of father and white father for the Bare of father William	State of Indiana, I depose and state the information given	
Birthplace of father (State of foreign consistry) Silver Phillips	County of HENDRICKS in this application is true and correct.	
13. Full maiden name of mother fully and mother	Signed Rita Jean Deien	
Occupation of mother (if deceased so state) (1)	New Address RR & Box 39 Contesionle	
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this and ay of Jobbly 19.26	
State of Indiana, I depose and state the information given	My Manualy Clerk HENDRICKS Circuit Court	
County of MENDRICKS and in this application is frue and correct.	- Allhard	
Signed Discolly a Claud Coly	CONSENT OF PARENTS, PARENT OR GUARDIAN	
Now Address C. Z. DOX 39 Matesville Jan.	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 fully , 19.1.4	signs, state facts which render the consent of the other parent unnecessary	
July D. Marilla Clerk HENDRICKS J. Circuit Court		
CONSENT OF PARENTS, PARENT OR GUARDIAN		
We, the purents, 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.		
which render the consent of the other parent and		
	State of Indiana, County of	
State of Indiana.	County ofFather	
County of HENDRICKS	Mother Mother	
Signed Father Mother	Signed	
Signed	Subscribed and sworn to before me this	
Subscribed and sworn to before me this day of		
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	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 3 day Waller and filed urt by written order issued and parties.	
HENDRICKS County	s a marriage license to the above named parties.	
///	AND MARRIAGE COMMENTAL DENIBRIES	
Be It Remembered, there was filed in my office a marriage license of Indiana dated the Aller Mallefeld in my of Be it further remembered, the following marriage certificate was filed in my of	se issued by the clerk of the the iniming together as husband and wife	
Be It Remembered, there was filed in my office a marriage	, 19.26, authorizing the Johnson	
of Indiana dated the day of day of	nd the fill the file	
Be it further femembered, the following marriage certificate was filed in my of	nd ffice, to-wit: hereby certify that on the 31st day of July hereby certify that on the County of Hendricks hereby county. State of Indiana	
l, Malcol R. Neier	Costesville Tadiana	
one thousand nine hundred and 76	Howard Indiana,	
Be it further femembered, the following marriage certificate was filed it my of hereby certify that on the 31st ady of hereby certify that on the 41st adversarial that of hereby certify that on the 41st adversarial that of hereby certify that on the 41st adversarial that of hereby certify that on the 41st adversarial that of hereby certify that on the 41st adversarial that of hereby certify that of hereby certify that on the 41st adversarial that of hereby certify that of hereby certify that of hereby certify that of hereby certificate adversarial that of hereby certificates and that of hereby ce		
bride		
were by me united in marriage as authorized by a marriage license issued for	Signed Malcolm R. Neier Minister of the Gospel	
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation	
ship	17 day of Clerk Signed Slen M Sarvey Circuit Court HENDRICKS	
t Indiana Ints	1 V a M 111 County	

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No	324	
File		

Chap. 126, Ind. Acts 1905 HENDRICKS County Date of Application		
MALE ~ 2/ a/	FEMALE 7 2/ 7/	
MALE Medical Examination Report Dated 7-26-76	Medical Examination Report Dated	
Name of Physician Cloud Koch	Name of Physician Kurk Kurk	
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 Prirst Middle Hendell	Name Bonne Middle ashlvete	
Date of Birth Month Day Year 1947	Date of Birth Month Day Year 1949	
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 Annulment Do A 1975	Previous Marital Status: Never Married Number of Previous Marriages	
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment	
0 50 400	Color or Race White Negro Other (specify)	
Usual Occupation Date of birth verified by: Firth Cert. Judicial Decree	Usual Occupation Anotony	
Other (Specify)	Date of birth verified by: Birth Cerl. 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 under guardianship as a person of unsound mind? No Yes 3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? 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 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? 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? No Yes No Yes No 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? Yes Yes Yes Yes Yes Yes Yes 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 Assis Ashlack	
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? (c) Are you complying with any court order or orders issued for	8. Full maiden name of mother than the same of mother than the same of mother than the same of the sam	
their support? Yes No	Residence of mother (if deceased so state) Race of mother (if deceased so state) Race of mother	
Residence of father (if deceased so state) Balland Land Land	Birthplace of mother (State or foreign country) Hentuckey	
Occupation of father Tackout Race of father Wh	Birthplace of mother (State of Media County)	
Birthplace of father (State or foreign country)	State of Indiana, County ofHENDRICKS	
12. Full maiden name of mother Mills Allettone	Bearing M. Anchlack	
Residence of mother (if deceased so state) All Manual Manu	New Address 3459 W 13 Indeb Indeb Inde	
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this 29 day of Quely 19.76	
State of Indiana, ss: I depose and state the information given	Glex M. HARNEL Clerk HENDRICKS Circuit Court	
County of HENDRICKS in this application is true and correct. Signed Carbon C. Hensley		
New Address 3459 W. 12th Indply, Ind	CONSENT OF PARENTS, PARENT OR GUARDIAN	
Subscribed and sworn to before me this 39 day of 1976.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
Slew // A assulf ClerkHENDRICKS 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 ofHENDRICKS	
State of Indiana, County of	Signed. Father	
SignedFather	Signed	
Signed Mother Subscribed and aware to before me this	Subscribed and sworn to before me thisday of, 19	
Subscribed and sworn to before me this	Clerk	
	RT. A marriage license having been refused to the above named parties, the ourt by written order issued	
in authorizes and directs the issuance of		
	SE AND MARRIAGE CERTIFICATE	
	nse issued by the clerk of the HENDRICKS Circuit Court	
of Indiana dated the day of day of the day of authorizing the joining together as husband and wife		
Be it further remembered, the following marriage certificate was filed in my office, to-wit:		
1, John H. Williams	hereby certify that on the	
one thousand nine hundred and 76 at Indianapoles, County of Marion,		
State of Indiana, Groom Sichard Edward Tinsleyof Marion County, State of Indiana and, Bride Bonnie Nadine ashlock of Vendricks County, State of Indiana,		
	that purpose by the Clerk of the Circuit Court of HENDRICKS	
County.		
Dated this 7th day of August , 1970	Signed John II Williams	
	Official Designation Minister	
Filed and recorded in accordance with the laws of the State of Indiana this		
AND THE RESERVE OF THE PERSON	Signed Sten M Harvief Clerk HENDRICKS Circuit Court	
	Otreat Court	

Form Prescribed By Indiana State Board of

APPLICATION FOR MARRIAGE LICENSE No. 325	
HENDRICK	2 III
MALE	County - July 30, 1976
Medical Examination Report Dated 1-19-76	FEMALE Date of Application
Name of Physician / ared. Jones	Medical Examination Report Dated 7-19-76
ALL QUESTIONS MUST BE ANSWERED, Chapter 126, Indiana Acts 1905 prescribes "Palse state tion or pretense shall be fined in any sum not exceeding five bundred dollars (\$500.00)". MALE APPLICANT	Name of Physician Wark a. Jones
MALE APPLICANT	whoever procures the issuance of a license to marry by any false statement, representa-
Name Prot Middle All Last	Name First First
Date of Birth Months Day Teach	Detect Stratal Manager Last
Place of Birth (State or foreign/hountry)	Place of Birth (State or foreign country) Month Day Year 1945
Sesidence Address Street or R. R. City County State	Residence Address Short D. Andrana
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different W. B. City County State
Last Marriage Ended By: Death Divorce Annulment	Brinksminder
Color of Sans White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
Usual Occupation Mail Clark	Last Marriage Ended By: Death Divorce Annulment Decl 26 76
Date of birth vertified by : Dirth 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 Baly sitter
As Imberille? Of Unacound Mind? No Yes	Date of birth verified by: Deirth Cert. Dudicial Decree
2. Are you now or have you been within five (5) years an inmate of a county savium or	1. Are you now or have you been adjudged, diagnosed or considered as:
home for indigent persons? No M Yes If answer to 3 is "yes" has the cause of such condition been removed? No D Yes	An Imbecile?
4. Are you afflicted with a transmissible disease? No Ves Yes Yes	2. Are you under guardianship as a person of unsound mind? No ✓ Yes □
4. Are you now under the influence of intextesting liquor? No Z Yes -	3. Are you afflicted with a transmissible disease? No Ves
3. 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 Z Yes
(If yes, answer questions a, b, e) (a) List their full names, ages and saferesses	7. Full name of father mil Brinksmeader
Name Age Address	Residence of father (if deceased so state)
	Occupation of father State or foreign country)
	8. Full maiden name of mother Wilma games
(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. Pull name of tacher Denny D. Sughes	Occupation of mother Race of mother Occupation of mother Race of m
Busidence of father (if deceased so state) . Spelleting . In.	Birthplace of mother (State or foreign country)
Occupation of tather Dagtaman Race of father WK	State of Indiana, State of Indiana, I depose and state the information given in this application is true and correct.
Sirthplace of tather (State or tureign country) Stationary Barting	County of HENDRICKS Male 200 1 60
Residence of mother (If deceased so state) Speedury, In-	Signed Manney De Keepers.
Occupation of mother Dan Race of mother Wh	New Address de la day of Sully 19.76.
State of Indiana. I depose and state the information given	Subscribed and sworn to before me this day of fire HENDRICKS Circuit Court
State of Indiana. County of MENORICES as: I depose and state the information given in this application is true and correct.	- Daditi
Signed fames of union Indels	CONSENT OF PARENTS, PARENT OR GUARDIAN
Now Address 10013 Playmer De July 19.76.	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
Den M. Harry Clerk HENDRICKS Circuit Court	signs, state facts which render the constraints
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:
	County of HENDRICKS Father
State of Indiana.	Signed
County of HENDRICKS Father Signed Mother	Signed
Signed, 19	Subscribed and sworn to before the disconnection of the control of
Clerk	a refused to the above named parties, the
TOTAL 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	Court by written order issued
authorizes and directs the Issuance	CIPTIFICATE Circuit Court
RETURN OF MARRIAGE LICEN	SE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court ense issued by the clerk of the
Be It Remembered, there was filed in my opice August.	, 19 Margaret Winkel
of Indiana dated the 3 day of day of my office, to-wit:	
Be it further remembered, the following marriage certificate was plea in hereby gertify that on the	
marketilling	
one thousand nine hundred and The State of State of State of Indiana, Groom James Edward Hinkel of State of the Circuit Court of HENDRICKS	
State of Indiana, Groom James Edward Hughest of Hendricks County, State of HENDRICKS and, Bride Melinda Margaret Hinkel of the Clerk of the Circuit Court of the County. 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 C	
were by me united in marriage as authorized by a marriage ticense took	
Dated this 10 lh day of day	1 Designation 19.
	Official Designation of Clerk Aday of Starsey Court
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Lilen M. Sansky Circuit Court HENDRICKS
The state of the s	

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

No	326	
File		
	7-30-76	

HENDRICKS County Total Application

Output

Date of Application

FEMALE MALE 7-28-76 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 Place of Birth (State or foreign Previous Marital Status: Never Married Number of Previous Marriage Previous Marital Status: Never Married Number of Previous Marriages. Death Divorce Annulment Death Divorce Annulment Last Marriage Ended By: White Negro Other (specify). Color or Race White Negro 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 Yes No Yes 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? No Yes An Imbecile? Of Unsound Mind? No 🗆 Yes 🗌 If answer to 3 is "yes" has the cause of such condition been removed? Yes 🗌 No D 2. Are you under guardianship as a person of unsound mind? 4. Are you afflicted with a transmissible disease? No Ves 5. Are you related to the bride closer than second cousin? 3. Are you afflicted with a transmissible disease? No Yes / Yes 🗆 6. Are you now under the influence of intoxicating liquor? No M 4. Are you related to the groom closer than second cousin? 7. Are you now under the influence of a narcotic drug? No 🖭 Yes 🗌 Yes 🖾 No 🗌 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? 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 Address Residence of father (if deceased so state) Age 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 No 🗆 11. Full name of father. Birthplace of mother (State or foreign country). State of Indiana, 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. Residence of mother (if deceased so state) Birthplace of mother (State or foreign country) Clerk 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. ClerkHENDRICKS 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 State of Indiana. County of HENDRICKS Signed Signed. Subscribed and sworn to before me this.....day of..... Subscribed and sworn to before me this...... ...day of ... COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the HENDRICKS 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 HENDRICKS Circuit Court (Lugust , 1976, authorizing the joining together as husband and wife and Katherine Inn Jenner of Indiana dated the ... Be it further remembered, the following marriage certificate was filed in my office, to-wit: I, Willard B. Williams hereby certify that on the 7th at Mooresville one thousand nine hundred and..... State of Indiana, Groom Blaviel Lee Beck of Vendricks County, State of Indiana and, Bride Hatherine ann Genner of Gendricks County, State of Indiana, Official Designation Minister of the Gospel Filed and recorded in accordance with the laws of the State of Indiana this

HENDRICKS.....

APPLICATION FOR MARRIAGE LICENSE

FILE No. 327

HENDRICKS

County

	0		N HELLE	H
File.	1-2	-76		

MALE Medical Examination Report Dated Ouly 30 1971	FEMALE Date of Application
Name of Physician R. Stephen	Medical Examination Report Dated Culy 20 1974
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state of pretense shall be fined in any sum not exceeding five hundred 1005 prescribes "False state."	Name of Physician R. Stephens
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
Name Birst Middle Last	FEMALE APPLICANT
Date of Birth Month Day dermer	Name First Middle
Place of Birth (State or foreign country)	Date of Birth Month Day Lyle
reanon be	Place of Birth (State or foreign country)
Residence Address Street of R. R. City County State	Residence Add Albanon So.
Previous Marital Status: Never Married Number of Previous Marriages	# 1 City County State
1	Maiden Name if Different 108 H. Torth Salera
Last Marriage Ended By: Death Divorce Annulment Dice 14	Previous Marital Status: Never Married Number of Previous Marriages /
Color or Race White Negro Other (specify)	Test West Test State Sta
Usual Occupation (Ly of p b) private)	Death Divorce Annulment 1973
Date of birth verified by: Dirth Cert. Judicial Decree	Color or Race White 2 Negro Other (specify)
Jother (Specity) Selective Survey 12-30-41-30	Usual Occupation Rock kent at)
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile?	Date of birth verified by: Birth Cert. Judicial Decree
Of Unsound Mind?	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county service or	1. Are you now or have you been adjudged, diagnosed or considered as:
No 2 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	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? No Yes
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) (a) List their full names, ages and addresses	6. Are you now under the influence of a narcotic drug? 7. Full name of father hank hickard havenport
Name Age Address	Residence of father (if deceased so state) Toth Salam
Afrey Edward 10 north Solym	Occupation of father Kettired Race of father
Hele ann 1 poeth Salen	Birthplace of father (State or foreign country)
	8. Full maiden name of mother & lewyn Rosempup Smith
(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) North Aclem)
their support?	Occupation of mother / fousierife Race of mother
11. Full name of father All All All All All All All All All Al	Birthplace of mother (State or foreign country) Indiana)
Residence of father (if deceased so state) The state of the second secon	Birthplace of mother (State of Foreign Country)
Occupation of father at armer Race of father Race 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 HENDRICKS
12. Full maiden name of mother 1 4 Children Market 12 Children 12	Signed Si
Residence of mother (If decemsed so state) Authorities Occupation of mother Townsulf Race of mother Race of mother	New Address RR Phy 108 H The Residence
1 Wester by	Subscribed and sworn to before me this day of duguet, 1976.
Birthplace of mother (State or foreign country) State of Indiana. I depose and state the information given	Alle M. Harry Clerk HENDRICKS Circuit Court
County of HENDRICKS ss: in this application is true and correct.	
Signed Humith E. Lames	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address RAI Bata 1084 Marth Santing	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 lluquet , 19/4.	signs, state facts which render the consent of the other parent unnecessary
Slex M. Harvey Gerk 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
State of Indiana,	Father
County of HENDRICKS.	Signed
Father	Signedday of
Si and Mother Mother	Subscribed and sworn to before me thisday of
Subscribed 19 Jan 19 Ja	
010.1	RT. A marriage license having been refused to the above named parties, the and filed ourt by written order issued
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COULD COUNTY COUN	RT. A marriage need and med
HENDRICKS County	ourt by Written of the above named parties.
RETURN OF MARRIAGE LICENS RETURN of marriage lice Be It Remembered, there was filed in my office a marriage lice	SE AND MARRIAGE CERTIFICATE HENDRICKS HENDRICKS Circuit Court Trace issued by the clerk of the tracether as husband and wife
RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage lice of Indiana dated the day of day of Be it further remembered, the following marriage certificate was filed in my 1, Sall & Dayis, B. D.	nse took , 19. 7k, authorizing the joining together as much
of Indiana dated the day of day of	Sandra Lagle
Be it further remembered, the following marriage certificate was filed in my 1, Sal & Davis, B. D.	office, to-wit: 8th day of legue
Be it further remembered, the following marriage certificate was pro-	hereby certify that on the Church, County of Allender
1, Gard G. Darred, B. D.	at M. Salem Christian Church, County, State of Indiana,
m / 11	all on all the same of Individual to
State of Indiana, Groom Remarks Eddie Sames and, Bride Sandra Sau Lagle were by me united in marriage as authorized by a marriage license issued for County. 19.74	at N. Salem Christish County, State of Indiana, of Alendricks County, State of Indiana, Alendricks HENDRICKS that purpose by the Clerk of the Circuit Court of
and, Bride Sandra & All auffle in license issued for	that purpose by the Clerk of
had a marriage work	1 0 1 1 1 6 6 1
Dated this 8 1 h. day of Quegust, 19.14	Official Designation Baston Compselor 19 76.
County. Dated this	Official Designation Suggest 19 Clerk day of Signed HENDRICKS Circuit Court
State of Indiana this	Signed Glen M. Handricks Circuit Court
Filed and recorded in accordance with the laws of the State of	SignedHENDRICKS

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS _County Date of Application FEMALE 7-21-76 MALE Medical Examination Report Dated Medical Examination Report Dated Stayner, 74. D 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 Number of Previous Previous Marital Status: Never Married L 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) ules Date of birth verified by: Usual Occupation Other (Specify) Bellecture 55-471 Date of birth verified by: Birth Cert. Judicial Decree Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes Yes Other (Specify) ... Of Unsound Mind? No 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? 3. Are you now or have you been within five (5) years an inmate of a home for indigent persons? No Yes No Yes An Imbecile? 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? 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? No Yes 6. Are you now under the influence of intoxicating liquor? No Yes 4. Are you related to the groom closer than second cousin? No Yes 7. Are you now under the influence of a narcotic drug? Yes No 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? 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) 141 84 Address Age Occupation of father Lesson Birthplace of father (State or foreign country). (b) Are you supporting or contributing to their support? Residence of mother (if deceased so state) 141 (c) Are you complying with any court order or orders issued for their support? No 🗆 Birthplace of mother (State or foreign country). Joyce 7 Occupation of father Thur Duck Birthplace of father State or foreign 12. Full maiden name of mother 7 Residence of mother (if deceased so state) 5027 Occupation of mother Church Desretargace of m Birthplace of mother (State or foreign country) 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 render the consent of the other parent unnecessary. ClerkHENDRICKS. 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. State of Indiana, County of HENDRICKS Signed. .Father Signed. ..day of..... Subscribed and sworn to before me thisday of COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the HENDRICKS 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 HENDRICKS Circuit Court day of Migust, 19 Le, authorizing the joining together as husband and wife of Indiana dated the ... Dregory Lowell Wish and Michelle salrucea Morley Be it further remembered, the following marriage certificate was filed in my office, to-wit: Charles nall hereby certify that on the 7th day of Guegust at Brownsburg, County of Hendricks one thousand nine hundred and .. State of Indiana, Groom Speaking howell wise of st Joseph County, State of Indiana and, Bride Michelle Gatricia Marley of Tendricks County, State of Indiana, County. day of luguest, 19 76. Dated this. Signed Lev Charles Roll Official Designation..... Filed and recorded in accordance with the laws of the State of Indiana this...... "day of

HENDRICKS

(b) An you supp

COMPLETE IF HENDEL!

329

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

STATE OF D

PDI ICAME	OF INDIANA	
LICATION	FOR MARRIAGE LIGHT	
	TOR MARRIACE LICENSE	

HENDRICK	S File
MALE Medical Examination Report Dated 7/27/76	County Quarest 2 1971
011111111111111111111111111111111111111	FEMALE Date of Application
Name of Physician The Clark, md.	Medical Examination Report Dated 2/22/76
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False and the fine of pretense shall be fined in any sum not exceeding five bus acts 1905 prescribes "False and the first state of the first state	Name of Physician True Clark me
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 and the second
Name Brent Middle A Last	FEMALE ADDITIONAL PROPERTY OF THE PROPERTY OF
Date of Birth Month Day Year	Bluen O. Middle
Place of Birth (State or foreign country)	Date of Birth Day Campbell
Residence Address Street or R. R. City County and	Place of Birth (State or foreign country)
Residence Reside	Residence Address Street or R. R. City
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different State
Last Marriage Ended By: Death Divorce Annulment	The state of the s
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
Usual Occupation Student - Line "	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) Sel. Surv. # 12 30 56 63	Usual Occupation
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? Of Unround Mind? Yes	Date of birth verified by: Birth Cert. Judicial Decree
No D Yes	Other (Specify) # 41820 B
3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as:
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	An Imbecile? Of Unsound Mind?
4. Are you afflicted with a transmissible disease? No Yes	2. Are you under guardianship as a person of unsound mind?
6. Are you now under the influence of intoxicating liquor? No Ves	3. Are you afflicted with a transmissible the
7. Are you now under the influence of a narcotic drug? 8. Are you able to support a family? Yes \(\text{Ves} \(\text{Ves} \)	4. Are you related to the groom closer than second cousin?
9. Are you likely to so continue? Yes No So No	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)	6. Are you now under the influence of a narcotic drug? No No No
(a) List their full names, ages and addresses	7. Full name of father Allett Salfage anglill
Name Age Address	Residence of father (if deceased so state)
	Occupation of father State or foreign country)
	8. Full maiden name of mother. Authlia Han Fall
(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? Perry nather and	Occupation of mother Washington A Race of mother White
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country)
Occupation of father ANNA Race of father Andrew	Indiana Indiana
Birthplace of father (State or foreign country)	State of Indiana, Section 1 depose and state the information given in this application is true and correct.
12. Full maiden name of mother Lois Inageng Bucks	County of HENDRICKS Secret Signer Complete
Residence of mother (if deceased so state)	Signed Signed Add the State of the Signed Si
Occupation of mother All Markets Race of mother Millette	New Address. Talayelle, In all all the 1876
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this
State of Indiana, County of HENDRICKS I depose and state the information given in this application is true and correct.	The Manual Clerk HENDRICKS Circuit Court
Signed Brent O Owen	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address W Rajayette 1911	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 Allful 1, 19 7.	signs, state facts which render the consent of the other parent unnecessary
LILEN DE SIMULIA CIERRI HENDRICKS Circuit Court	signs, state facts which the state of the st
CONSENT OF PARENTS, PARENT OF 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,	Father
County ofHENDRICKS	Signed
SignedMother	Signed
	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me thisday of, 19	nation the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	T. A marriage license having been refused to the above named parties, and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR HENDRICKS County authorizes and directs the issuance of	ourt by written order issued
HENDRICKS County	of a marriage license to the above
Inauthorized	Circuit Court
CI - I am mai office w now.	// - All and 220 (LILE TURING)
of Indiana dated the	Dunk Diane Campbelle
	m to mit:
Be it further remembered, the following marriage certificate was filed in my of the following marriage was filed in my of the following marriage was filed in my of the following marriage was filed in my of the	hereby certify that on the San County of Bearle
1, John D. Sucken	at County, State of County
one thousand nine hundred and The Quents	of County State of Michael
State of Indiana, Groom Brenth Question of and, Bride Beverly Wiane Campbell of were by me united in marriage as authorized by a marriage license issued for County.	Alexandrication of the Circuit Court of HENDRICKS
and, Bride Bluerly Wiand amplicance issued for	that purpose by the citer of
were by me united in marriage as authorized by a marriage to County.	and John an speckelle
District the second of the sec	11 Ministration
	Official Designation Suguest, 1976.
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Illen M. Janvery Circuit Court
rued and recorded in accordance with the wws of	Signed HENDRICKS.

STATE OF INDIANA

330

addiana State Board of lealth under Authority APPLICATION FOR	MARRIAGE LICENSE File 37
hap. 126, Ind. Acts 1905	0 = 3 107/
MALE	FEMALE 8 - 2 - 7/6
MALE Medical Examination Report Dated 8 - 2 - 76	Medical Examination Report Dated 8-2-76
Name of Physician James Black	Name of Physician James Black
LL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False st	tatement—Whoever procures the issuance of a license to marry by any false statement, representa-
on or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	FEMALE APPLICANT
fame First, + Middle B. Last	Name First Middle Last
Pate of Birth Month Day Kear	Date of Birth Month Day Year
Place of Birth (State or foreign country)	Place of Birth (State or foreign country)
esidence Address Street or R. R. City County State	Residence Address Street or R. R. City County State
3 G #1 Gittsboro Indiana	Maiden Name if Different
revious Marital Status: Never Married Number of Previous Marriages	Previous Marital Status: Never Married Number of Previous Marriages
ast Marriage Ended By: Death Divorce Annulment	Last Marriage Ended By: Death Divorce Annulment
olor or Race White Negro Other (specify)	Last Maringo Blade - y
Isual Occupation Construction	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree Other (Specify) Wytham Memarial Laspett	Usual Occupation Secretary
Other (Specify) 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 Witham Memorial Masket
An Impected: Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? Yes Yes	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? Yes	An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind? 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 ☐ 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	4. Are you related to the groom closer than second cousin? No Yes
8. Are you able to support a family? Yes No	5. Are you now under the influence of intoxicating liquor? No Yes
0. 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 David Srice
Name Age Address	Residence of father (if deceased so state) Marth Saleman And Occupation of father Sarmes Race of father Sa
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother Beverly ann Bragg
(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) Nurth Sulam Ind.
1. Full name of father Harald Wayne, Brayles	Occupation of mother Rausellite Race of mother 21
Residence of father (if deceased so state) Sitts land , Ind.	Birthplace of mother (State or foreign country)
Occupation of father	State of Indiana, less I depose and state the information given
Birthplace of father (State or foreign country)	County of
Residence of mother (if deceased so state) Attabab, India	Signed Juanita Maril Onice
Occupation of mother Assistantiff Race of mother	New Address D. 2 Box 162 Brownsburg &
Birthplace of mother (State or foreign country) Indiana	Subscribed and sworn to before me this
State of Indiana, I depose and state the information given in this application is true and correct.	Alen M. Harvey Clerk HENDRICKS Circuit Court
Signed Rabert Lynn Brayles	
New Address R.R. 2 DOX 162 Downstring	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this 3 day of Colors 19 76	
Men M. Janusy ClerkHENDRICKS 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	
igns, state facts which render the consent of the other parent unnecessary	
	State of Indiana, County ofHENDRICKS
State of Indiana, County ofHENDRICKS	SignedFather
SignedFather	Signed
Signed	Subscribed and sworn to before me thisday of
COMPLETE LE MARRAGE LIGHTAR LOCATER DE	
	URT. A marriage license having been refused to the above named parties, the .Court by written order issued
n authorizes and directs the issuance	
	NSE AND MARRIAGE CERTIFICATE
Be It Remembered, there was filed in my office a marriage lice	cense issued by the clerk of the HENDRICKS Circuit Court
of Indiana dated the day of day	, 19, authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in mi	y office, to-wit: Juaneta M. Grece
1, Den a. Carrson	hereby certify that on the 7 day of Juguet
one thousand nine hundred and 76	at eithsbaro country of Tlendricks.
State of Indiana, Groom Sphirl & Broyles	of Hendricks County State of Indiana
and, Bride Juanua M. Sruce of	Hendricks 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 ofHENDRICKS
Dated this — — day of — lugust — , 19	76.
	Official Designation Sastar - Sitts bors U. M. C.
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation Addition Addition to the state of th

.....HENDRICKS...

Medical Examination Report Dated 7-27-26

Name of Physician M. 8.

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

No._ 33 / HENDRICKS File Bk37 County Org. 3, 1976 Date of Application FEMALE Medical Examination Report Dated 7-27-76 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 Last Previous Marital Status: Never Married Number of Previous Marriages. Last Marriage Ended By: Death | Divorce | Annulment | Color or Race White ☐ Negro ☐ Other ☐ (specify)... Date of birth verified by: Birth Cert. | Judicial Decree Other (Specify) ... 1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes Of Unsound Mind? No Yes 2. Are you under guardianship as a person of unsound mind? No Yes

Previous Marital Status : Never Married Mamber of Previous Marriages Last Marriage Ended By: Death | Divorce | Annulment | White Negro Other (apecify).... Date of birth verified by : Birth Cert. | Judicial Decree Other (Specify) Are you now or have you been adjudged, diagnosed or considered as: An imbedie? Yes 🗌 Of Unsound Mind? 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 home for indigent persons? 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 E Yes 🗌 I. Are you related to the bride closer than second cousin? No D Yes 🗌 6. Are you now under the influence of intoxicating liquor? No D Yes 🗌 3. Are you afflicted with a transmissible disease? No Yes 1. Are you now under the influence of a narcotic drug? No E Yes 🗌 4. Are you related to the groom closer than second cousin? No Yes 3. Are you able to support a family? Yes E No 🗆 9. Are you likely to so continue? 5. Are you now under the influence of intoxicating liquor? Yes D No 🗆 No Yes 10. Do you have minor children from one or more former marriages? No Yes [6. Are you now under the influence of a narcotic drug? No P Yes (If yes, answer questions a, b, c) (a) List their full names, ages and addresses Address Birthplace of father (State or foreign country) / enturkel 8. Full maiden name of mother Edith & nigart (b) Are you supporting or contributing to their support? Yes | No | Residence of mother (if deceased so state) Whitestown (c) Are you complying with any court order or orders issued for their support? Yes П No П Occupation of mother Asus keeper Race of mother to Birthplace of mother (State or foreign country) Lentucky ss: I depose and state the information given in this application is true and correct County of HENDRICKS x Rita Yay Dear Residence of mother (if deceased se state). Alamville New Address 2/22 Oshnala On Indels an Occupation of mother Laurence fe day of aug Birthplace of mother (State or foreign country). .. Clerk HENDRICKS 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 Kridianavio signs, state facts which render the consent of the other parent unnecessary..... Clerk HENDRICKS Silve In Ballely 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 Father State of Indiana. County of HENDRICKS Father 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..... HENDRICKS 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 ...day of ... Bugust.... Lita Kay Dean 6.th of Indiana dated the hereby certify that on the _______ day of Leaguest Be it further remembered, the following marriage certificate was filed in my office, to-wit: Wilson of Hendricks County, State of Indiana 1, Sarrefor Lilly Dan County, State of Indiana one thousand nine hundred and. of Bronz Official Designation Saster Jugust , 19.76. Dated this. Signed Illen M. NarweefClerk Filed and recorded in accordance with the laws of the State of Indiana thisCircuit Court

HENDRICKS.

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDR	ICKS	County

No	332
File_	Book 35
	aug. 3, 1976

Date of Application FEMALE 7-18-76 7-18-76 Medical Examination Report Dated MALE Medical Examination Report Dated a. n. Sculler Sculder Th 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 Date of Birth Date of Birth Place of Birth (State or Residence Address Maiden Name if Different Never Married Number of Previous Marriages Previous Marital Status: Previous Marital Status: Never Married Number of Previous Marriages. Death Divorce Annulment Last Marriage Ended By: Divorce Annulment Death Last Marriage Ended By: White Negro Other (specify)... White Negro Other (specify).... Color or Race Usual Occupation Date of birth verified by: Birth Cert. Judicial Decree Usual Occupation Cert (7. O. Scamahor Other (Specify) Hospital 1. Are you now or have you been adjudged, diagnosed or considered as:
An Imbecile? No Yes 🗌 Other (Specify).... No 2 Yes No 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? 3. Are you now or have you been within five (5) years an inmate of a home for indigent persons? No Yes county asylum or No Yes An Imbecile? No Yes 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? No Yes 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 No Yes 6. Are you now under the influence of intoxicating liquor? 4. Are you related to the groom closer than second cousin? No Yes 7. Are you now under the influence of a narcotic drug? No 🖳 Yes 🗌 No 🗌 Yes 🖺 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? 6. Are you now under the influence of a narcotic 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 Age Birthplace of father (State or foreign 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? 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. County of HENDRICKS State of Indiana, and state the information given application is true and correct. Clerk HENDRICKS 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 Subscribed and sworn to before me this. Allen M. 24 signs, state facts which render the consent of the other parent unnecessary. ClerkHENDRICKS 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 Father Father Signed. .Mother Signed. 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

HENDRICKS County Court by written order issued 3,1976 3,1976 and filed authorizes and directs the issuance of a marriage license to the above named parties. 3 day were 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 , 197 authorizing the joining together as husband and wife Bradley Eugene neal Be it further remembered, the following marriage certificate was filed in my office, to-wit: hereby certify that on the landay of described at New Brunswick Country of Brone one thousand nine hundred and...... State of Indiana, Groom Dradley Eugene Neal of Brone County, State of Indiana and, Bride Tricki Gene Ticks of Hendricks County, State of Indiana, County. 6 day of leegest, 1976. Dated this Official Designation Minestle Filed and recorded in accordance with the laws of the State of Indiana this......day of....

HENDRICKS

Circuit Court

HENDRICKS.

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 Medical Examination Report Date Name of Physician ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". Name FEMALE APPLICANT Date of Birth Place of Birth (State or fe Previous Marital Status: Never Married Number of Previous Marriag 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 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: An Imbecile? Date of birth verified by: Birth Cert. | Judicial Decree Yes 🗌 No 🖸 Of Unsound Mind? Other (Specify) ... Yes 🗌 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 1. Are you now or have you been adjudged, diagnosed or considered as: county asylum or No Yes home for indigent persons? An Imbecile? 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? Yes 🗆 No 🗹 Yes 🗌 5. Are you related to the bride closer than second cousin No 🗹 2. Are you under guardianship as a person of unsound mind? Yes 🗌 6. Are you now under the influence of intoxicating liquor? No D Yes 🗌 3. Are you afflicted with a transmissible disease? 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? Yes 🛛 No 🗆 9. Are you likely to so continue? Yes 🖾 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 Occupation of father Claministrator (b) Are you supporting or contributing to their support? Yes 🗌 No 🗆 (c) Are you complying with any court order or orders issue their support? Yes 🗌 Birthplace of mother (State or foreign country). Residence of father (if deceased Occupation of father .. State of Indiana. Birthplace of father (State or foreign country). 12. Full maiden name of mother.... Residence of mother (if deceased so state) Occupation of mother Cot Birthplace of mother (State or foreign County of HENDRICK 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. Clerk 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. County of HENDRICKS State of Indiana, County of HENDRICKS Father 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 HENDRICKS 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..... , 19.76., authorizing the joining together as husband and wife acquelino Die Bibles Be it further remembered, the following marriage certificate was filed in my office, to-wit: of Indiana dated the..... hereby certify that on the 141th day of at Blainfield 1, J. michael Me LaineCounty, State ofCounty, State of Indiana one thousand nine hundred and 76 ...of Bendricks State of Indiana, Groom Lance Lewis 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. august, 19.76. County. Official Designation Assoc Saran Dated this..... Clerk Signed Sten M. Harvey Filed and recorded in accordance with the laws of the State of Indiana this

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County Aug. 4, 1976
Bate of Application

MALE Medical Examination Report Dated 7-26-96	Medical Examination Report Dated
Name of Physician Elmer L. Koch. M. D.	Name of Physician Cloud 2. Rock, h. D.
OVERTICAL ANSWERED Charter 106 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 O A First Middle O C Last	Name Rheirst & Elawa Robertson
Date of Birth Mohth Day Year	Date of Birth Month Day Year 1956
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) William Wen. Hoop. Likanon, Baone C. Ind.
Residence Address Street of R. R. Sity 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 Negro Other (specify)	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Dudicial Decree	Usual Occupation Danielany
Other (Specify) Transaid Hosp, Cell- 7. 3. 1. Are you now or have you been adjudged, diagnosed or considered as:	Date of birth verified by: Spirth Cert. Judicial Decree A. N. Sculler
An Imbecile? Of Unsound Mind?	Other (Specify) Wether From Hosp. Cel. To.
2. Are you under guardianship as a person of unsound mind? No Yes 3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? 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 ☐ 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? 4. Are you related to the groom closer than second cousin? No Yes
8. Are you able to support a family? Yes No	5. Are you now under the influence of intoxicating liquor? No W 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 (if decreased so state) Danville
Name Age Address	Occupation of father (if deceased so state) Race of father W
	Birthplace of father (State or foreign country) Linton (Breen Co.)
(b) Are you supporting or contributing to their support? Yes ☐ No ☐	8. Full maiden name of mother Wayvorna four Booker.
(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 Oleve Valory	Occupation of mother. Race of mother.
Occupation of father	Birthplace of mother (State or foreign country)
Birthplace of father (State or foreign country) South Blot.	State of Indiana, County ofHENDRICKS
12. Full maiden name of mother and frame Ronter	Llor da Clair C Roberton
Occupation of mother (if deceased so state) Race of mother	New Address 2364 Nowley Law, Interopely
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this # day of aug 1976
State of Indiana, State of Indiana, I depose and state the information given in this application is true and correct.	Gle M. HENDRICKS Circuit Court
Signed Signed Signed Tolly To Balogs.	
New Address Blo 64 Newly Jan	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this. day of	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Olen M. Ottober ClerkHENDRICKS. 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 ofHENDRICKS
County ofHENDRICKS	SignedFather
Signed	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 COUL	RT. A marriage license having been refused to the above named parties, the
HENDRICKS County C	ourt by written order issued
in authorizes and directs the issuance	
We It Remembered there was filed in my office a marriage lice	SE AND MARRIAGE CERTIFICATE onse issued by the clerk of the HENDRICKS Circuit Court
of Indiana dated the 10 day of dugu	, 197 C., authorizing the joining together as husband and wife and Rhonda Elaine Robertson
Jeffrey Michael Balogh Be it further remembered, the following marriage certificate was filed in my	and Rhonda Elaine Robertson
Norman L. Weaver	hereby certify that on the 14th day of August
one thousand nine hundred and 76	at Danville , County of Hendricks , of Hendricks County, State of Indiana Hendricks County, State of Indiana ,
State of Indiana, Groom Jettrey Michael Baloch Rhonda Elaine Robertson	of Hendricks County, State of Indiana
were by me united in marriage as authorized by a marriage light form	that purpose by the Clerk of the Circuit Court of HENDRICKS HENDRICKS
County.	
Dated this 14th day of August , 19	Signed Norman L. Weaver
	Signed Norman L. Weaver Official Designation Minister 17 day of August ,19 76
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Slen M. Jarvey Clerk
	Signed XXXIII !!! Clerk

.....HENDRICKS ...

STATE OF INDIAN

APPI ICAME	OF INDIANA
LICATION	FOR MARRIAGE LIGHT
	MARRIAGE LIGHT

Health under Actas 1905 APPLICATION FOR M HENDRICKS	IARRIAGE LICENSE No. 335
MALE	County
Medical Examination Report Dated 7-30-76	FEMALE Date of Application
Name of Physician Norman Mlama	Medical Examination Report Dated 7-28-76
man,	Name of Physician home &
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 Whose and the first of the first
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	A Middle
Place of Birth (State or foreign country)	Date of Birth Month Day
Residence Address Street or R. R. City County	Place of Birth (State or foreign country)
Residence Address By 353 R Carnel Ham Hone	Residence Address Street or R. R.
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different B B Burg August
Last Marriage Ended By: Death Divorce Annulment	A STATE OF THE PARTY OF THE PAR
With Ed N Ed Av	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 hepping Checker	Colon on P
Date of birth verified by: Birth Cert. Judicial Decree	Name Negro U Other (specify)
Other (Specify) Selective Serve # 12-2755-65 1. Are you now or have you been adjudged, diagnosed or considered as:	Usual Occupation Unemplayed
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 Ves Yes	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? 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 🗆
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 Yes	5. Are you now under the influence of intoxicating liquor? No Vest
(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	Residence of father (if deceased so state) Browns buy
	Occupation of father KAAGA Manage Race of father W
	Birthplace of father (State or foreign country)
	8, Full maiden name of mother Bonnie R. Benge
(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) Brownshung
their support? Yes No	Occupation of mother Hausewife Race of mother To
11. Full name of father.	Birthplace of mother (State or foreign country) Kokoro
Occupation of father Luceum Race of father Race of father	Direnplace of mother (State of Society)
0 - 00 00	State of Indiana, 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 Betty Jane Moods	County of TEXACTION
Residence of mother (if deceased so state)	Signed & Bothann Boll
Occupation of mother Source Race of mother	New Address 2
Birthplace of mother (State or foreign country) Plainwille	Subscribed and sworn to before me this day of 32 day of 32 day
State of Indiana.	Men m darry Gerk HENDRICKS Circuit Court
County of HENDRICKS ss in this application is true and correct.	
Signed X Alany - & Date & Bourn shum	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address of Manual Address of the Manual	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 Circuit Court	signs, state facts which render the consent of the other parent unnecessary
Olerk 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	
signs, state facts which render the consent of the other parent	
	State of Indiana, County of HENDRICKS
State of Indiana.	SignedFather
County of HENDRICKS	Mother
Signed Father Mother	Signed
	Subscribed and sworn to before me this
Subscribed and sworn to before me thisday of	have named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	A marriage license having been refused to the above manufacture and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	ourt by written order issued
HENDRICKS COUNTY	of a marriage license to
IIIautilo1120	WARRIAGE CERTIFICATE HENDRICKS CITCUIT COURT
authorizes and directs the issuance of RETURN OF MARRIAGE LICENS	nse issued by the clerk of the the joining together as husband and wife
of Indiana dated the any of any	and
D	Life that on the district
I. Clifford I. Carmichael	Brownsburg County of Indiana
76	Hamilton State of Indiana
I, Clifford L. Carmichael one thousand nine hundred and 76 State of Indiana, Groom Daryl G. Stephens and, Bride Beth Ann Bell of were by magnified in marriage as authorized by a marriage license issued for	Hendricks Court of HENDRICKS
State of Indiana, Groom. Daryl G. Stephens and, Bride. Beth Ann Bell	that purpose by the Clerk of the Circuit Court of
Thue marriage license issued for	Tormichael
County. August 19 19	/6 Cliffy Minister
Dated this. 9th day of	Official Designation August 19 76.
Filed and recorded in accordance with the laws of the State of Indiana this	Official Designation August 17 day of August Signed Slew M. Sarvey Circuit Court HENDRICKS
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Klery M. HENDRICKS Circuit Court

STATE OF INDIANA

No. 550	
File	
August	5 19
Data of A	nnlightion

APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS ___County 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 Last Middle Date of Birth Place of Birth (State Place of Birth (State or foreign o Residence Address Previous Marital Status: Never Married Number of Previous Marriages Previous Marital Status: Never Married Number of Previous Marriages. Death Divorce Annulment Death Divorce Annulment Last Marriage Ended By: White Negro Other (specify). Color or Race White 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?
 No 🗗 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? No 🗆 Yes 🗆 3. Are you now or have you been within five (5) years an inmate of a home for indigent persons? county asylum or No Yes An Imbecile? No 🗆 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 Z Yes 🗌 4. Are you afflicted with a transmissible disease? No A No 🛛 Yes [5. Are you related to the bride closer than second cousin? 3. Are you afflicted with a transmissible disease? Yes [No 🖸 Yes 🗌 6. Are you now under the influence of intoxicating liquor? 4. Are you related to the groom closer than second cousin? No P Yes 🗌 No D 7. Are you now under the influence of a narcotic drug? Yes [No 🗌 Yes 🔲 5. Are you now under the influence of intoxicating liquor? No D Yes 🗌 8. Are you able to support a family? No 🗆 Yes D 9. Are you likely to so continue? 6. Are you now under the influence of a narcotic drug? Yes 🗌 10. Do you have minor children from one or more former marriages? 7. Full name of father / All (If yes, answer questions a, b, c) (a) List their full names, ages and addresses Residence of father (if deceased so state) ... Address Age Occupation of father. Birthplace of father (State or foreign country) 8. Full maiden name of mother. No 🗆 (b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued 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) of father ... Occupation of father ... \ ss: I depose and state the information given in this application is true and correct. State of Indiana, Birthplace of father (State or foreign Residence of mother (if deceased so state) Occupation of mother Birthplace of mother (State or foreign country) State of Indiana, Circuit Court 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 Subscribed and sworn to before me this. signs, state facts which render the consent of the other parent unnecessary. 19 MM 14 Ger 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... County of HENDRICKS State of Indiana. County of HENDRICKS Signed. ...day of..... 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 HENDRICKS Circuit Court day of August, 1976, authorizing the joining together as husband and wife and Jackie Tay Yorter alan Keyman Be it further remembered, the following marriage certificate was filed in my office, to-wit:day of August 14th hereby certify that on the I, LARRY ALAN REYMAN one thousand nine hundred and 76 at Danville, County of Hendricks , State of Indiana, Groom Larry Alan Reyman of Ingham County, State of Michigan and, Bride Jackie Kay Porter of Hendricks County, State of Indiana County. August , 1976 Dated this .. Signed ... Minister Official Designation. Filed and recorded in accordance with the laws of the State of Indiana this

Are you under 4. Are you afflicts 6. Are you relate 8. Are you able 9. Are you likely

10. De you have n

If yes answe

at List then

(b) Are you

CONSENT OF

State of In

APPLICATION FOR THE

A DDT TO A		- LIDIANA	
APPLICATION	FOD	BEADER.	
	TOR	MARRIACE	TICHT
		TOTAL TOTAL	

HENDRICK	S County File
MALE MALE Service Percent Park 1 9 9 4 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	Miles 6, 1976
Medical Examination Report Dated 8-4-76	LIMALE
Name of Physician Supply Kerlin	Medical Examination Report Dated 8-4-76
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 presenting (ID)	Name of Physician Jaseph Kerlin
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	ement—Whoever procures the issuance of a license to marry by any false statement, represent
Nome Middle	FEMALE APPLICANT
Date of Birth Month Day Wearl	Name First Middle
Place of Birth (State or foreign country)	Date of Birth Books
Sidvanapalis In	Place of Birth (State or foreign country) 30 1958
Residence Address Street or R. R. County State	Residence Address Street or R. R.
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Andreana, Danvelle In
Last Marriage Ended By: Death Divorce Annulment	Different Control of the Control of
	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 M. Schame	Color or Race White Negro Other (specify)
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:	* LOREANY
An Imbecile? Of Unsound Mind? No Yes Yes	Date of birth verified by: Birth Cert. Didicial 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 seylum or	1. Are you now or have you been adjudged, diagnosed or considered as:
home for indigent persons:	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 Yes 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? No Ves	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 W 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 flash Dailey
Name Age Address	Occupation of father Suddicina Bell Race of father When
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother // Manuagne Me Facley
(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) Danville
their support?	Occupation of mother Beautician Race of mother Wh
11. Full name of father Child Mills Company of the	Birthplace of mother (State or foreign country).
Occupation of father (if deceased so state) May Race of father wh	
Birthplace of father (State or foreign country)	State of Indiana, State of Indiana, I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Maonia Puthle Williams	County of HENDRICKS
Residence of mother (if deceased so state) Manualle, In	Signed 235 1/2 n Turne
Occupation of mother Race of mother Wh	New Address 385 /2 71 Wayne 19.76
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this. Querk HENDRICKS Circuit Court
State of Indiana, ss: I depose and state the information given in this application is true and correct.	Lille M. Harry
County of HENDRICKS Signed Ref a Winglet	CONSENT OF PARENTS, PARENT OR GUARDIAN
Now Address 385 1/2 N. Wayne, Panelle	We she 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	signs, state facts which render the consent of the other parent unnecessary
Glen M. Harvey Clerk HENDRICKS Circuit Court	218101
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	1
	State of Indiana, County of HENDRICKS
State of Indiana.	Signed Signed Father & Barbard Father
Sss:	Signed Ahomasure Juguet 19.26
Signed Mother	day of day of
Signed, 19	Ster 11 to 1
	refused to the above named parties, the
Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY	JRT. A marriage license having been refused to and filed Court by written order issued
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER	Court by written order issued
HENDRICKS	USE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court tense issued by the clerk of the
RETURN OF MARRIAGE LICEN RETURN OF MARRIAGE LICEN RETURN OF MARRIAGE LICEN of Indiana dated the day of day of day of Rev. Marriage in my Rev. Marriage License was filed in my Rev. Marriage License was filed in my	cense issued by the 1976, authorizing the joining together as have
the It Remembered, there was just an of	Theresa en saing
Real Wildel was filed in my	y office, to-wit:
Be it further remembered, the following marriage certificate was	hereby certify that on the County of County of
Be it further remembered, the following marriage certificate was filed in my I,	at Danville County, State of Judicine
Be it further remembered, the following marriage certificate was filed in my I,	of Hendricks County, State of County, State of HENDRICKS or that purpose by the Clerk of the Circuit Court of HENDRICKS
State of Indiana, Groom Kell Wall Bally of	that surpose by the Clerk of the Circuit Court of
arrange weeks	Me De a VIA
County.	76. Signed Joseph Private
Dated this /4 day of	Official Designation
Filed and recorded in accordance with the laws of the State of Indiana this.	24 day of Dewey Circuit Cour
Filed and recorded in accordance with the laws of the State of Indiana this.	Signed HENDRICKS
and recorded in accordance with	

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No. 338
File Bk 37
Aug. 9, 1976

An order of the control of the contr

...Circuit Court

Health under Authority Chap. 126, Ind. Acts 1905 HENDRICKS	9 1976
	FEMALE 7 27 2/
MALE Medical Examination Report Dated 7-27-76	Medical Examination Report Dated
Name of Physician David M. Hadley	Name of Physician David M. Dadley
Classic 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 executed	FEMALE APPLICANT
MALE APPLICANT	Name First Middle Last
Name Charles minatt	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)	Minnespolis Minnesola County State Ac
Residence Address Street or R. R. City County, State	Residence Address Street of R. R.
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	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	
Usual Occupation Meat Catter	Color or Race White Negro Other (specify)
Date of birth verified by:	Usual Occupation Unemployed
1. Are you now oil ave you been adjudged, diagnosed or considered as:	Date of birth verified by: Birth Cert. Judicial Decree
An Impecile?	Other (Specify)
3. Are you now or have you been within five (5) years an inmate of a county asylum 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 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? No Yes No Yes No Yes
7. Are you now under the influence of a narcotic drug? No Yes No Yes No Yes No Yes No Yes No Yes No No Yes No No No Yes No No No No Yes No No No No No No No N	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?	6. Are you now under the influence of a narcotic drug? No Yes
(If yes, answer questions a, b, c)	This are of father Reclaid Roumond Swesson
(a) List their full names, ages and addresses Name Age Address	Residence of father (if deceased so state) Chan Prairie, Menny
	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.
(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. Full D. Mugnotty	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 tel Mul Race of father Co	State of Indiana, I depose and state the information given
Birthplace of father (State or foreign country)	County ofHENDRICKS in this application is true and correct.
	Signed & Oubie Saversan
Residence of mother (if deceased so state) Occupation of mother Race of mother Race of mother	New Address Ocy 275 Cautor
Birthplace of mother (State or foreign country) Indiana	Subscribed and sworn to before me this
State of Indiana, I depose and state the information given	Llen M. Lawey Clerk HENDRICKS Circuit Court
County of Management of the County of the Co	
New Address Dept 225 Classification	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this. 9 day of August 19.76	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
The Manual ClerkHENDRICKS 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 ofHENDRICKS
County ofHENDRICKS	SignedFather
SignedFather	Signed
Signed	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me this	Clerk
	RT. A marriage license having been refused to the above named parties, the
inauthorizes and directs the issuance	Court by written order issued and filed
	SE AND MARRIAGE CERTIFICATE ense issued by the clerk of the HENDRICKS Circuit Court
of Indiana dated the 13 day of June 1	19.76 authorizing the joining together as husband and wife
Charles Lee Mignett	and The kie ann Sevenson
Be it further remembered, the following marriage certificate was filed in my	office, to-wit:
I, Thursten with the second	hereby certify that on the 2/ day of August, at AMO County of Himanicks,
State of Indiana Grown (harles & har Minnett	of Hundricks County, State of Segliana
and Bride Is the Com Slevester of	Hundricks County, State of Judiana,
	or that purpose by the Clerk of the Circuit Court of HENDRICKS
County	
Dated this day of duguet, 19%	Signed of Trank Bunn
	Official Designation Ministry
Filed and recorded in accordance with the laws of the State of Indiana this	
	Signed I III W. W. Mull

APPLICATION FOR MARRIAGE LICENSE

FEMALE

No. 339

No. 339

File 37

Date of Application

MALE	
Medical Examination Report Dated 8 - 9 - 76	FEMALE Date of Application
Name of Physician James Black	Medical Examination Report Dated 8 - 4 - 76
ALL OUESTIONS MUST BE ANSWERED Chapter 102 7	Name of Physician 20, Scand
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)"	tement—Whoever processes it
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	procures the issuance of a license to marry by any false statement, representa-
Name Parat Middle Last	FEMALE APPLICANT
Date of Birth Month Day Speland Yr.	First Middle Last
Place of Birth (State or foreign country) 1958	Date of Birth Month Day Flanagan
Buch Trave	Place of Birth (State or foreign country) Year 1958
Residence Address Street of R. R. City County State	- Rail Adbanon
Previous Marital Status: Never Married Number of Previous Marriages	City County State
attriages	Maiden Name if Different Sloenfield, Ind.
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages
Color or Race White Negro Other (specify)	Last Mante Base
Usual Occupation Arrive Lange	Death Divorce Annulment
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)
Other (Specify)	Usual Occupation 74
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) Boone Co. Dent of the Ath
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? No Yes	Of Unsound Mind?
5. Are you related to the bride closer than second cousin? No P Yes	2. Are you under guardianship as a person of unsound mind? No PYes
6. Are you now under the influence of intoxicating liquor? 7. Are you now under the influence of a narcotic drug? No P 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 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 (If yes, answer questions a, b, c)	6. Are you now under the influence of a narcotic drug? No Wes
(a) List their full names, ages and addresses	7. Full name of father James / Standard
Name Age Address	Residence of father (if deceased so state)
	Occupation of father Self employeld 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 frama 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
(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 Robert D. Capeland	Occupation of mother Thussesset Race of mother The
Residence of father (15 deceased so state) alaenfield, Ind	Birthplace of mother (State or foreign country)
Occupation of father Moderation Supt Race of father 91	and the state of t
Birthplace of father (State or foreign country) Indiana	State of Indiana, County of HENDRICKS as: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Loco C. Zuells	Marrie XI. Flancara
Residence of mother (if deceased so state) Glaunfield, Jud.	Signed Signed 1 at 1 a
Occupation of mother Libration Race of mother It	New Address D. C. 76
Birthplace of mother (State or foreign country) Incleance	Subscribed and sworn to before me thisday ofday
State of Indiana. State of Indiana. I depose and state the information given in this application is true and correct.	Glerk HENDRICKS Circuit Court
County of HENDRICKS In this application is true and	
Signed Market W. Off 12 care In	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address & 21 N 93 Olimping 30.76	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworn to before me this	signs, state facts which render the consent of the other parent unnecessary
Dlen M Harwey 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, HENDRICKSss:
	County of James 7) Alangan Father
State of Indiana, County of HENDRICKS	Signed of Hange an Mother
Signed Roberth, Capelart Father	Spined of day of 19
Signed My Robert Capiland Mother	Subscribed and sworn to before me thisday of
Subscribed and sworn to before me this day of	
Clerk	legist been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	RT. A marriage license having been refused to the above named parties, the ourt by written order issued
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER	ourt by written order issuedand parties.
HENDRICKS County	of a marriage license to the above
IIIautioz	MARRIAGE CERTIFICATE HENDRICKS CIRCUIT COURT
DESCRIPTION OF MARKET	Lead and and wife
Be It Remembered, there was filed in my of the August	, 19.2. G tillanagan
of Indiana dated the	and Connie G. August August
P	Hendicks,
I. Rev. Richard Zore	Plainfield , County of Indiana
76	Handricks Indiana ,
State of Indiana, Groom	Hendricks County, State of HENDRICKS
,	. Clark of the Circuit
were him a six like and the spired by a marriage license issued for	1 1 7ore
Comme united in marriage as auto-	/6 Rev. Alexander
County. Dated this 13th day of August , 19	Official Designation Roman Catholica , 19 76.
Dated this. 13th day of August 19	Official Designation August , 19 16. 17 day of August , 19 Clerk Signed Sless M HENDRICKS Circuit Court
this	1/1 m - Storman
The State of Indiana continue of the State of Indiana continue	Signed Alex Circuit Court

Remarriage)
STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS _County 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 Name Name Date of Birt Date of Birtl Place of Birth (State or foreign country Number of Previous Marriages Previous Marital Status: Never Married Previous Marital Status: Never Married Number of Previous Marriages Death Divorce Annulment Death Divorce Annulment Last Marriage Ended By: White Negro Other (specify)... Color or Race White Negro 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?
 Of Unsound Mind? No 4 Yes Other (Specify). No 🗸 Yes 🗌 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 c home for indigent persons? ounty asylum or No Yes No Yes An Imbecile? No Yes Of Unsound Mind? No 🗌 Yes 🗌 If answer to 3 is "yes" has the cause of such condition been removed? 2. Are you under guardianship as a person of unsound mind? No 🖸 Yes 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 3. Are you afflicted with a transmissible disease? No Yes 6. Are you now under the influence of intoxicating liquor? No 🗍 Yes 🗌 4. Are you related to the groom closer than second cousin? No Ves 7. Are you now under the influence of a narcotic drug? Yes No 8. Are you able to support a family? No 🗗 Yes 🗌 5. Are you now under the influence of intoxicating liquor? Yes 🔲 No 🗌 9. Are you likely to so continue? 6. Are you now under the influence of a narcotic drug? No Z Yes 10. Do you have minor children from one or more former marriages? No 🗆 Yes 🗆 (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 Name Age Occupation of father ... Birthplace of father (State or foreign country). Yes 🗂 No 🗌 (b) Are you supporting or contributing to their support? 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). depose and state the information given County of 12. Full maiden name of mother. Residence of mother (if deceased so state). 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. If only one parent signs, state facts which render the consent of the other parent unnecessary. H WENLY ClerkHENDRICKS 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 State of Indiana, County of HENDRICKS Signed. Signed. Father Mother Signed Mother ..day of..... Subscribed and sworn to before me this..... 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 HENDRICKS 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 HENDRICKS Circuit Court Welghet , 19 6, 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: Olin D. Fern hereby certify that on the 17th day of Lugust one thousand nine hundred and 76 at slainfield , County of Gendricks , State of Indiana, Groom Larry Dean Juttle of Marion County, State of Indiana Judith ann Tettle of Gendricks 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 ofHENDRICKS..... County. august , 1976. Dated this _____day of _____ W. Fern Official Designation minister

Signed Llen M. Harvey Clerk

HENDRICKS Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE No. 341 HENDRICKS

	File Bk 37	
County	Date of Application	
FEMALE	Date of Application	
Medical Examination Report Date	ed 8-5-76	
Name of Physician James	Black M.D	
-Whoever procures the issuance of a licens	se to marry by any fel	

MALE Medical Examination Report Dated 8-5-76	- august 10, 1976	
	FEMALE Medical Francisco	
Name of Physician James Black m.D.	Medical Examination Report Dated 8-5-76	
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes and tion or pretense shall be fined in any sum not exceeding five but Acts 1905 prescribes and the control of the but Acts 1905 prescribes and the control of the but Acts 1905 prescribes and the control of the but Acts 1905 prescribes and the control of the but Acts 1905 prescribes and the control of the c	Name of Physician James Black M.D	
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	Whoever procures the issuance of a license to marry by any false stetement	
Name First Middle Last	FEMALE APPLICANT	
Date of Birth Month Day Year II	Kirst Middle I Last	
Place of Birth (State or toreign country) 14 1936	Date of Birth Month Day Dellegan	
Residence Address Street or R. R. City Court	Place of Birth (State or foreign country)	
5) Stoneybrook Dr. B. Burg Gendrick Onl	Residence Addregs Street or R. R. City County State	
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different B'Bug Lindricks State	
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Nouve Marital	
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages	
Usual Occupation Pay moste - Cherry let	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) Cet No. 198	Usual Occupation Laurente	
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)	
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? 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 □ Yes □	3. Are you related to the ground level the same?	
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 ☐	
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 Oliver Isanklin Ransen	
Name Age Address Q O	Residence of father (if deceased so state) Alle party Ediffer The Marketine	
Flice & Suppose to the Belling State	Occupation of father Kethald Race of father L	
angla a Snapa 6 ""	Birthplace of father (State or foreign country) Sleepy Eight, Manney	
(b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for	1. 6	
their support? Yes No Y	Occupation of mother	
11. Full name of father (If deceased so state)	Birthplace of mother (State or foreign country)	
Residence of father (if deceased so state)	Market and the second of the s	
Birthplace of father (State or foreign country) Adpla Ind.	State of Indiana, County of HENDRICKS ss: I depose and state the information given in this application is true and correct.	
12. Full maiden name of mother Elegabeth Rose Megal	Hall Chean Hilliam	
Residence of mother (If deceased so state) Danville, JK	Signed DD Low 167 A Brunshing	
Occupation of mother Sald Shades fd Race of mother As	New Address 10 day of Degest, 1974	
Birthplace of mother (State or foreign country) happy	Subscribed and sworn to before me this day of Clerk HENDRICKS Circuit Court	
State of Indiana. County of HENDRICKS A depose and state the information given in this application is true and correct.	XIII The Little Library Clerk	
Signed Ones Of State	CONSENT OF PARENTS, PARENT OR GUARDIAN	
New Address AR Tox 16 1 1 100 wishing to 76	We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
Subsgribed and sworn to before me this 10 day of august, 19.12 Slen Marcel 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, } ss:	
	County of HENDRICKS	
State of Indiana,	Signed	
County of HENDRICKS Father Signed Mother	a	
	Signed	
Subscribed and sworn to before me thisday of		
	A marriage license having been refused to the above named parties, the	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUR	ourt by written order issued and med	
HENDRICKS County	of a marriage license to the day	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been rerused to the above named parties. Court by written order issued		
RETURN OF MARRIAGE LICENSE AND MARRIAGE HENDRICKS HOW HENDRICKS		
	Wahla Jean Killigan	
of Indiana dated the and and argust		
Be it further temembered the following marriage certificate was filed in my office, to-wit: hereby certify that on the 28 day of August hereby certify tha		
at County, State of		
one thousand him hundred and		
State of Indiana, Groom James C. Gilligan of Hendricks County, State of Indiana, Groom James C. Gilligan of Hendricks and, Bride Jahla Jean Gilligan of that purpose by the Clerk of the Circuit Court of HENDRICKS 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 County. Signed Clifford J. Carmichael County.		
and, Bride / ahla graninge license issued for that purpose by the		
were by me united in marriage as authorized by a marriage. County. Dated this. 24 day of a gust 19.7	6. Signed Clifford Ministr	
Dated this 24 day of wygree	Official Designation United Sept, 1976	
	day of Clerk	
Filed and recorded in accordance with the laws of the State of Indiana this	Signed HENDRICKS Circuit Court	

STATE OF INDIANA

No. 37		
File		
august	10	15

APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS _County 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 Middle Name andr Place of Birth (State or foreign country Maiden Name if Different 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 Date of birth verified by: Birth Cert. Judicial Decree Usual Occupation Other (Specify) ... Birth Cert. D Judicial Decree Date of birth verified by: Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes Other (Specify). 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 asylum or home for indigent persons?
Yes ☐ No 🗆 Yes 🗆 An Imbecile? No Yes Of Unsound Mind? If answer to 3 is "yes" has the cause of such condition been removed? No 🗆 Yes [No Z Yes No D Yes 🗌 2. Are you under guardianship as a person of unsound mind? 4. Are you afflicted with a transmissible disease? 5. Are you related to the bride closer than second cousin? Yes [No 🖸 No Yes 3. Are you afflicted with a transmissible disease? 6. Are you now under the influence of intoxicating liquor? Yes [4. Are you related to the groom closer than second cousin? Yes 🗌 7. Are you now under the influence of a narcotic drug? Yes No 🗌 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? 6. Are you now under the influence of a parcotic drug 10. Do you have minor children from one or more former marriages? No 🗌 Yes 🗌 (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 Mullinance Birthplace of father (State or foreign country) 8. Full maiden name of mother ... 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 deceased so state) .. No 🗆 Yes 🗆 Occupation of mother Alaman 11. Full name of father // // 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 HENDRICKS Occupation of mother Cal Ally Birthplace of mother (State or foreign country). Subscribed and sworn to before me this... State of Indiana, I depose and state the information given in this application is true, and correct. Clerk HENDRICKS .Circuit Court 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 Subscribed and sworn to before me this .. signs, state facts which render the consent of the other parent unnecessary ... MARALA CIERHENDRICKS 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. State of Indiana. County of HENDRICKS Signed. Subscribed and sworn to before me this..... ...day of..... Subscribed and sworn to before me thisday of .. COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the HENDRICKS 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 HENDRICKS Circuit Court 1,4 day of Allegsest f19 , authorizing the joining together as husband and wife and Charlese Hay Kivett Gary Wayne Weaver Be it further remembered, the following marriage certificate was filed in my office, to-wit: Norman L. Weaver hereby certify that on the 15th day of August, at Danville , County of Hendricks , one thousand nine hundred and. Gary Wayne Weaver of Hendricks County, State of Indiana State of Indiana, Groom..... Charlene Kay Kivette Hendricks County, State of Indiana, , 19. 76 Dated this. Signed Norman L. Weaver Minister Official Designation..... Filed and recorded in accordance with the laws of the State of Indiana this ...

.. HENDRICKS ..

Are you likely to). Do you have minor

(at List their ful

bi Are you supp

and, Brid

STATE OF INDIANA

Chap. 126, Ind. Acts 1905 HENDRICKS	File 47
MALE Medical Examination Report Dated 8-4-76	FEMALE S-11-76 Date of Application
Name of Physician Malcalm Scamahom	Medical Examination Report Dated 8-4-76
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 of Physician Malcolm Scamahorn
MALE APPLICANT	whoever procures the issuance of a license to marry by any false statement, representa-
Name Hober Middle Heat Last	Name First
Date of Birth Month Day Year March 11 1954	Date of Birth Month Suce Wast,
Place of Birth (State or Lorging country)	Place of Birth (State or foreign country) Day Year 1958
Residence Address Street or R. M. City County State	Residence Address Street or R. R. City
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Logical County State
Last Marriage Ended By: Death Divorce Annulment D Hendricks	Previous Marital Status: Never Married Number of Previous Marriages.
Color or Race White Negro Other (specify)	THE RESERVE TO THE PARTY OF THE
Usual Occupation Mea hanis	Divite Annument
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 Decree
An Imhecile? Of Unaound Mind? No P Yes Yes 2. Are you under guardianahip as a person of unsound mind? No P Yes Yes Yes	□ Other (Specify) 58-060643
3. Are you now or have you been within five (5) years an inmate of a county assum 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? 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? No P Yes	4. Are you related to the groom closer than second cousin? No Ver C
8. Are you likely to so continue? Yes No	5. Are you now under the influence of intoxicating liquor? No P 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? 7. Full name of father.
(a) List their full names, ages and addresses Age Address	Residence of father (if deceased so state) 133 H & unitor)
Netra of Hooten 2 737 mackythe	Occupation of father Budge Luperunt Race of Father
Banelle, St.	Birthplace of father (State or foreign country) Missouri 8. Full maiden name of mother. Danage L
(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? Passes (lanch Hacter)	Occupation of mother
11. Full name of father (If deceased so state) A #1 Aujton	Birthplace of mother (State or foreign country)
Occupation of father Gold Motor G. Race 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) [malline Soutka	County of HENDRICKS
Residence of mother (if deceased so state) R#1 Listen	Signed Signed Signed Signed 46/49 New Address D. Bot & Lyton, Ind 46/49
Occupation of mother Thusewife Race of mother Orecon	Subscribed and sworn to before me this
Birthplace of mother (State or foreign country)	Alen M Harvey Clerk HENDRICKS Circuit Court
County of HENDRICKS II the polication is true and correct.	DARROLAN OR GUARDIAN
Signed 20 tox 2 hizton, DD	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
New Address. Subscribed and sworn to before me this / day of August, 1976.	signs, state facts which render the consent of the other parent unnecessary
Dur In Harvey Gerk 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 Office of County
State of Indiana, County of HENDRICKS	House
SignedMother	Signed
Subscribed and sworn to before me thisday of	
201	URT. A marriage license having been refused to the above named parties, the and filed
DELD IT MARKINGS DIVINION	to the above named parties.
HENDRICKS. County authorizes and directs the issuance DETURN OF MARRIAGE LICEN	SE AND MARRIAGE CERTIFICATE HENDRICKS HENDRICKS Circuit Court sense issued by the clerk of the 19.76, authorizing the joining together as husband and wife and Melasty Sul Desick
RETURN OF MARRIAGE LICEN	tense issued by the clerk of the authorizing the joining together as husband and wife authorizing the joining together as husband and wife
RETURN OF MARRIAGE LICEN RETURN OF MARRIAGE LICEN RETURN OF MARRIAGE LICEN Of Indiana dated the day of day of lunguist. Be it further remembered, the following marriage certificate was filed in my I, John C. Massille. 76	melody Sul Desert
acea me all all a ton.	office, to-wit:
Be it further remembered, the following marriage constitution	hereby certify of the deaner of the deaner
one thousand rine hundred and	of Gendricks County, State of Indiana,
one thousand nine hundred and State of Indiana, Groom Askill I Isales of and, Bride Melstlef Sittle Destill license issued for were by me united in marriage as authorized by a marriage license issued for	Alendaria of the Circuit Court of
and, Bride Milatly Sith Allah Delationse issued for	or that purpose by the control of manuals.
one thousand nine hundred and State of Indiana, Groom Askill I Isales of and, Bride Melsely Site Desiles of were by me united in marriage as authorized by a marriage license issued for County. Dated this 19 day of Assignation, 19.1	or that purpose by the Clerk of the Common of the Court of the Signed John & Mourely by Court of the Official Designation gedge Jungust 19.76.
Julea this	Official Designation day of Jugalla Clerk
County. Dated this	Official Designation Geology 19. Land Clerk 20 day of Standelf Circuit Court Signed HENDRICKS
una recorded in accordance with the	

STATE OF INDIANA

egust 12 Date of Application No Yes Clerk HENDRICKS...

Signed Alen Marvey Clerk

(b) Are you sur

COMPLETE 1

and, Bride

were by me,

Dated this

APPLICATION FOR MARRIAGE LICENSE Chap. 126, Ind. Acts 1905 HENDRICKS County 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 Middle First Last 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 White Negro Other (specify)... Color or Race White Negro Other (specify).... Color or Race Usual Occupation Date of birth verified by: Birth Cert. | Judicial Decree Usual Occupation Other (Specify) # 235/ Date of birth verified by: Birth Cert. | Judicial Decree Are you now or have you been adjudged, diagnosed or considered as:
 An Imbecile?
 #60-016980 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 🗌 county asylum or 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? No 🗌 Yes 🗌 If answer to 3 is "yes" has the cause of such condition been removed? Yes 🗌 No Z 2. Are you under guardianship as a person of unsound mind? 4. Are you afflicted with a transmissible disease? Yes 🗌 No 🗹 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? No 🖾 Yes 🗌 No E 4. Are you related to the groom closer than second cousin? 7. Are you now under the influence of a narcotic drug? 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? 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 Yes (If yes, answer questions a, b, c) 7. Full name of father Harling & Kunn (a) List their full names, ages and addresses Residence of father (if deceased so state). Namu. Address Occupation of father Dussel Mechanic Birthplace of father (State or foreign country) Manuelle 8. Full maiden name of mother & Assacheth No 🗆 (b) Are you supporting or contributing to their support? (c) Are you complying with any court order or orders issued for their support? Occupation of mother Sameur fe 11. Full name of father Kotet Birthplace of mother (State or foreign country) Haple Residence of father (if deceased so state) laun Occupation of father LAST Affice State of Indiana, Birthplace of father (State or foreign country) County ofHENDRICKS Occupation of mother has hee Blocks Race of mother U Birthplace of mother (State or foreign country) Flnnsuply Bons I depose and state the information given in this application is true and correct. 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 Subscribed and sworn to before me this... ClerkHENDRICKS signs, state facts which render the consent of the other parent unnecessary... Den M Hawey 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 State of Indiana, County of HENDRICKS Father Mother COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT. A marriage license having been refused to the above named parties, the HENDRICKS County Constitute Court by written order issued 3- day waves and filed in Clerks Office 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 Circuit Court , 19. 7.6., authorizing the joining together as husband and wife and Karen Venuse Kunuson Be it further remembered, the following marriage certificate was filed in my office, to-wit: Joseph Mc Creschen hereby certify that on the day of desgust at Danville, County of Henducks, Sheegaras of Gendricks County, State of Inflance and, Bride Karlow Denise Gunesjon of Sendricks County, State of Indiana, County. august, 19 76. Dated this. Official Designation Filed and recorded in accordance with the laws of the State of Indiana this ...

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

Signed.

HENDRICKS.

APPI ICAMIO	or INDIANA
LICATION	FOR MARRIAGE LICENSE
	MARRIAGE LIGHTON

	597	
Form Prescribed By Indiana State Board of Health under Authority APPLICATION		
Health under Authority Chap. 126, Ind. Acts 1905 APPLICATION FOR 1	MADDIAGE No. 345	
HENDRICA	MARRIAGE LICENSE	
MALE	KS County File BA 37	
Medical Examination Report Dated 8-6-76	FEMALE Date of Application	
Name of Physician famus Black ml.	Medical Examination Report Dated 8-6-7/	
ALL QUESTIONS MUST BE ANSWERED. Chapter 126. Indiana Act. 100	Name of Physician James Black and	
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False station or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT Name First Middle	tement—Whoever procures the issuance of a license	
	DIMAN PROPERTY by any false statement, representa-	
Date of Birth Month Day Lenneson	Name First Middle	
Place of Birth (State or togelign country)	Date of Birth Month Tay Grimes	
Residence Address Street or R. R. City County County	Place of Birth (State or foreign country)	
5/02 W. 196 Sr. Sadolo. O. 1	Residence Address Street or R.R. City County Street	
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different 288 Brownstown Jef	
Last Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married Number of Previous Marriages	
Color or Race White Negro Other (specify)	Last Mountain D. 1.	
Usual Occupation Munistry	Col 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	
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 asylum or	1. Are you now or have you been adjudged, diagnosed or considered as:	
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	An Imbecile? 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?	
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?	
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 6. Are you now under the influence of a nargotic drug? No Yes	
(a) List their full names, ages and addresses	7. Full name of father Arry Church Grumes	
Name Age Address	Residence of father (if deceased to state) Shundling Holy	
	Occupation of father All Market Race of father All Market	
	8. Full maiden name of mother Batta Gan Palita	
(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). Braunstury, Al.	
11. Pull name of father Edition Alfrica Flandson	Occupation of mother ANNINIARIN Race of mother White	
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country) Latticky	
Occupation of father Race of father Race of father	State of Indiana, I depose and state the information given	
Birthplace of father (State or foreign country)	County of HENDRICKS in this application is true and correct.	
Residence of mother (if deceased so state)	Signed J. Milled Hay Islands	
Occupation of mother MANCE , Race of mother William	New Address. # 22 Colored Colo	
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of All All 19	
State of Indiana, County of HENDRICKS SS: I depose and state the information given in this application is true and correct.	Glerk HENDRICKS Circuit Court	
Signed John Han Lenguson	CONSENT OF PARENTS, PARENT OR GUARDIAN	
New Address 922 Considers AVE Circunst. Ohio	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 Manual 19.	signs, state facts which render the consent of the other parent unnecessary	
and the state of t		
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 Father	
County of HENDRICKS 88:	Signed Mother	
SignedMother	Signed	
Signed	Subscribed and sworn to below	
Clerk	hear 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	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT COUNTY COUN	ort by written order issuedament parties.	
in authorizes and directs the issuance of	AND MARRIAGE CERTIFICATE	
authorizes and directs the issuance of a marriage CERTIFICATE RETURN OF MARRIAGE LICENSE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court Be It Remembered, there was filed in my office a marriage license issued by the clerk of the joining together as husband and wife of the literature of the li		
RETURN OF MARRIAGE LICENSE AND Be It Remembered, there was filed in my office a marriage license issued by the clerk of the license issued by the clerk of		
Indiana dated the analysis and a series and	nd fice to-wit:	
Be it further remembered, the following marriage certificate was fued in	hereby certify that on the County of Handrick	
1, Selen Contrey & flant the things	at Daymalling County, State of Indiana	
and Bride & and Alles Kay Allesmis of	that purpose by the Clerk of the Circuit Court of	
County. Dated this. And of Many of M	Signed 5/ John A Sielting & Slemme Court Oficial Designation Ministeria, 19 He.	
day ofday	Official Designation	

...Clerk

..Circuit Court

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

FEMALE

346

File_	
	0 10 21
	8-12-16
	Date of Application

MALE Medical Examination Report Dated F-9-76	FEMALE Medical Examination Report Dated 5-9-76
Name of Physician Wavid B. Haggard	Name of Physician Waved B. Haggard
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False stat 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-
MALE APPLICANT	FEMALE APPLICANT
Name /First Middle Last	Name First Middle Arnold
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
4951 West 25th St Speedway	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 Mai Hage Diluce Dy
Usual Occupation & lectrician	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Dudicial Decree	Usual Occupation Jactory Wolker
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 \(\subseteq \text{Yes} \subseteq \)	1. Are you now or have you been adjudged, diagnosed or considered as:
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? Yes □	An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	Of Unsound Mind? No Yes No
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 Yes Yes	3. Are you affected with a transmissible disease. 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? No Yes
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father (if deceased so state) Thiattstown Ind
Name Age Address	Residence of father (if deceased so state) Things with Occupation of father (Istern) Cleating Race of father
	Birthplace of father (State or foreign country) Huskvelle In.
	8. Full maiden name of mother Patey Arlene Pac
(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) 152 Longfellow WK)
their support? 11. Full name of father of again Bet Jus.	Occupation of mother Cousewife Race of mother
Residence of father (if deceased so state) B Mattinsvelle And.	Birthplace of mother (State or foreign country) Conners (elle), Se.
Occupation of father Tolyen Y Light Race of father	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 Setty The Pour Pour Property Set Pour Pour Property Set Pour Pour Pour Pour Pour Pour Pour Pour	Signed Slung Lynn Frold
Occupation of mother Houseweft Race of mother	New Address 4951 West 25thSt. Speedway Ind.
Birthplace of mother (State or foreign country) Williams) Snd.	Subscribed and sworn to before me this day of dug , 1976.
State of Indiana, Santa of HENDRICKS ss: I depose and state the information given in this application is true and correct.	Gerk HENDRICKS Circuit Court
Signed July Logen Bex	
New Address 4951 W. 25th SPEEDWAY, Jap.	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of august, 1976.	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
GlerkHENDRICKS Circuit Court	signs, state facts which render the consent of the other parent diffecessary
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 ofHENDRICKS
State of Indiana, County of HENDRICKS	SignedFather
Signed Father	Signed
Signed	Subscribed and sworn to before me thisday of
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 issuedand filed
inauthorizes and directs the issuance	
	SE AND MARRIAGE CERTIFICATE
Be It Remembered, there was filed in my office a marriage lice	ense issued by the clerk of the HENDRICKS Circuit Court
of Indiana dated the day of Chuzut	19.76, authorizing the joining together as husband and wife
Re it further remembered, the following marriage certificate was filed in my	office, to-wit:
1, Res J. D. Bailey	hereby certify that on the 2/st day of dugust,
one thousand nine hundred and	at Plainfield , County of Africas,
	of Marion County, State of Indiana
	County, State of Maina,
	r that purpose by the Clerk of the Circuit Court ofHENDRICKS
Dated this 16th day of August, 19 7	Signed Rev Q D Bailey
	Official Designation Minister
Filed and recorded in accordance with the laws of the State of Indiana this	24 day of Owner 19 76.
	Signed Alen Mydalifel Clerk

HENDRICKS....

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County File Book 37		
MALE W. West Examination Person Process Proces	5-12-76	
Medical Examination Report Dated 8-12.76	FEMALE Date of Application	
Name of Physician Clark T. D.	Medical Examination Report Dated 8 - 12-76	
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	Name of Physician Eric CO - L	
tion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	ement—Whoever procures the issue	
MALE APPLICANT	issuance of a license to marry by any false statement, representa-	
Kim B. R. Itast	Nome FEMALE APPLICANT	
Date of Birth Day Year	Rebecca Diddle & East	
Place of Birth (State or foreign country)	Date of Birth Month Day Year	
Residence Address Street of R. R. Sake Co. J. J.	Place of Birth (State of foreign country) 4 19 5 3	
box 3/2 Paris, Bers Jah P. Stage	Residence Address Street or R. R.	
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different	
V Marriago Freded But Double Co. Do	The Dillerent	
	Previous Marital Status: Never Married Number of Previous Marriages	
Color or Race White Negro Other (specify)	I not Menote Transfer	
Usual Occupation Environmental Health Speak t	Annulment	
Date of birth verified by: Birth Cert. Judicial Decree (Jack Julke)	Color or Race White Negro Other (specify)	
Other (Specify) A many but Health 6.16	Usual Occupation Regesterel Nusse	
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 2-53-602676	
2. Are you under guardianship as a person of unsound mind?	Other (Specify) Buren of The Statistics Chief	
3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as:	
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	An Imbecile?	
4. Are you afflicted with a transmissible disease? No Yes	Of Unsound Mind? 2. Are you under quardianship as a passes of annual data.	
6. Are you now under the influence of intoxicating liquor? No Ves	2. Are you under guardianship as a person of unsound mind? 3. Are you afflicted with a transmissible disease? No El Yes D	
7. Are you now under the influence of a narcotic drug? No Yes	4 Are you related to the green desired.	
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? No Z Yes	
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father aller Hoston Smith	
Name Age Address	Residence of father (if deceased so state)	
	Occupation of father Leader Race of father W	
	Birthplace of father (State or foreign country)	
(b) Are you supporting or contributing to their support? Yes ☐ No ☐	8. Full maiden name of mother. Carol Euleen Cristian	
(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 Blen Oscar Bothwell	Occupation of mother Deather Race of mother W	
Residence of father (if deceased so state) Color Jahr. Ont.	Birthplace of mother (State or foreign country) youngstow.	
Occupation of father. Busine Race of father. W	Diremplace of mother (come of contract of	
Birthplace of father (State or foreign country) Buffix	State of Indiana, State of Indiana, I depose and state the information given in this application is true and correct.	
12. Full maiden name of mother Belly Obess Schuck	County of HENDRICKS in this application is true and correct.	
Residence of mother (if deceased so state) Cadad Jake Jul.	Signed Pelvecca K South	
Occupation of mother Homewaker Race of mother W.	New Address Boy 3/2, Para State	
Birthplace of mother (State or foreign country) New york	Subscribed and sworn to before me this 12 day of 19	
State of Indiana, I depose and state the information given	Blom Dr. Huvegerk HENDRICKS Circuit Court	
County of HENDRICKS ss: in this application is true and correct.		
Signed Kall Dothwell	CONSENT OF PARENTS, PARENT OR GUARDIAN	
New Address Dr 2312, Paris 2000	We, the parents, of this applicant hereby give consent for this marriage. If only one parent	
Subscribed and sworn to before me thisday of, 19,	signs, state facts which render the consent of the other parent unnecessary	
Den In. HENDRICKS Circuit Court	algula desta	
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	
State of Indiana,	Signed	
County of HENDRICKS Father	Signed	
Signed	Subscribed and sworn to before me thisday of	
Subscribed and sworn to before me thisday of	Clerk	
Clerk	refused to the above named parties, the	
DE ORDER OF COUR	r. A marriage license having been refused to the above named parties, the and filed art by written order issued	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER CO.	art by written order issued	
HENDRICKS County 11 ignance 0	a marriage license to the above hands	
RETURN OF MARRIAGE LICENSE Be It Remembered, there was filed in my office a marriage licen day of	AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court	
RETURN OF MARRIAGE LICEN	se issued by the clerk of the the joining together as husband and wife	
Be It Remembered, there was filed in my office august	, 19 / Q authorizing the Smith	
RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LI	August	
Re it frusther remark and the following marriage certificate was filed in my of	gice, to-wer. 15th day of day of Wondricks	
Be it further remembered, the following marriage certificate was filed in my of the following marriage	Danville Jaho	
One thousand it is a second of the second of	Contract I do Do	
Rothwell		
State of Indiana Grown KIM B. DULLING	Bear Lake County, State of HENDRICKS	
State of Indiana, Groom	hat purpose by the Clerk of the Circuit Court of	
and, BrideRebecca Ruth Smith	hat purpose by the Clerk of the Circuit Court of	
and, Bride	hat purpose by the Clerk of the Circuit Court of John C. Mowrer Hendricks County Court	
and, Bride	hat purpose by the Clerk of the Circuit Court of John C. Mowrer Hendricks County Court	
State of Indiana, Groom	hat purpose by the Clerk of the Circuit Court of John C. Mowrer Hendricks County Court	

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE (Liegust 13)
Date of Application HENDRICKS County

MALE 0 111/76	FEMALE Medical Examination Report Dated
Medical Examination Report Dated	1. 1. 11 in Foliage to box.
Name of Physician William Edwards VIId.	Name of Physician A Market Canada Physician
Tale state	ement—Whoever procures the issuance of a license to marry by any false statement, representa-
tion of precense shall be mile in	FEMALE APPLICANT
MALE APPLICANT	Name & First Middle Last
Name Middle Curran II	Date of Birth / Month Day Year 949
Date of Birth Month Day Year	William 24 1949
Place of Birth (State or foreign country) - Munica Gal	Place of Birth (State or foreign country)
And in applies City County State	Residence Address Street or R. R. City County State
Residence Address Street or R. R., City County	Maiden Name if Different
Previous Marital Status: Never Married Number of Previous Marriages.	• 1
The Annulment of Market 199	3 Previous Marital Status: Never Married Number of Previous Marriages 200
Last Mai Hage Black Ly	Last Marriage Ended By: Death Divorce Annulment Munda Co.
Color or Race White Negro Other (specify)	Character Research White Negro Other (specify)
Usual Occupation Cank	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Samemaker
Other (Specify)	Date of birth verified by: Birth Cert. Judicial Decree
1. Are you now or have you been adjudged, diagnosed or considered as: No Yes No Yes	Date of birth verified by: 2 Birth oct of the Date of birth verified by: 2 Birth oct of the Date of birth verified by: 2 Birth oct of the Date of birth verified by: 2 Birth oct of the Date of birth verified by: 2 Birth oct of the Date of birth verified by: 2 Birth oct of the Date of birth verified by: 2 Birth oct of the Date of
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: 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?	An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed?	Of Unsound Mind? No Person of unsound mind? No Yes
4. Are you afflicted with a transmissible disease? No Yes Yes Yes	2. Are you under guardianship as a person of unsound mind? No Yes No Yes
6 Are you now under the influence of intoxicating liquor?	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 No Yes No Yes Yes
8. 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 Yes
10. Do you have minor children from one or more former marriages?	I I I I I I I I I I I I I I I I I I I
(If yes, answer questions a, b, c) (a) List their full names, ages and addresses	7. Full name of father (1) (1) decorate on state) Upland Calle
Name Age Address Affin	Residence of father (if deceased so state) Race of father Race of father
Ingle syna Wan of Iphanes	Occupation of father State or foreign country)
	Birthplace of lather (State of Bulle)
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Salles Salles Callerne
(c) Are you complying with any court order or orders issued for	Residence of mother (if deceased so state)
their support? Charle Charles Charles	Occupation of mother # All Mary Race of mother # 1
11. Full name of father	Birthplace of mother (State or foreign country)
Occupation of father Alland Ball Race of father Alland	and state the information given
Birthplace of father (State or foreign/country) Additional Topics	State of Indiana, County of
12. Full maiden name of mother Jallandens Clarateth Jac	Well The Marie Marchead
Residence of mother (if deceased so state)	Signed Signed Of Danashing
Occupation of mother (1 deceased 1) Race of mother fill the	New Address 39 Must St Steeling U.S.
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of 19
State of Indiana.	Alex M. OARWY Clerk HENDRICKS Circuit Court
County of HENDRICKS 88: in this application is true and correct.	
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 me this day of day o	signs, state facts which render the consent of the other parent unnecessary
Men Many ClerktENDRICKS Circuit Court	
CONSENT OF PARENTS, PARENT OR SUARDIAN	
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
State of Indiana, County of HENDRICKS	Signed Father
County of Father	Signed
Signed	
Subscribed and sworn to before me thisday of	Subscribed and sworn to before me this
Clerk	The state of the s
- A CONTROL TOURING DAY OF THE CO.	URT. A marriage license having been refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF CO	.Court by written order issuedand filed
inauthorizes and directs the issuance	ce of a marriage license to the above named parties.
RETURN OF MARRIAGE LICE.	NSE AND MARRIAGE CERTIFICATE icense issued by the clerk of the HENDRICKS Circuit Court
25 Medical	, 19.7.6, authorizing the joining together as hysband and wife
of Indiang dated the form of day of the TI	and Christine Marie Morehead
Be it further remembered, the following marriage certificate was filed in m	y office, to-wit:
1 Teal O'neil younce	hereby certify that on the day of fine
one thousand nine hundred and 74	at Plainfield , County of Hendrichs
State of Indiana, Groom Clifford Charles Curran.	Hof Kendricks County, State of Fredana
and Bride Christine Marie Morehead of	Kendricks 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.	
Dated this 27 day of lug , 19	Signed Leal O'Neal younce
	Official Designation Maristy
Filed and recorded in accordance with the laws of the State of Indiana thi	1.17.
wow with the state of the state	Signed Glen My Harry Clerk

......Circuit Court

HENDRICKS.....

Form Prescribed By Indiana State Board of

DDTTG	TALE (FINDIANA	
APPLICATION	FOR	MADDIA	
	- OIL	MARKIAGE	LICENCE

Health under Authority Chap. 126, Ind. Acts 1905 APPLICATION FOR MARRIAGE LICENSE File Bb 27		
HENDRICKS County File Bk 37		
MALE Making Examination Report Dated 8-11-21	Data of And 1976	
Medical Examination Report Dated 8-11-76 Name of Physician Dayed B Zhangard	Medical Everyingston D	
- Gara	N. 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)". MALE APPLICANT	tement—Whoever procures the issuance of a license to many	
Name First, Middle	FEMALE APPLICANT	
Date of Birth Month Day Deuth	Name First Middle Last	
Place of Birth (State or foreign country) Year 1941	Date of Birth Month Day Year	
Paidence Address Street or R. R. a - City	Place of Birth (State or foreign country) A (6 5 0 Kenning St. Pai 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
650 Kentucky Plumpill Hendrils State	Residence Address Street or R. M. City County State July	
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Lee Johnson	
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 Divorce Annulment Divorce	
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)	
Other (Specify)	Usual Occupation Secretary	
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 Als. St. Heavy Super Cother (Specify). Co. Heavy Super - Culling ala.	
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 assign 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? No ♥ Yes □ Of Unsound Mind? No ♥ Yes □	
4. Are you afflicted with a transmissible disease? No 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? 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	
9. Are you likely to so continue? 10. Do you have minor children from one or more former marriages? No Yes V	6. Are you now under the jaffuence 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 World arthur Johnson	
Derek Ihn Douth 5 Plainfull ID	Residence of father (if deceased so state) Coccupation 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 the Free Street St Only	
(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 Martin John Deuth Deles	Occupation of mother	
Occupation of father State Acceptation Race of father W	T denote and state the information given	
Birthplace of father (State or foreign country)	State of Indiana, County of HENDRICKS Ss: I depose and state the information given in this application is true and correct.	
12. Full maiden name of mother Mary Jane Dewis	Signed & Elwanda J. Neuta	
Occupation of mother Lauranau Lauranau Race of mother Lauranau Lau	New Address 650 Perlucky Planfact	
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of 19. Subscribed and sworn to before me this Clerk HENDRICKS Circuit Court	
State of Indiana, I depose and state the information given in this application is true and correct.	Blen M. OV Mary Clerk HEROMEN CHEMIC COM	
Signed John D. Deuth of I land	CONSENT OF PARENTS, PARENT OR GUARDIAN	
New Address 650 Kentucky Mainteld, 100.	are also porents of this applicant hereby give consent for this marriage. It only one parents	
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	
CONSTRUCTION DE CHARDIAN		
We, the parents, of this applicant hereby give consent for this marriage. It only one parents		
signs, state facts which render the consent of the other parent unnecessary	State of Indiana, ss:	
	State of Indiana, County of	
State of Indiana,	Signed Mother	
County of HENDRICKS Father	Signedday of	
Signed Mother Signed , 19 ,	Subscribed and sworn to before me thisday of	
Subscribed and sworn to before me thisday ofClerk	hear refused to the above named parties, the	
Complete if Marriage License issued by order of county.	RT. A marriage license having been refused to a and filed	
in Clerk office authorizes and directs the issuance	Court by written order issued.	
HENDRICKS and directs the issuance	Cincil Court	
DETURN OF MARKET	ange issued by the contract to the state of the contract to th	
Be It Remembered, there was filed in my of the	, 192 y, Lee Deuth	
Of Indiana dated the	(111 1100	
Be it further remembered, the following marriage certificate was filed in my I, One thousand nine hundred and State of Indiana Groom State of Indi	hereby certify that on the County of Sendralis at Danvelle County, State of Indiana, Of Hendricks County, State of HENDRICKS	
1, Jahn Mallette	at Danielle County, State of Indiana, of Nendricks County, State of Indiana, Thendricks County of HENDRICKS or that purpose by the Clerk of the Circuit Court of	
State of Island nine hundred and State of Island	Nendrecks Circuit Court of HENDRICKS	
and, Bride & devandly & lle Deuth	or that purpose by the Clerk of the Control	
were by me united in marriage as authorized by a marriage license issue.	7/2 John C. maierela Court	
were by me united in marriage as authorized by a marriage County. Dated this	Official Designation Judge Gendricks 1976.	
this.	Official Designation Clerk 16 day of Harrieff Circuit Court	
County. Dated this 14 day of August 19.2 Filed and recorded in accordance with the laws of the State of Indiana this.	Signed Sless M Samuel Circuit Court HENDRICKS	
The second of the decoration of the second o		

APPLICAT

STATE OF INDIANA	No
TON FOR MARRIAGE LICENSE	File37
HENDRICKS County	8-16-76
- Country	Date of Application

	Date of Application
MALE	FEMALE Medical Exemplantian Report Dated 8-11-76
Medical Examination Report Dated 5-//-	Medical Examination Report Dated 8-11-76
Name of Physician James E. Sauthard	Name of Physician fames 6. Sauthard
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False sta	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 List	Name First Middle 9/ Lost
Date of Birth Sichard Fryn Castetter	Date of Birth Mgnth Day Year
July 15 1957	Place of Birth (State or foreign country)
Place of Birth (State or foreign country) Ind.	nashville Jinnesiel
Residence Address Street or R. R. City County State 823 Sardens Alainfield, and	Residence Address Street or R. R. City County State 823 Hardina Mainfield Ind.
Previous Marital Status: Never Married T Number of Previous Marriages	Maiden Name if Different
	Previous Marital Status: Never Married Marriage 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 & onstruction.	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree Ind. Sl. Bd. of	Usual Occupation Texpest
Other (Specify) 1. Are you now or have you been adjudged, diagnosed or considered as:	Date of birth verified by: Birth Cert. Judicial Decree Tenn . Vital Status
An Imbecile? No Yes Of Unsound Mind? Yes Ves	Other (Specify)
2. Are you under guardianship as a person of unsound mind? No 2 Yes 3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as: An Imbacile? Yes
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? 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 🗌	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	4. Are you related to the groom closer than second cousin? No Z Yes
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? 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 Wifflam Suggests
Name Age Address	Residence of father (if deceased so state) Slainfield , South
	Occupation of father Milliam Race of father M
420174	Birthplace of father (State or foreign country) Junil Alla
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Alaria Draig
(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) Blass fully and
11. Full name of father	Occupation of mother Clerk Race of mother 4
Residence of father (if deceased so state)	Birthplace of mother (State or foreign country) Junils Sele
Occupation of father	
Birthplace of father (State or foreign country)	State of Indiana. Sa: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Dorathy Marie Queens Castette	County of HENDRICKS
Residence of mother (if deceased so state) Ray Including pales Isade.	Signed & Malionale Cline Signer
Occupation of mother Lausewife Race of mother It	New Address RR 2 BOY 145 Ondianop Blo, and
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me thisday of
State of Indiana. I depose and state the information given in this application is true and correct.	Clerk HENDRICKS
Signed & Dichard Lynn Lastetter	
New Address BB#2 BOX 145 Undels Sod	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me this day of	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
ClerMENDRICKS 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	
Marie Control of the	State of Indiana, County of HENDRICKS ss:
State of Indiana,	
County of HENDRICKS Signed Father	Signed Father
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
The state of the s	mm A
	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 ense issued by the clerk of the HENDRICKS Circuit Court
224	, 19 Z.C., authorizing the joining together as husband and wife
of Indiana dated, the Jum Castetter	Albertah and Hagins
Be it further remembered, the following marriage certificate was filed in my	office, to-wit:
1, Carrell W. Cox	hereby certify that on the 27 day of August,
one thousand nine hundred and	at 1.2. 1907 19 Frogels Inde 4623 County of Gendriches,
State of Indiana, Groom Richard Fynn Castetter	of Hendricks County, State of Indiana
and, Bride Deborah ann Higgins 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
Dated this 20 day of August 19	76 10 10 111 0
Dured tries , 19	Signed Narrell W. Cox
	Official Designation Paston, Maple Grove Baptist Ch.
Filed and recorded in accordance with the laws of the State of Indiana this	30 day of august 1976
	Signed Alex Mi Harry Clerk
	HENDRICKS Circuit Court

I. Are you now or have vitue An Imbecile Of Unsound Mana 2. Are you under guardianahii 3. Are you now or have you been home for indigent persons If answer to \$ 18 "yes" has the 4. Are you afflicted with a transmi 5. Are you related to the brute cross 6. Are you now under the influence I. Are you now under the influence 8. Are you able to support a fund 9. Are you likely to so continue 10. Do you have minor children toon Of yes, answer questions a L c (a) List their full marners agos a

Other (Specify

(c) Are you complying with any their support II. Full name of father Residence of father lif decreases Occupation of father Birthplace of father (State on)

(b) Are you supporting to cont

12. Full maiden name of mother Residence of mother 111 deceman Occupation of mother Birthplace of mother State on State of Indiana.

New Address Subscribed and sworn to before no Ster 11

County of HENDRICKS

CONSENT OF PARENTS, PAREN We, the parents, of this applicants signs, state facts which

State of Indiana, County of HENDRICK Signed Subscribed and sworn to before n

COMPLETE IF MARKIA HENDRICKS

Be 31 Remen of Indiana dated the
Be it further remembered
L. Jerry R. Na one thousand nine hundred

State of Indiana, Grown and, Bride were by me united in mar-Dated this

Filed and recorded in accor

APPLICATION FOR MARRIAGE LICENSE

MALE Medical Examination Report Dated 8-1-76	County	
0	8-16-76	
	FEMALE Date of App	Dication
Name of Physician James Black,	Medical Examination Report Dated 8-1-76	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ALL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes up to pretense shall be fined in any sum not exceeding.	Name of Physician James Black	The same of the sa
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 etc.	
Name Middle Last	FEMALE APPLICANT	tement, representa-
Date of Birth Month Day Cruse	Name / First Middle	
Place of Birth (State or foreign country) 125/	Date of Birth Month Day	Crum
M. Charlerol Pa.	Place of Birth (State) or foreign country)	1955
Residence Address Street of R. R. City County State	Residence Address Street of R P	
Previous Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Both 135 Browns	being State
Last Marriage Ended By: Death Divorce Annulment		9,
White Ed Nove El Co	Previous Marital Status: Never Married Number of Previous Marrie	ages
(specify)	Last Marriage Ended By: Death Divorce Annulment	
Usual Occupation () auntance) Date of birth verified by:	Color or Race White Negro Other (specify)	The state of the last
Other (Specify) # 282 - finnoylvania	Usual Occupation	***************************************
1. Are you now or have you been adjudged, diagnosed or considered as:	Date of birth verified by: Birth Cert. Dudicial Decree	
Of Unsound Mind?	Other (Specify) # 3/65	
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:	The best of the last
If answer to 3 is "yes" has the cause of such condition been removed? No ☐ Yes ☐	An Imbecile?	No P 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 P Yes D
6. Are you now under the influence of intoxicating liquor? No Yes	3. Are you afflicted with a transmissible disease?	No P 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 P Yes D
9. Are you likely to so continue? Yes No	5. Are you now under the influence of intoxicating liquor?	No 🗗 Yes 🗆
10. Do you have minor children from one or more former marriages? No Yes (If yes, answer questions a, b, c)	6. Are you now under the influence of a narcotic drug?	No Yes
(a) List their full names, ages and addresses Name Age Address	7. Full name of father (if deceased so state) Same	A.L
	Residence of father (if deceased so state)	ier A
	Birthplace of father (State or fopeign country)	
Y-D ND	8. Full maiden name of mother Carol ann Wo	urick
(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) Same	
11. Full name of father Frank Jessey Crise	Occupation of mother Sicretary Race of mother	The state of the s
Building of lather 116 decreed on state 215 Center St. Belleve	enon Birthplace of mother (State or foreign country) Indiana	1
Occupation of father Steam Sitter Race of father Penn.	State of Indiana, I depose and state the	ne information given
Birthplace of father (State or foreign country) harling finn	County of HENDRICKS ss: in this application	is true and correct.
12. Full maiden name of mother flan Gudily Bracker	Signed & Cynthia Lynn	Crum
Residence of mother (if deceased so state) Same	New Address Box 503 Milliga	~ College TN
Occupation of mother Water Race of mother Penn Birthplace of mother (State or foreign country) Monteson Penn	Subscribed and sworn to before me this	ugust 10 76
State of Indiana	Ylen yn Harvey Gerk HENDRICKS	Circuit Court
County of HENDRICKS as: in this application is true and correct.		
Signed X Monat J Callege To 37682	CONSENT OF PARENTS, PARENT OR GUARDIAN	If only one parent
New Address Box 503, Milligan College Tn. 37682	We, the parents, of this applicant hereby give consent for this marriage	CREV
Subscribed and sworn to before me this day of day of Circuit Court	signs, state facts which render the consent of the other parent unneces	
A Comment of the Comm		*****************************
CONGRESS OF STREET OF CHAPTIAN		***************************************
CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent		
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		
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	State of Indiana, state of Ind	
We, the parents, of this applicant hereby give consent for this marriage. If only one parent	State of Indiana, County of HENDRICKS ss:	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. State of Indiana, Sound of the other parent unnecessary.	County of HENDRICKS Signed	
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.	County of HENDRICKS Signed Signed	Pather
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. Father Signed. Mother	County of HENDRICKS Signed Signed	Father Mother L
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 Mother Subscribed and was to before me this day of 19	Signed	Father 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 Subscribed and sworn to before me this day of	Signed	Pather Mother 19 Clerk amed parties, the
State of Indiana, County of HENDRICKS Signed Signed Signed Signed Subscribed and sworn to before me this. County of Mentage and sworn to before me this. Clerk COUNTY OF TAGENER ISSUED BY ORDER OF COUNTY OF THE PARTY O	Signed	Pather Mother 19 Clerk amed parties, the
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 Subscribed and sworn to before me this COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	Signed Signed Subscribed and sworn to before me this RT. A marriage license having been refused to the above national court by written order issued.	Father Mother Learned parties, the and filed
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 Mother Subscribed and sworn to before me this Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY HENDRICKS County authorizes and directs the issuance	Signed	Pather Mother 19 Clerk amed parties, the and filed
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 Mother Subscribed and sworn to before me this Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY HENDRICKS County authorizes and directs the issuance	Signed	Pather Mother 19 Clerk amed parties, the and filed
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 Mother Signed Mother Subscribed and sworn to before me this day of PADER OF COUNTY HENDRICKS County in authorizes and directs the issuance RETURN OF MARRIAGE LICEN	Signed	Clerk amed parties, the and filed Circuit Court 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 Signed Mother Subscribed and sworn to before me this COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY HENDRICKS County METURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE RETURN OF MARRIAGE LICENSE Of Indiana dated the 20 day of Magnetic factors and directs the issuance of Indiana dated the 20 day of Magnetic factors and day of Magnetic factors	Signed	Pather Mother 19 Clerk amed parties, the and filed Circuit Court 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	Signed	Clerk med parties, the and filed Circuit Court husband and wife endricks, Tennessee
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	Clerk Clerk and filed Circuit Court husband and wife endricks Tennessee
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	Clerk Clerk and filed Circuit Court husband and wife endricks Tennessee
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	Clerk amed parties, the and filed Circuit Court husband and wife endricks Tennessee Indiana RICKS
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 Mother Signed Mother Subscribed and sworn to before me this day of 19	Signed Signed Subscribed and sworn to before me this	Circuit Court husband and wife endricks. Tennessee 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. State of Indiana, County of HENDRICKS Signed Mother Signed Mother Signed Mother Signed Mother Signed Mother Signed Mother Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY In authorizes and directs the issuance authorizes and directs the issuance of Indiana dated the day of MARRIAGE LICEN Be It Remembered, there was filed in my office a marriage license issued for thousand nine hundred and 76 State of Indiana, Groom Thomas J. Crise and, Bride Cynthia Lynn Crum of 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 likely and the consent of the other parent unnecessary. State of Indiana, Commanda and the consent of the other parent unnecessary. State of Indiana, Commanda and the consent of the other parent unnecessary. State of Indiana, Commanda and the consent of the other parent unnecessary. State of Indiana, Commanda and the consent of the other parent unnecessary. State of Indiana, Commanda and the consent of the other parent unnecessary. State of Indiana, Commanda and the consent of the other parent unnecessary. State of Indiana, Commanda and the consent of the other parent unnecessary. State of Indiana, Commanda and the consent of the other parent unnecessary. State of Indiana, Commanda and the consent of the other parent unnecessary. State of Indiana, Commanda and the consent of the other parent unnecessary. State of Indiana, Commanda and the consent of the other parent unnecessary. State of Indi	Signed	Clerk Clerk amed parties, the and filed Circuit Court husband and wife endricks Tennessee Indiana RICKS
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 Mother Signed Mother Signed Mother Signed Mother Signed Mother Signed Mother Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY In authorizes and directs the issuance authorizes and directs the issuance of Indiana dated the day of MARRIAGE LICEN Be It Remembered, there was filed in my office a marriage license issued for thousand nine hundred and 76 State of Indiana, Groom Thomas J. Crise and, Bride Cynthia Lynn Crum of 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 likely and the consent of the other parent unnecessary. State of Indiana, Commanda and the consent of the other parent unnecessary. State of Indiana, Commanda and the consent of the other parent unnecessary. State of Indiana, Commanda and the consent of the other parent unnecessary. State of Indiana, Commanda and the consent of the other parent unnecessary. State of Indiana, Commanda and the consent of the other parent unnecessary. State of Indiana, Commanda and the consent of the other parent unnecessary. State of Indiana, Commanda and the consent of the other parent unnecessary. State of Indiana, Commanda and the consent of the other parent unnecessary. State of Indiana, Commanda and the consent of the other parent unnecessary. State of Indiana, Commanda and the consent of the other parent unnecessary. State of Indiana, Commanda and the consent of the other parent unnecessary. State of Indi	Signed	Clerk Clerk amed parties, the and filed Circuit Court husband and wife endricks Tennessee Indiana RICKS
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	Clerk Clerk amed parties, the and filed Circuit Court husband and wife endricks Tennessee Indiana RICKS

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

No.	35	2				
File_	B	ook		3	7	
a	un.	16.	/	9	7	1

hap. 126, Ind. Acts 1905	
HENDRIC	KS County Date of Application
MALE 2 3/3(FEMALE 9 13 7
Medical Examination Report Dated	Medical Examination Report Dated 8 / 3 - 7 5
Name of Physician Ot. K. K. Schryer, 2. 2.	Name of Physician Wm. Edward, h.D.
LL QUESTIONS MUST BE ANSWERED, Chapter 126, Indiana Acts 1905 prescribes "False storn 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
soules Philip Vine	Name Leberah ann Willie
ate of Birth Month Day Year	Date of Birth Month Day Year 1955
bt. Cath green Dincaln Co. Canad	Place of Birth (State or foreign country)
enidence Address Street or B. B. City County State 676 Danakorenah due. Ottawa 13. Ont.	Residence Address Street or R. B. City County State 967 Broadway 50 Duni Claudiel Handricks
revious Marital Status: Never Married & Number of Previous Marriages	Maiden Name if Different
ast Marriage Ended By: Death Divorce Annulment	Previous Marital Status: Never Married X Number of Previous Marriages
olor or Race White W Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment
0 10	
ate of birth verified by: Birth Cert. Fedicial Decree CUFF B060719	Color or Race White Negro Other (specify)
Other (Specify) Provice of Ontain, Comple	Usual Occupation Student Detect North profess by Begins Court of Indical Decree of Assis aville King
1. Are you now or have you been adjudged, disgnosed or considered as: No Yes Ves Ves	Date of birth verified by: Brith Cert. Judicial Decree Toursville Kug Other (Specify) Bureau of Vital S.
Of Unsound Mind? No Yes No Yes Yes Yes Yes	1. Are you now or have you been adjudged, diagnosed or considered as:
1. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons? Yes	An Imbecile? No S Yes :
If answer to 3 is "yes" has the cause of such condition been removed? No Yes . 1. 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
I. Are you related to the bride closer than second cousin? No Yes No Yes	3. Are you afflicted with a transmissible disease? No 🖫 Yes 🗆
Are you now under the influence of a narcotic drug?	4. Are you related to the groom closer than second cousin? No - Yes -
f. Are you able to support a family? No \(\text{No} \) No \(\text{No} \) No \(\text{No} \)	5. Are you now under the influence of intoxicating liquor? No Ves
). 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. Will name of father Richard Elslon William.
(a) List their full names, ages and addresses Name Age Address	Residence of father (if deceased so state) 967 Broxling 500. Blunge
	Occupation of father Bullic Sew Race of father W
	Birthplace of father (State or foreign country) New albany.
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Janice and Elman
(c) Are you complying with any court order or orders issued for their support?	Residence of mother (if deceased so state) 967 But hway 5. Due.
1. Full name of father William Thanking The	Occupation of mother Race of mother Race of mother
Residence of father (if deceased so state) 676 Barrahander die	Birthplace of mother (State or foreign country) New ash was
Birthplace of father (State or foreign country) St. Catherine, Orto	State of Indiana. State of Indiana. I depose and state the information given in this application is true and correct.
Full malden name of mother Winifiel Ming Jimmin	County of HENDRICKS in this application is true and correct.
Residence of mother (if deceased so state) 676 Barrharden dae .	Signed Alboral a. Gilles
Occupation of mother Naval traff Race of mother W	New Address 250 tages 52. #18, Ottawn.
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of
ounty of HENDRICKS as: I depose and state the information given in this application is true and correct.	Blen Mr. Harry Gerk HENDRICKS Circuit Court
Signed How to Nove	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address & S Chaper St. 478, Want.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
ble In Saraty Gerkhendricks Circuit Court	signs, state facts which render the consent of the other parent unnecessary
ONSENT OF PARENTS, PARENT OR GUARDIAN	
e, the parents, of this applicant hereby give consent for this marriage. If only one parent	
gns, state facts which render the consent of the other parent unnecessary	
	State of Indiana,
tate of Indiana.	County ofHENDRICKS
ounty of HENDRICKS	Signed
Signed Father Mother	Signed Mother
Signed Mother sherribed and sworn to before me this day of , 19 ,	Subscribed and sworn to before me thisday of
Clerk	Clerk
OMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUL	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.
RETURN OF MARRIAGE LICENS	SE AND MARRIAGE CERTIFICATE
Be It Remembered, there was filed in my office a marriage lice	ense issued by the clerk of the HENDRICKS Circuit Court
Indiana dated the 20 day of Uniquest	, 19.76, authorizing the joining together as husband and wife
e it further remembered, the following marriage certificate was filed in my	
Reverend Richard Zore	hereby certify that on the 2 st day of Assassation,
ne thousand nine hundred and	at I las of seld , County of Hendricks,
tate of Indiana, Groom Douglas Philip Vine	of Carleton County, State of Ontaria
nd, Bride State of of or warriage as authorized by a marriage license issued for	that purpose by the Clerk of the Circuit Court of HENDRICKS
ounty.	
ated this 20th day of Desgunt, 1976	Signed Res Richard Bore
	Official Designation Roman Catholif Pricet

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

MALE Medical Examination Report

Previous Marital Status Last Marriage Ended By Usual Occupation Date of birth verified by TOther (Specify) Of Unsound Mind 2. Are you under guardianship as a 3. Are you now or have you been home for indigent persons

6. Are you now under the influence 1. Are you now under the influence 8. Are you able to support a tami. 9. Are you likely to so continue 10. Do you have minor children from If yes, answer questions a, b, c (a) List their full names, ages a Stephen Shot

(b) Are you supporting or cont (c) Are you complying with an their support? 11. Full name of father

If answer to 3 is "yes" has the ca 4. Are you afflicted with a transmi 5. Are you related to the bride close

Residence of father (if deceased Occupation of father Birthplace of father (State or 12. Full maiden name of mother Residence of mother (if decease

Occupation of mother Birthplace of mother (State or State of Indiana, County of HENDRICKS

New Address

Subscribed and sworn to before me CONSENT OF PARENTS, PAREN We, the parents, of this applicant signs, state facts which render the

State of Indiana, County of HENDRICKS Signed Signed Subscribed and sworn to before me

COMPLETE IF MARRIAG HENDRICKS in Charles and John and

Be It Remen of Indiana dated the Be it further remembered 1, phon la one thousand nine hundred State of Indiana, Groom and, Bride were by me united in marr

Filed and recorded in acce

....Clerk

Circuit Court

HENDRICKS.

Dated this

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

File Bk 37

HENDRICH	S File Bk 37
MALE	County August 16 1976
Medical Examination Report Dated 8-14-76	FEMALE Date of Application
Name of Physician Leller Edwards	Medical Examination Report Dated 8-14-76
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 William Edward
MALE APPLICANTS	tement—Whoever procures the issuance of a license to
Name First Middle	Table to marry by any false statement, representa-
Det Last	Name A/ First
July 27 Year	Date of Birth Month
Place of Birth (State or foreign country)	Place of Birth (State or foreign country) Day Year 1950
Residence Address Street or R. R. City County , State	Prillersburg Posses
Previous Marital Status: Never Married Number of Previous Marriages	2322 La halt fith City County State
Last Marriage Ended By: Death Divorce Annulment	Maiden Name it Different Astor
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
1 10	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) Voters affectment #14747	Usual Occupation
1. Are you now or have you been adjudged, diagnosed or considered as: An Imbecile? No Yes	Date of birth verified by: Birth Cert. Judicial Decree
Of Unsound Mind? No Yes	Dother (Specify) Dr. Lucino #14-026-290
3. Are you now or have you been within five (5) years an inmate of a county asylum or	1. Are you now or have you been adjudged, diagnosed or considered as:
If answer to 3 is "yes" has the cause of such condition been removed? 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?	2 Are you under quardianable and a second se
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 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? Yes No	5. Are you now under the influence of intoxicating liquor? No B 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 Shandhard but the ray Taster
David Schitt 16 akron Ohio	Residence of father (if deceased so state) & Askers being to a
Afterior Salatt 15 1.	Occupation of father Mandament Race of father Birthplace of father (State or foreign country)
Stopler Schott 9 ". "	8. Full maiden name of mother Assolutes Senevens Desage
(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) West Humbers,
their support?	Occupation of mother Advisor Race of mother to
11. Full name of father Mayor Xladdy Xladdy X	Birthplace of mother (State or foreign country)
Residence of father (if deceased so state)	Birthplace of mother (State of loreign County)
2 7/ + 1/4	State of Indiana, State of Indiana, State
Birthplace of father (State or foreign country) 12. Full maiden name of mother Kathanga Lan Xibath	County of HENDRICKS
Residence of mother (if deceased so state)	Signed Holling William Signed
Occupation of mother To anthrop Race of mother To	New Address PO Bat 10659 Oslando The
Birthplace of mother (State or foreign country) Cleaton, Shall	Subscribed and sworn to before me this day of 191
State of Indiana, Santa of Indiana, I depose and state the information given in this application is true and correct.	Glerk HENDRICKS Circuit Court
& Cha W. Schatt	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address P.O. Box 10059 Oslanda Fla.	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Subscribed and sworn to before me this 16 day of August, 1974.	We, the parents, of this applicant necessary signs, state facts which render the consent of the other parent unnecessary
Lles M Lawey Clerk HENDRICKS Circuit Court	signs, state facts which render the communications are signs, and the communication are signs, and the communications are signs, and the communication are signs, and
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, HENDRICKSss:
	County of Father
State of Indiana, County of	Signed
Father	Signed
0' - 1	Subscribed and sworn to before me this
Subscribed and sworn to before me this	
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COURT	ourt by written order issued 3 hard his hard
HENDRICKS County	of a marriage license
RETURN OF MARINE	nse issued by the cities the joining together as husband and wife
We It Remembered, there was filed in my office a manual	1976, authorizing anselle
of Indiana dated the age of any of	and little
D marriage certificate	· 1 · contitu that the
of Indiana dated the day of day of Be it further remembered, the following marriage certificate was filed in my I, Maccella.	at Danville County State of Indiana
200 48	State of State of
State of Indiana, Groom & lane W. Schotte	HENDRICKS
State of Indiana, Groom by a U. Schott of and, Bride heresa a Unsell of were by me united in marriage as authorized by a marriage license issued for County.	of Sendricks County, State of Siderics Of County, State of Siderics County, State of HENDRICKS that purpose by the Clerk of the Circuit Court of HENDRICKS
County. Quegest, 19.7.	Signed Judge Gendricks Co. Collect
were by me united in marriage as authorized by a marriage County. Dated this 6 day of Cegust 19 7	Official Designation Judge Hendricks Co. 19 76
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Glen M. Garnes Circuit Court HENDRICKS
Filed and recorded in accordance with the laws of the Suite of	SignedHENDRICKS

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No. 354

File Book 37

Aug. 16. 1976

MAYE	FEMALE 8-7-74
MALE Medical Examination Report Dated 8 - > - 7 -	Medical Examination Report Dated
Coin and my s	Name of Physician Cuc Clark, A. 25-
Name of Physician Out Claude, 100.70	Wheever 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 stattion or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)".	Ellent Whotel product of the Control
MALE APPLICANT	FEMALE APPLICANT Niddle Last
Name Kirst Middle Last	Name Juna June Farmer
Date of Birth Month Day Year	Date of Birth Month Day Year
Place of Birth (State or foreign couptry)	Place of Birth (State or Greign country)
Indianapoles, mollon Co. 1 your	Residence Address Street or R. R. City County State
Residence Address Street or R. R. City County State	4013. Close St., Sandelle Hend, Co. Und.
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 Annument	Last Marriage Ended By: Death Divorce Annulment
Color or Race White Negro Other (specify)	Last Mairiage Didde 27
Usual Occupation assistant marray	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree # 12-31-56-	Usual Occupation Unemplayed
Other (Specify) Beliebin Surice Carl 35/	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 \(\subseteq \) Yes \(\subseteq \)	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?	2. Are you under guardianship as a person of unsound mind? No Yes
6. Are you now under the influence of intoxicating liquor? No F Yes	3. Are you afflicted with a transmissible disease?
7. Are you now under the influence of a narcotic drug? No Yes	4. Are you related to the groom closer than second cousin?
8. Are you able to support a family? 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.
Name 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)
(A) As an expositing or contributing to their support? Yes No	8. Full maiden name of mother Sterry Lynn Workhow
(c) Are you complying with any court order or orders issued for	Residence of mother (if deceased so state) 40/5.002.50
their support:	Occupation of mother Hausewife Race of mother w.
11. Full name of father 1228 1307 Pac Cullum 5	Birthplace of mother (State or foreign country) Herdrick Co.
Occupation of father Selection Rate of father	danville.
bo a half all all a	State of Indiana, I depose and state the information given in this application is true and correct.
Birthplace of father (State or foreign country) Toseway 31 kg. 12. Full maiden name of mother of olone They 31 kg.	County ofHENDRICKS
Residence of mother (if deceased so state) 1307. Reculeum 51.	Signed Jua Lysul Jamel
Occupation of mother Receipt - Or . Off Race of mother	New Address SY 5. Cross St. Samuelle
Birthplace of mother (State or foreign country) Rockford Ill.	Subscribed and sworn to before me this
State of Indiana, I depose and state the information given	Lilen M. Hanney Clerk HENDRICKS
County of HENDRICKS ss: in this application is true and correct.	Clerk HENDRICKS. Circuit Court
of the standard was	
Signed	CONSENT OF PARENTS PARENT OR GUARDIAN
New Address SY S. Oran St Danulle	CONSENT OF PARENTS, PARENT OR GUARDIAN
5 4 5 Pre 52 Champello	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
New Address SY 5. Oron 51 Danuelle	
New Address SY 5. Arm Sl danulle Subscribed and sworn to before me this 16 day of aug 1976 Sile M. Harvey ClerkHENDRICKS Circuit Court	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
New Address SY 5. Oran 51 Chanulle Subscribed and sworn to before me this 16 day of duy, 19.76	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
New Address SY 5. Pron Sl Canullo Subscribed and sworn to before me this 16 day of Que 19.76 Subscribed and sworn to before me this 16 day of Que 19.76 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 19.76 ClerkHENDRICKS Circuit Court 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
Subscribed and sworn to before me this day of 19.76 ClerkHENDRICKS Circuit Court 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
New Address. S. & S	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
New Address. St. S. Grand S. Garnello Subscribed and sworn to before me this. Gay of	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
New Address. S. & & & & & & & & & & & & & & & & & &	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
New Address. S. & S	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
New Address. S. & S	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 S
New Address. S. & S	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 S
Subscribed and sworn to before me this	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 Author Subscribed and sworn to before me this Clerk RT. A marriage license having been refused to the above named parties, the
Subscribed and sworn to before me this	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 HENDRICKS Signed HENDRICKS Signed HENDRICKS County of Mother Subscribed and sworn to before me this day of Cury 19.76 Clerk ORT. A marriage license having been refused to the above named parties, the Court by written order issued and filed
Subscribed and sworn to before me this day of	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 HENDRICKS Signed HENDRICKS Signed HENDRICKS County of Mother Subscribed and sworn to before me this day of Mother Court by written order issued and filed
Subscribed and sworn to before me this. Aday of	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 HENDRICKS Signed HENDRICKS Signed HENDRICKS County of Mother Subscribed and sworn to before me this day of Mother Court by written order issued and filed
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. State of Indiana, County of HENDRICKS Signed Father Signed Mother Subscribed and sworn to before me this. COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY in authorizes and directs the issuance of the state of	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 James James Mother Subscribed and sworn to before me this day of James Clerk IRT. A marriage license having been refused to the above named parties, the court by written order issued and filed to fa marriage license to the above named parties.
Subscribed and sworn to before me this. day of	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 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 ense issued by the clerk of the HENDRICKS Circuit Court
Subscribed and sworn to before me this. day of	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 Authority of day of Authority Clerk Subscribed and sworn to before me this day of Authority 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 ense issued by the clerk of the HENDRICKS Circuit Court
New Address	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 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 COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY of MENDRICKS in authorizes and directs the issuance of Indiana dated the day of Marriage License is sufficient was filed in my office a marriage license of Indiana dated the day of Marriage certificate was filed in my Indianal Marriage Control of Indiana dated the day of Marriage certificate was filed in my Indianal Marriage Certificate was filed	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 And And And And And And And And And An
Subscribed and sworn to before me this day of 19.76 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 COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY of HENDRICKS County authorizes and directs the issuance of Indiana dated the day of Marriage License is sufficient my office a marriage license is filed in my office a marriage license in the subscribed in my office a marriage license is filed in my office a marriage license is filed in my office a marriage license in the subscribed in my office a marriage license is filed in my office a marriage license in the subscribed in my office a marriage license is filed in my office a marriage license in the subscribed in my office a marriage license i	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 And And And And And And And And And An
Subscribed and sworn to before me this. G day of CerkHENDRICKS 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 COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY HENDRICKS County authorizes and directs the issuance of Indiana dated the 20th day of 19. Be It Remembered, there was filed in my office a marriage lice of Indiana dated the 20th day of 19. Be it further remembered, the following marriage certificate was filed in my one thousand nine hundred and 76. State of Indiana, Groom Maratalad Audellad Au	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 HENDRICKS Signed HENDRICKS Signed HENDRICKS Signed HENDRICKS Signed HENDRICKS Clerk RT. A marriage license having been refused to the above named parties, the court by written order issued and filed to fa marriage license to the above named parties. SE AND MARRIAGE CERTIFICATE ense issued by the clerk of the HENDRICKS Circuit Court 19 The authorizing the joining together as husband and wife office, to-wit: hereby certify that on the Alamana County of Hendricks at Alamana County of Hendricks
Subscribed and sworn to before me this. G day 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. State of Indiana, County of HENDRICKS Signed Signed Subscribed and sworn to before me this. Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY HENDRICKS County in authorizes and directs the issuance RETURN OF MARRIAGE LICEN Be it further remembered, the following marriage certificate was filed in my one thousand nine hundred and State of Indiana, Groom The Markiage License State of Indiana, Groom State of Indiana State of	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 A June 1 Agricult Father Signed A June 1 Agricult Father Subscribed and sworn to before me this day of 19 7 6 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 ense issued by the clerk of the HENDRICKS Circuit Court 19 7/26, authorizing the joining together as husband and wife office, to-wit: hereby certify that on the 2/27 day of August Agricult Father Science
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. State of Indiana. County of HENDRICKS Signed. Signed. Subscribed and sworn to before me this. Complete IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY In authorizes and directs the issuance of Indiana dated the day of August Be it further remembered, there was filed in my office a marriage lice of Indiana dated the day of August Be it further remembered, the following marriage certificate was filed in my one thousand nine hundred and State of Indiana, Groom August Marriage discussed 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 the particular and the limited in marriage as authorized by a marriage license issued for the particular and the license issued for the particular and the license issued for the particular and the license issued for the license i	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 A Marriage license having been refused to the above named parties, the Court by written order issued. SE AND MARRIAGE CERTIFICATE ense issued by the clerk of the HENDRICKS Circuit Court 19 26 SE AND MARRIAGE CERTIFICATE ense issued by the clerk of the HENDRICKS Circuit Court 19 26 19 27
Subscribed and sworn to before me this	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 Add Add of Grant Court Court of HENDRICKS RT. A marriage license having been refused to the above named parties, the court by written order issued and filed the analysis of the clerk of the HENDRICKS SE AND MARRIAGE CERTIFICATE ense issued by the clerk of the HENDRICKS office, to-wit: hereby certify that on the Add Add of Add of Add County of Hendrich Court, at the court of HENDRICKS County, State of Add County, State of County, State of HENDRICKS or that purpose by the Clerk of the Circuit Court of HENDRICKS
New Address	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 A James A Jam
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. State of Indiana, County of. HENDRICKS Signed Signed Signed Subscribed and sworn to before me this. COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY HENDRICKS County In. Be It Remembered, there was filed in my office a marriage lice of Indiana dated the. Although Hendrick day of the following marriage certificate was filed in my one thousand nine hundred and. State of Indiana, Groom And Hendrick day of the following marriage certificate was filed in my one thousand nine hundred and. State of Indiana, Groom And Hendrick day of the following marriage certificate was filed in my one thousand nine hundred and. State of Indiana, Groom And Bride And	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 Adams Signed Signe
Subscribed and sworn to before me this.	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 James 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 ense issued by the clerk of the HENDRICKS of ince, to wit: hereby certify that on the day of August August County of Gendalish County, State of Marking Count
Subscribed and sworn to before me this. ClerkHENDRICKS 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 Mother Subscribed and sworn to before me this day of 19 Clerk COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COUNTY In authorizes and directs the issuance RETURN OF MARRIAGE LICENSE ISSUED of Indiana dated the Subscribed in my office a marriage lice Indiana India	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 Adams Signed Signe

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

MALE Medical Examination Report Dated 8-11-76	Date of Application
Name of Physician L. 21. Ellis	Medical Examination D
LL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state on or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	ement—Whoever procures the issue of the
MALE APPLICANT ame First Middle	
Tuesley Stout TI	Name First Middle
lace of Birth (State or foreign country) 25 Year 1922	Date of Birth Month Day Pincheem
Indianapalis Indian	Place of Birth (State or foreign quuntry)
esidence Address Street or R. R. City County State 111 n Grant Brownsburg County	Residence Address Street or R. R. Street
revious Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Brownsburg Ind.
ast Marriage Ended By: Death Divorce Annulment	Previous Marital Status: News Marita Rev
color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages 2 Last Marriage Ended By: Death Divorce Previous Marriages 2
Isual Occupation Took & Die maker	Zivote & Annument []
Date of birth verified by: Birth Cert. Judicial Decree	Color or Race White Negro Other (specify)
Other (Specify)	Usual Occupation Cook
An Imbecile? Of Unsound Mind? No Yes No Yes	Date of birth verified by: Birth Cert. Judicial Decree Centucky What Manualine
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 assum 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	An Imbecile? Of Unsound Mind? No P Yes
4. Are you afflicted with a transmissible disease? No 2 Yes 5. Are you related to the bride closer than second cousin? No 2 Yes 1	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 7. Are you now under the influence of a narcotic drug? No Yes 7.	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
0. Do you have minor children from one or more former marriages? No Z 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 William Ethelbert It Litaker
Name Age Address	Residence of father (if deceased so state)
	Occupation of father
(b) Are you supporting or contributing to their support? Yes No	8. Full maiden name of mother Welley Hargis
(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) Somerset, Hentucky
11. Full name of father Wesley, Storet, Ja.	Occupation of mother returned Race of mother of the kee
Residence of father (if deceased so state) Williald	Birthplace of mother (State or foreign country). Subdistable Although
Occupation of father Race of father M	State of Indiana, State of Indiana, I depose and state the information given in this application is true and correct.
Birthplace of father (State or foreign country) Shouthing Hasselburg	County of HENDRICKS 200 Planchura
Residence of mother (if deceased so state) Deceased	New Address / 1 / N. Snant St. Brownshing Chy)
Occupation of mother	Subscribed and sworn to before me this
Birthplace of mother (State or foreign country) State of Indiana, I depose and state the information given	Hen m Harrey Clerk HENDRICKS Circuit Court
County of HENDRICKS application is true and correct.	
Signed & Signed & Bennsbay	CONSENT OF PARENTS, PARENT OR GUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent
New Address. Subscribed and sworn to before me this. 6 day of 3449. 19.76	We, the parents, of this applicant hereby give consent of the other parent unnecessary signs, state facts which render the consent of the other parent unnecessary
Llen M. Harry Clerk HENDRICKS Circuit Court	signs, state facts which felder
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 consent of	State of Indiana, ss:
	County of HENDRICKS Father
State of Indiana,	Signed
County of HENDRICKS Father Signed Mother	Signed
	Subscribed and sworn to before me thisday ofClerk
Subscribed and sworn to before me this	forced to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COU	RT. A marriage license having been refused to training and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY	Court by written order issued
in Clerk's Office authorizes and directs the issuance	OF AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court
DETUDN OF MARRIAGE	husband and wife
RETURN OF MARRIAGE LICEN RETURN OF MARRIAGE LICEN Be It Remembered, there was filed in my office a marriage lice	& Pla Mal Finchesen
of Indiana dated the day	and
Be it further remembered, the following marriage certificate	hereby certify that of Country of Australia, Country of Australia
	Chata at Chata
Be it further remembered, the following marriage county. In the surface of Indiana, Groom Tuesley Street II and, Bride State of Indiana, Groom Tuesley Street II and, Bride State of Indiana, Groom Tuesley Street II and, Bride State of Indiana, Groom Tuesley Street II and, Bride State of Indiana, Groom Tuesley Street II and I and I am arriage as authorized by a marriage license issued for were by me united in marriage as authorized by a marriage license issued for County.	Mandricks County, of HENDRICKS
and, Bride Ella Male Sinchella Vicanse issued fo	r that purpose by the Clerk of the Charles
were by me united in marriage as authorized by a marriage usens	16. Signed John C. Mauret 1, R. Paret
Date 1 41: 9 D day of	1 Designation 19 19 19
	20 day of Husques Clerk
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Slen M. Marrieg Circuit Court HENDRICKS
The state of the s	

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No	356
File	
r ne	8-16-76

HENDRICK	Date of Application
MALE Medical Examination Report Dated 8-13-76	FEMALE Medical Examination Report Dated 8-13-76 Authord Authord
Name of Physician James 6. Southard	Name of Physician pmes 6. Southard
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)". MALE APPLICANT	FEMALE APPLICANT
Name First Middle Last	Name First Middle Last
Richard Lee Kains	Date of Birth Month Day Year
Date of Birth Month Day Year	(lug 29 1952
Place of Birth (State or foreign country)	Place of Birth (State or foreign fountry) Indianapolis n.
Residence Address Street or R. R. City County State	Residence Address # Street or R. K. City County State
R + 1 Box 107 Wanvelle Sna.	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	- Hendrich
Color or Race White Negro Other (specify)	Last Marriage Ended By: Death Divorce Annulment 1974
Usual Occupation (arbentar)	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation Roof Read W
Other (Specify) Selective Service -12-216-52-20	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) # 8747
Of Unsound Mind? 2. Are you under guardianship as a person of unsound mind? No Yes Yes	1. Are you now or have you been adjudged, diagnosed or considered as:
3. Are you now or have you been within five (5) years an inmate of a county asylum or home for indigent persons?	An Imbecile?
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	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?	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 \(\subseteq \text{No} \)	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 E Yes No E Y
 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 (if deceased so state)
Name Age Address	Occupation of father Race of father Race of father
	Birthplace of father (State or foreign country) Indiana
	8. Full maiden name of mother Lora Edna Kivett
(b) Are you supporting or contributing to their support? Yes □ No □ (c) Are you complying with any court order or orders issued for	P#2 Sel 8 Hamille
their support? Yes No	Residence of mother (if deceased so state)
11. Full name of father XXXIII (1) TO AND (1) (1) (1) (1) (1)	Occupation of mother Race of mother Race of mother
Residence of father (if deceased so state) 233 140 (LISTON XPLLAUS)	Birthplace of mother (State or foreign country)
Rolling Ollegain	State of Indiana, I depose and state the information given
Birthplace of father (State or foreign country) (1000000000000000000000000000000000000	County of HENDRICKS in this application is true and correct.
Residence of mother (if deceased so state) 6033 Hallester Apende	Signed X Ola y, Raina
Occupation of mother	New Address RR # 1 Box 107 Danuble On
Birthplace of mother (State or foreign country) Marshall Oll.	Subscribed and sworn to before me this /6 day of Quaguet, 19.76
State of Indiana, I depose and state the information given	W. In the second
County of HENDRICKS in this application is true and correct.	Clerk HENDRICKS Circuit Court
Signed M. R. F. I BOX 107 Panville	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 duquet, 19.76.	signs, state facts which render the consent of the other parent unnecessary
	signs, state facts which relief 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 ofHENDRICKS
County of HENDRICKS.	SignedFather
Signed Father	SignedMother
Signed	Subscribed and sworn to before me thisday of
Clerk	Clark
	Uler A
	RT. A marriage license having been refused to the above named parties, the
	ourt by written order issued
inauthorizes 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 HENDRICKS Circuit Court
of Indiana dated the day of day of	, 19. 76, authorizing the joining together as husband and wife
Be it further remembered, the following marriage certificate was filed in my	and Osla Jolanda Laing office, to-wit:
I, Fred O Rice	hereby certify that on the 2/st day of August
one thousand nine hundred and.	at Indianapalis Countries marion
State of Indiana, Groom The Chara & Kains	of Hendricks County State of Melion
and, Bride Illa of Juna 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
Country.	
Dated this 2/ot day of Amount, 19.76	Signed Fred O. Rice
	Official Designation Pasto
Filed and recorded in accordance with the laws of the State of Indiana this	24 day of august 1976
	Signed Slen Marriey Clerk

..HENDRICKS ...

STATE OF INDIANA APPLICATION FOR MARRIAGE LICENSE

File Bk 37 HENDRICKS County aug. 17, 1976

MALE Medical Examination Report Dated 8-16-76	Date of Application
Name of Physician David Haggard	FEMALE Medical Examination Report Dated
7	
LL QUESTIONS MUST BE ANSWERED. Chapter 126, Indiana Acts 1905 prescribes "False state on or pretense shall be fined in any sum not exceeding five hundred dollars (\$500.00)". MALE APPLICANT	ment—Whosean Pro-
MALE APPLICANT	whoever procures the issuance of a license to marry by any false statement, representa-
ame First Middle 1 Light -	Name Final
ate of Birth Month Day Year	E last Middle Last
lace of Birth (State or foreign country)	Date of Birth Month Day Year
esidence Address Street of R. R. City County	Place of Birth (State or foreign country)
306 S. Care Rd. Plainfield Land 11 place on 0	Residence Address Street of R. R. City County State
revious Marital Status: Never Married Number of Previous Marriages	Maiden Name if Different Clainfull Lendrick Ind.
ast Marriage Ended By: Death Divorce Annulment	Provious Montal Co. 1
Color or Race White Negro Other (specify)	Previous Marital Status: Never Married Number of Previous Marriages
	Last Marriage Ended By: Death Divorce Annulment
Judicial Decree	Color or Race White Negro Other (specify)
Dother (Specify) Selection Service # 12-30-54-443	Usual Occupation Belling - Niller Took
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? 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? No Yes
If answer to 3 is "yes" has the cause of such condition been removed? No Yes	An Imbecile? Of Unsound Mind? No P 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 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?
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 influence of a narcotic drug? No Wes
(a) List their full names, ages and addresses	7. Full name of father Harvard Monticelle Kentucky
Name Age Address	Occupation of father And International Race of father
	Birthplace of father (State or foreign country). Lentus life
	8. Full maiden name of mother Norma Lan Blanfugh
(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 Secretary Race of mother A
11. Full name of father for file of the fi	Birthplace of mother (State or foreign country)
Residence of father (if deceased so state) Place full Race of father ()	at the information given
Occupation of father (State or foreign country)	State of Indiana, County of HENDRICKS Ss: I depose and state the information given in this application is true and correct.
12. Full maiden name of mother Round for Lee	MINIMO (POSSELL
Residence of mother (if degeased so state). Place field,	Signed 406 Peckettle
Occupation of mother Assassant A Race of mother	New Address /7 day of Desgrand 1976
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of Clerk HENDRICKS Circuit Court
State of Indiana, State of Indiana, State	Xlean II farmer
County of HENDRICKS Signed Mark & Laylor	CONSENT OF PARENTS, PARENT OR GUARDIAN
New Address 406 Rickett	W. the parents, of this applicant hereby give consent for this marriage. If only one parent
day of luguest, 19/6.	signs, state facts which render the consent of the other parent unnecessary
Subscribed and sworn to before me this	
CONSENT OF PARENTS, PARENT OR GUARDIAN	
We the perents of this applicant hereby give consent for this marriage.	
signs, state facts which render the consent of the other parent unnecessary	State of Indiana, } ss:
	County of HENDRICKS
	Signed
State of Indiana, County of HENDRICKS.	SignedMother
and a second sec	and sworn to before me thisday of
Signed, 19,	
Subscribed and sworn to before me this	have refused to the above named parties, the
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF COULT. HENDRICKS	RT. A marriage license having been reluced and filed
COMPLETE IF MARRIAGE LICENSE ISSUED BY ORDER OF	ourt by written order issued
HENDRICKS and directs the issuance	
COMPLETE IF MARRIAGE LICENSE ISSUED BY COMPLETE IF MARRIAGE LICENSE ISSUED BY COMPLETE IS MARRIAGE LICENSE ISSUED BY COMPLETE BY CO	SE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court ense issued by the clerk of the
n authorizes and directs the issuarch RETURN OF MARRIAGE LICENS Be It Remembered, there was filed in my office a marriage lice and any of the state of the issuarch and the is	SE AND MARRIAGE CERTIFICATE HENDRICKS Circuit Court ense issued by the clerk of the 19.76, authorizing the joining together as husband and wife and Elaine B. Caffley The to-wit:
Be It Remembered, there was day of	- 1 Elaine B. Coffley 1 +
of Indiana dated the belles Jaylar mas filed in my	and Elaine B. Caffly day of Sept. Her dayels.
Be it further remembered, the following marriage certificate was	hereby certify that on hereby country of Accountry of Accountry
1, marc Sonny	at Sendricks County, State of Indiana,
one thousand nine hundred and Saylor	at Slainfield County of Indiana of Hendricks County, State of Indiana, Lendricks Court of HENDRICKS
one thousand nine hundred and the factorial of State of Indiana, Groom Mark & Jacques of and, Bride & Laine D Caffley a marriage license issued fowere by me united in marriage as authorized by a marriage license issued for County.	of Hendricks County, State of Indiana, Nendricks County, State of Indiana, HENDRICKS r that purpose by the Clerk of the Circuit Court of HENDRICKS
and, Bride Callette And I migge license issued	, 0 //
were by me united in marriage as authorized by a marriage as County. Dated this	6. Signed Mark Gastor
Dated this 24 day of Might	Official Designation Baptist Sasson 1976.
this.	8 day of Namues Clerk
Filed and recorded in accordance with the laws of the State of Indiana this	Signed Slew M. Number Circuit Court
rued and recorded in accordance with	

STATE OF INDIANA

APPLICATION FOR MARRIAGE LICENSE

HENDRICKS County

No	358	
File_	BK 37	
1	44 / 17	10

	Date of Application
MALE a la la 1 se mant se	FEMALE \$/9/96
Medical Examination Report Dated	Medical Examination Report Dated
Name of Physician Juning Collen md	Name of Physician Juny Capier Ind.
ALL OUESTIONS MUST BE ANSWERED Chapter 126 Indiana Acts 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 Name Middle Last	Name First / Middle / Lagt
Name Gen Ray Brill Last	Bonita Unn Barker
Date of Birth Month Day Year	Date of Birth Month Day Year 1957
Place of Birth (State or foreign gountry)	Place of Birth (State of foreign country)
Residence Address Street of R. R. City County State	Residence Address Street or R. R. City County State
RR# 1 Box 4 Claytox In.	P. P. # 2 Box 166 Clayton, I
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 Negro Other (specify)	Dast Marriage Direct 27.
Usual Occupation Computer Programmer	Color or Race White Negro Other (specify)
Date of birth verified by: Birth Cert. Judicial Decree	Usual Occupation
Other (Specify) # 70 63	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) # 2363
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	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 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	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 James Hugh Durker
Name Age Address	Residence of father (if deceased so state)
	Occupation of father All Str. Race of father All Miles
	Birthplace of father (State or foreign country)
	8. Full maiden name of mother. The All Selvention
(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) Claytan In
their support?	Manunishin I . White
11. Full name of father The State of the Sta	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	State of Indiana, Sa: 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 the glade of the state of	Signed Banta & ann Barker
Residence of mother (if deceased so state)	201 11 001 10 10 11 20 -1.
Occupation of mother Race of mother Race of mother	New Address 46
Birthplace of mother (State or foreign country)	Subscribed and sworn to before me this day of day o
State of Indiana, County of HENDRICKS Ses: I depose and state the information given in this application is true and correct.	Mescary Clerk HENDRICKS Circuit Court
Signed Glen Kay Brill	
New Address 296 N. MILL ST Plainfield IN 46168	CONSENT OF PARENTS, PARENT OR GUARDIAN
Subscribed and sworn to before me thisday of	We, the parents, of this applicant hereby give consent for this marriage. If only one parent
Allen M. HANNIN CIERMENDRICKS Circuit Court	signs, state facts which render the consent of the other parent unnecessary
CONSENT OF PARENTS, PARENT OR CUARDIAN We, the parents, of this applicant hereby give consent for this marriage. If only one parent	Control Constitution of the Constitution of th
signs, state facts which render the consent of the other parent unnecessary	
Parties & college	State of Indiana,
State of Indiana,	County ofHENDRICKS
County of HENDRICKS	Signed Father
SignedFather	Signed
SignedMother	
Subscribed and sworn to before me thisday of, 19,	Subscribed and sworn to before me thisday of
Clerk	Clerk
CONTRACT IN MARRIAGE LIGENGE IGGUED DV ORDER OF COM	OT A manufact license begins begins begins to the little begins to the l
	RT. A marriage license having been refused to the above named parties, the
	ourt by written order issued
inauthorizes and directs the issuance	of a marriage license to the above named parties.
	SE AND MARRIAGE CERTIFICATE
Be It Remembered, there was filed in my office a marriage lice	nse issued by the clerk of the HENDRICKS Circuit Court
of Indiana dated the day of and allegist	
Flen yay Bull	and Bonita ann Barker
Be it further remembered, the following marriage certificate was filed in my	
7/	hereby certify that on the 28 day of liggers
one thousand nine hundred and	at 1 Gounty of Tendricks
State of Indiana, Groom	of County, State of Videna
and, Bride Donica H. Barren of	Yendricks County, State of Idiano,
	that purpose by the Clerk of the Circuit Court of
Dated this 28 day of August , 19 7	6 1
, 19	Signed Nanna L. adams
	Official Designation Ministry Christian Church
Filed and recorded in accordance with the laws of the State of Indiana this	31 day of aug. 1976
	Signed Gley M. Harvey Clerk